

NHS Ayrshire & Arran

Meeting:	Ayrshire and Arran NHS Board
Meeting date:	Monday 14 August 2023
Title:	Whistleblowing Annual Report 2022 - 2023
Responsible Director:	Jennifer Wilson, Nurse Director
Report Author:	Karen Callaghan, Corporate Governance Coordinator

1. Purpose

This is presented to the Board for:

- Discussion

This paper relates to:

- Scottish Government policy

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

- Safe
- Effective
- Person Centred

2. Report summary

2.1 Situation

The NHS Board is asked to receive and discuss this report on organisational activity in relation to whistleblowing for 2022-2023.

2.2 Background

Each NHS Board is required to provide an annual report to provide assurance that the Board has discharged its role as set out in The National Whistleblowing Standards.

Once approved by the NHS Board, the report is submitted to the Independent National Whistleblowing Officer (INWO).

2.3 Assessment

The report summarises and builds 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 report provides a

range of information to provide assurance to Governance Committee and Board members on our implementation and compliance with the Standards.

Key Messages

- All concerns raised as whistleblowing whether anonymous or named are now reviewed by the Whistleblowing Decision Team prior to being taken forward for investigation.
- A process has been established to support the recording of concerns from suppliers, including nil returns on a quarterly basis.
- To date 62% of managers have accessed and completed the Turas Learn modules.
- The first NHS Scotland Speak Up Week afforded the opportunity to further promote the whistleblowing process, the Confidential Contacts, the Speak Up Advocates and the training available.
- Our plans for 2022-2023 and delivering improvements from the review of our processes at the end of Year 2 to ensure best practice and good governance in our arrangements.

2.3.1 Quality/patient care

An open and transparent whistleblowing process ensures good-quality outcomes for cases raised 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 are no financial implications as a result of this annual report.

2.3.4 Risk assessment/management

Failure to have in place an open and honest whistleblowing process that delivers the requirements of The National Whistleblowing Standards could have an impact as valid concerns about quality, safety or malpractice may not be raised. The opportunity to investigate and address these concerns will have been lost, with potentially adverse impact on quality, safety and effectiveness of services in NHS Ayrshire & Arran. 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

This is an annual report on organisational activity in relation to whistleblowing and an impact assessment is not required for the report. A local Equality Impact Assessment (EQIA) which assesses the impact of the Standards on staff and those who provide services is available on our [public facing web](#).

2.3.6 Other impacts

This will support the requirements of the National Whistleblowing Standards.

- **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 to produce this annual report.

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 on 13 July 2023
- Staff Governance Committee on 7 August 2023

2.4 Recommendation

For approval. The NHS Board is asked to approve the annual report on organisational activity in relation to whistleblowing complaints from April 2022 – March 2023 for publication and submission to INWO.

3. List of appendices

Appendix 1 – NHS Ayrshire & Arran Whistleblowing Annual Report 2022-2023.



Whistleblowing Annual Report 2022-2023



Author: Karen Callaghan
Corporate Governance & Whistleblowing Coordinator
Updated 22/07/2022

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Introduction

This is the second NHS Ayrshire & Arran annual report which has been produced in line with the National Whistleblowing Standards (the Standards). It has been another interesting and busy year as we continue to learn from each concern that is raised and taken forward to investigation.

Since the go-live date of the Standards on 1 April 2021, an agreed process has been in place in NHS Ayrshire & Arran (NHSAA) to gather Whistleblowing information raised across all NHS Services to which the Standards apply. Within NHSAA, anyone who provides a service for NHSAA can raise a concern about the delivery of a health service using the same reporting mechanism which is in place for those staff employed by NHSAA. This includes former employees, agency workers (and others on short or insecure contracts such as locums and bank staff), contractors (including third-sector service providers), trainees and students, volunteers, non-executive directors, and anyone working alongside NHS staff, such as our colleagues in health and social care partnerships.

Whistleblowing is an ethical and moral thing to do, and NHSAA is supportive of any member of staff who raise concerns through this process. The decision to whistleblow is rarely taken lightly, and we in NHSAA are committed to offering a compassionate and objective whistleblowing service. Whistleblowing is an important form of feedback and provides the opportunity to receive direct and candid accounts of staff concerns. This in turn offers a key opportunity to learn and strive for improvement. Whistleblowing can also help the organisation in identifying risks and mitigating against any risks identified. We recognise that whilst risks can be to the service users, they can also be to the service providers/the organisation itself.

This annual report provides details of whistleblowing concerns raised across the organisation by staff and those who provide services on behalf of NHSAA. This will demonstrate our performance in the key performance indicators as required by the INWO and includes key areas of whistleblowing handling, as well as highlighting outcomes and providing more detail on whistleblowing themes. Over time, this approach will illustrate trends and more importantly, allow us to evidence necessary improvement and learning in response to the trends and themes demonstrated.



Jenny Wilson
Nurse Director
Executive Lead for Whistleblowing

1. Background

All NHS organisations and providers in Scotland are required to follow the National Whistleblowing [Principles](#) and the [Standards](#). This is a [Once for Scotland](#) approach aligned to the Principles and the Standards. All NHS Scotland Boards are required to publish their Annual Whistleblowing Report, which must also be shared with the INWO.

In order to deliver successful implementation of the Standards across the organisation and our wider groups, our Nurse Director, as Executive Lead, initially formed a Whistleblowing Steering Group (WBSG) to develop an implementation programme. This group included appropriate Directors, the Board's Non-Executive Whistleblowing Champion, the Employee Director and Area Clinical Forum Chair to ensure wide representation. As the work progressed this group developed into the Whistleblowing Oversight Group supported by an Implementation Group to deliver the detailed implementation programme. This implementation group involved sector leads, Nurse Director and Corporate Governance team representatives.

The Implementation plan was successfully delivered with the majority of actions completed by 1 April 2021 and signed off as complete at the end of June 2021. The Implementation Plan included a detailed Communication and Training plan to support the roll out of the Standards across the organisation.

As part of this implementation NHS Ayrshire & Arran developed the current Speak Up model of Confidential Contacts and Speak Up Advocates. This includes a dedicated Speak Up Helpline telephone number and dedicated email contact. Access to the helpline and mailbox is limited to ensure that confidentiality is maintained for those who require assistance or wish to raise a concern.

Following implementation it was agreed to retain the Whistleblowing Oversight Group (WBOG), when the implementation team stood down. The WBOG meet quarterly and provide oversight of our processes and systems, recognising that this is a learning process. The WBOG includes the Executive Lead for Whistleblowing and our Whistleblowing Champion, the Employee Director and representation from HR and Corporate Governance. Performance reports are provided to our Staff Governance Committee and NHS Board meetings to provide assurance that the organisation is delivering the requirements of the Standards.

2. At a glance

- 10 Contacts made via Confidential Contacts, SpeakUp mailbox and phone line
- 4 Contacts for information only
- 6 Concerns Raising Whistleblowing
- 3 Concerns Investigated through the Whistleblowing process
- 3 Concerns not appropriate for the whistleblowing process

3. Whistleblowing handling performance

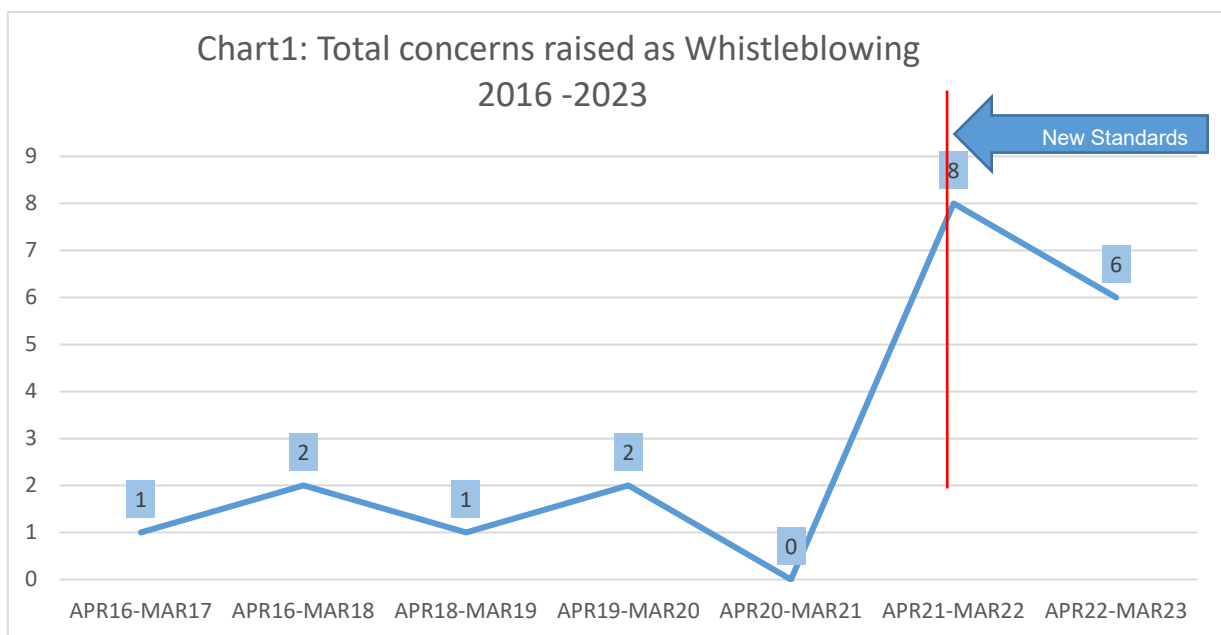


Chart 1 demonstrates the total number of concerns raised since 2016. In the five years prior to the implementation of the standards (April 2016 to March 2021) five concerns were received. This compares to fourteen raised in the two reporting years of the Standards. This may be reflective of the work which has been undertaken to promote The Standards with staff feeling more confident in both the process of raising concerns and the support provided by the Standards and the INWO.

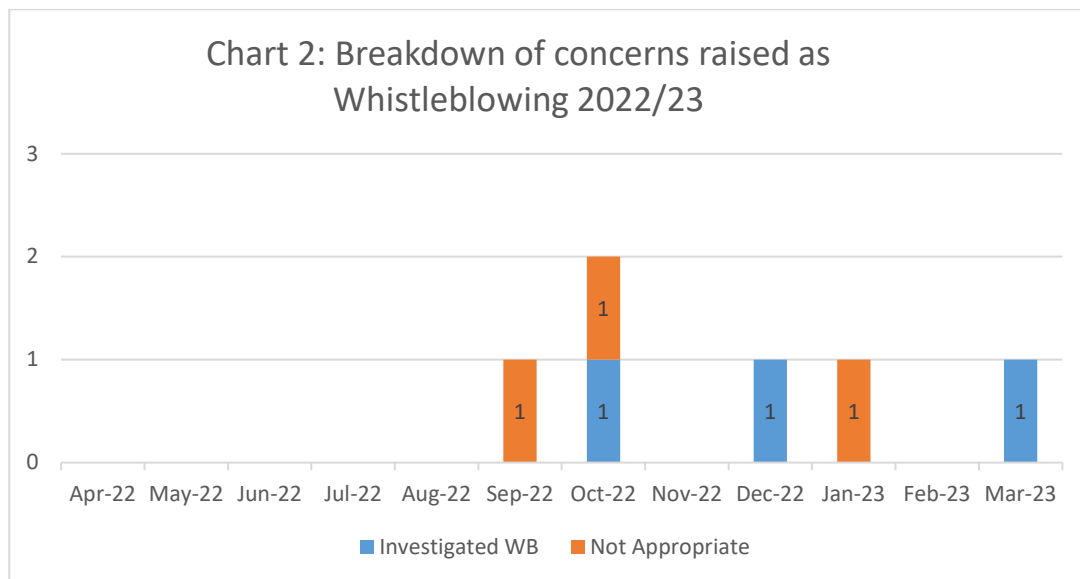


Chart 2

Chart 2 shows the breakdown of concerns received in 2022-23. Of the six concerns received, three were not appropriate for the whistleblowing process. Feedback was provided to those who raised one of the concerns and they were directed to the most appropriate policy under which to pursue their concerns. These were managed through the Boards Grievance policy. The remaining two concerns were raised anonymously and these were taken forward through local processes.

The three concerns appropriate for whistleblowing were taken forward for full investigation at Stage 2 of the process as shown in Table 1.

Total Whistleblowing concerns received by quarter	Q1	Q2	Q3	Q4	Total
Total Number of concerns received	0	0	2	1	3
Stage 1 concerns received	0	0	0	0	0
Stage 2 concerns received	0	0	2	1	3

Table 1

4. Responding to concerns

4.1 Concerns closed at Stage 1 and Stage 2 as a percentage of all concerns closed

Whistleblowing Handling Performance	
Stage 1 Concerns	
0	Total number of Stage 1 concerns received
0%	Percentage of Stage 1 concerns that were closed
0%	Percentage of Stage 1 concerns closed within the 5 working days target

Stage 2 Concerns	
3	Total number of Stage 2 concerns received
0%	Percentage of Stage 2 concerns that were closed
0%	Percentage of Stage 2 concerns closed within the 20 working days target

4.2 Concerns closed at Stage 1 and Stage 2

4.2.1 Stage 1: as at the 31 March 2023, no stage 1 concerns have been received.

4.2.2 Stage 2: as at the 31 March 2023, no stage 2 concerns have been closed. It is worth noting the three stage 2 concerns were received in Q3 and Q4 of 2022/23.

The INWO expects that there will be a thorough investigation of stage 2 concerns, and as a result they recognise that the 20 working day timeline may not always be achieved, especially given the often complex nature of concerns and the requirement for support and confidentiality. The timescale is provided to ensure that organisations take prompt action, and that there is an ongoing focus on investigating and addressing the concern.

NHS Ayrshire & Arran aims to respond to Stage 2 concerns within 20 working days but will ensure that the time needed for a thorough investigation is given with additional time requested to extend the investigation period as appropriate. Table 2 below shows the number of concerns where an extension has been authorised.

Concern Stage	Number received	Extension authorised	As % of all concerns
Stage 1	0	0	0%
Stage 2	3	3	100%

Table 2

Table 3 shows the performance against the 20 working days target in 2022/23 of concerns progressed at Stage 2 at 31 March 2023. There is no data for Q1 and Q2 as no concerns were received.

Whistleblowing cases 2022/23	Number	Comments
Quarter 3	1	Ongoing > 120 working days (excludes public holidays) *draft report has been received for this investigation
	1	Ongoing > 60 working days (excludes public holidays)
Quarter 4	1	Ongoing < 20 working days (excludes public holidays)

Table 3

4.3 Average response times

As of the 31 March 2023 investigations are still ongoing for the three stage 2 concerns it is therefore not possible to share the average response time for 2022/23.

Due to the complexity of the stage 2 concerns received it is taking more than 20 working days to conclude investigations and for the outcome of the investigation to be communicated to the Whistleblower. The Whistleblower is kept fully informed throughout the whistleblowing investigation, this includes when there is a requirement to extend the time scale.

5. Concerns outcomes

This section provides detail on concerns upheld, partially upheld and not upheld at each stage of the whistleblowing procedures. For the 3 stage 2 concerns received 2022/23 there is no outcome as the investigation into the concern were ongoing as of the 31 March 2023. Detail of the outcomes for these concerns will be shared in the Quarterly reports for 2023/24 as the investigations are closed.

6. Primary Care and contracted services

6.1 Primary care contractors

Primary Care contractors (GP practices, dental practices, optometry practices and community pharmacies) are also covered by the Standards.

All practices and community pharmacies are aware of the National Whistleblowing Standards for the NHS in Scotland and the requirements for local policies and information on the reporting process.

Primary care contractors are aware of how to access NHSAA Speak up Service for guidance through the process.

Primary Care contractors have a dedicated confidential contact within NHSAA who will help with raising concerns. Each contractor group are required to report in line with the same key performance information as NHSAA. In instances where no concerns have been raised within wider primary care or other contracted services there is no need to provide a quarterly return to the Board, but annual reports must still be submitted, setting out the concerns that have been raised.

There were no concerns recorded during 2022/23.

Primary Care Contractor (PCC)	Current PCC Cohort	No of concerns received	
		Stage 1	Stage 2
GP Practices	53	0	0
Dental Practices	64	0	0
Optometry Practices	50	0	0
Community Pharmacy	99	0	0

Table 4

6.2 Other Contracted Services

The Procurement team have collated information from local suppliers, who are not contracted through the National Procurement Framework and this information has informed a Contract Register providing a list of all local contracts and Service Level Agreements (SLAs) that the Board have in place. This will ensure a process for reporting Whistleblowing concerns in accordance with the requirements of The Standards.

An update to National Procurement provisions was incorporated into NHS AA's standard terms & conditions for services/contracts to introduce a requirement for contractors to provide the protections contained within the Standards to their own employees.

A joint protocol has been implemented with the NHSAA Procurement Team to ensure new suppliers of services to NHSAA are advised of the reporting requirements of the Standards at the contract award stage.

A process has been established to support the recording of concerns from suppliers, including nil returns on a quarterly basis. There were no concerns recorded during 2022/23.

NHS National Procurement Services are responsible for those contracts covered by the National Procurement Framework. A National process is in place which supports the requirements of the Standards for reporting and recording.

7. Anonymous Concerns

Concerns cannot be raised anonymously under the Standards, nor can they be considered by the INWO. However, good practice is to follow the whistleblowing principles and investigate the concern in line with the Standards, as far as practicable. NHS Ayrshire & Arran has decided that anonymous concerns will be recorded for management information purposes. The definition of an anonymous concern is 'a concern which has been shared with the organisation in such a way that nobody knows who provided the information'. All anonymous concerns will be considered and investigated by the organisation as appropriate.

In 2022/23 two anonymous concerns were received one in Q2 and the other in Q3. Both concerns have being investigated following the principles of the Standards and in line with local guidance. Where appropriate the outcomes from investigations into anonymous concerns are shared with the service area.

8. Learning, changes or improvements to service or procedures

NHS Ayrshire & Arran is committed to learning and improving from whistleblowing complaints. For each complaint that is upheld or partially upheld a documented improvement plan is put in place to address any learning. The action plan is agreed by the Director responsible for commissioning the investigation under the standards with

progress monitored through the appropriate governance route. We recognise that system-wide learning, changes or improvements to services can be limited by the need to maintain confidentiality of individual whistleblowers.

As investigations into the concerns received in 2022/23 were still ongoing as of 31 March 2023 it is not yet known what the outcome or learning will be. This will be shared in the quarterly reports for 2023/24 as it becomes available.

It is worth noting that four of the improvement/action plans from 2021/22 remain open. Progress continues to be monitored through Directorate Governance routes until such time as the Investigation commissioner is satisfied that all actions have either been completed or have moved into a business-as-usual process. Feedback on closure is provided to the Whistleblowing Oversight Group.

8.1 System Wide Learning

- The process for the Identification of Lead Investigators (LI) to progress concerns requires improvement. Identification of several appropriate investigators for a case would assist this process. As we receive and investigate more whistleblowing concerns our pool of experienced LI will increase.
- Consideration to be given to buddying experienced Lead Investigators with less experienced.
- Improvement/action plans need to be developed and progressed in a timely manner.
- That improvement/action plan progress is shared with the Whistleblower as appropriate.
- All concerns raised as whistleblowing whether anonymous or named are now reviewed by the Whistleblowing Decision Team prior to being taken forward for investigation. Decision team members are Nurse Director/Whistleblowing Lead, Assistant HR Director, Head of Corporate Governance and Assistant Director for Public Health.

9. Whistleblowing themes, trends and patterns

Analysis of the concerns raised by key themes is provided below. Where possible comparisons have been made against the Whistleblowing cases received 2021/22. This information will aid identification of any improvement priorities, and to progress learning in a targeted manner.

Theme	2021/22	2022/23				*Total 2022/23
	Q1-Q4	Q1	Q2	Q3	Q4	
Patient Care	4	0	0	1	1	2
Patient Safety	4	0	0	1	1	2
Poor Practice	3	0	0	1	1	2
Unsafe working conditions	0	0	0	1	0	1
Fraud	1	0	0	0	0	0
Changing or falsifying information about performance	0	0	0	1	0	1
Breaking legal obligations	0	0	0	1	0	1
Abusing Authority	0	0	0	0	1	1

Table 5

* more than one theme may be applicable to a single Whistleblowing concern

10. Concerns raised by Service

Chart 3 shows the breakdown of concerns by service for 2021/22 and 2022/23.

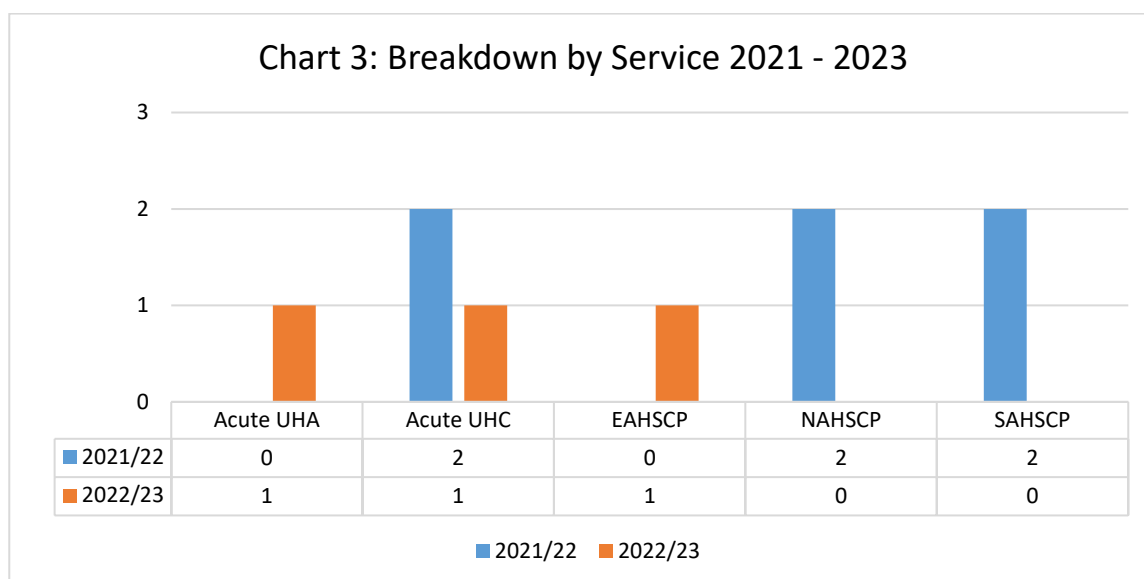


Chart 3

11. Experience of individuals raising concern/s

All those who raise concerns are given the opportunity to provide feedback, through an anonymous survey, on their experience of using the Whistleblowing procedure in order that we can learn and make any improvements in our processes as appropriate. As no investigations have been closed at 31 March 2023 feedback from those involved in the process is not available.

Feedback will be gathered from all those involved in the whistleblowing process. This will aid the improvement of the process and identify areas of improvement and learning.

12. Level of staff perception and awareness and training

12.1 Staff perception and awareness

NHS Ayrshire & Arran have continued to raise awareness of the Standards with staff in 2022/23. It is difficult to quantify staff perceptions, however there has been a wide-ranging communication exercise across the organisation. This has included:

Speak Up Week - October 2022:

- Speak Up Week provided an opportunity to engage staff about the benefits of speaking up and the difference it can make within the NHS in Scotland. It was also an opportunity to raise awareness about local arrangements for speaking up and to promote the role of our Speak Up Advocates and Confidential Contacts. The overall theme being the benefits of speaking up.
- Information on Speak Up Week was disseminated to staff the week prior to the event as a Stop Press communication which was included in the eNews and Daily Digest. It was also emailed directly to all managers and staff. The Stop Press included details of where staff could access information online and in person at six location across the organisation, this included Acute and Health and Social Care Partnership sites.
- Approximately 150 staff visited the face to face sessions which were supported by the Speak Up Advocates. Staff were provided information on how to raise a concern and who they could speak with. They were given information on the Speak Up Advocates and their role, and on Whistleblowing. Response from staff in relation to raising concern was mixed although most welcomed the information about the Speak Up Advocates and were reassured that any contact is confidential.
- The Speak Up Advocates highlighted the importance of Speaking up to their colleagues with their department.
- A short anonymous survey was used to provide a snap shot of staff awareness on how to raise concerns. The outcome being that 61% of staff are were confident on how to do so.

Other methods:

- Communications via Daily Digest and e-News promoting raising concerns in NHS Ayrshire & Arran and guidance on how to raise a concern.
- The 7-Minute Briefs on whistleblowing continue to be issued widely across the organisation, via 700+ managers, to be shared with staff, volunteers, contractors, HSCP staff and students, for use in team meetings, noticeboards and shared work spaces. The briefings are reviewed prior to re-issue with new briefs being created. Each briefing provided contact details for the Speak Up mailbox and phone line and Confidential Contacts.
- Internal and external web pages for Whistleblowing are available and updated. Internally on the organisation's [Athena intranet](#) with a one-click access button

enabling easy access for users and a Whistleblowing web page on the [NHSAA external website](#). The pages provide a wide range of information on the requirements of The Standards including guidance for users. The external page ensures access for all those who can raise a concern through the Standards.

12.2 Training

Training is available through NES Turas Learn for anyone who provides services on behalf of the NHS in Scotland, including students, contractors and volunteers. This provides learning on the National Whistleblowing Standards and the role of the Independent National Whistleblowing Officer (INWO).

We will continue to monitor uptake, effectiveness and appropriateness of training and will review and refine, as required. Through our communications on whistleblowing and how staff can raise concerns in general, we continue to promote the TURAS learning modules. To date 62% of managers have accessed and completed the Turas Learn modules. The organisation is continuing to encourage users to complete the appropriate modules through regular communications. Line Managers are required to complete the appropriate modules as mandatory learning. This will continue to be developed and communicated through our Organisation and Human Resource Development team including through leadership programmes.

The Corporate Induction programme for new staff joining the organisation contains a dedicated section on whistleblowing and raising concerns.

All planned Organisational Development sessions focus on culture and/or teams are designed to promote our desired culture of openness and psychological safety which includes reference to the Whistleblowing standards.

13. Whistleblowing and Speaking Up

The NHS Ayrshire & Arran Speak Up model supports the organisations culture of psychological safety where all staff are encouraged to be confident to bring forward any concerns. The Speak Up model provides access to Confidential Contacts and a cohort of Speak Up Advocates who work alongside the Confidential Contacts to broaden access for those with concerns, ensuring that we can provide access to a contact and support for those raising concerns across the organisation at all levels.

A review has been undertaken of the Board's arrangements for Confidential Contacts. The review identified a need for change to ensure that we have in place Confidential Contacts who are viewed as being accessible by those who may have concerns right across the organisation and our wider partners and also that the role aligns with the requirements of the National Whistleblowing Standards. Recruitment of new Confidential Contacts is planned for summer 2023.

Of the concerns received during the reporting year these have been received via the Confidential Contacts, Speak Up Advocates, the SpeakUp mailbox or the Speak Up phone number.

14. Independent National Whistleblowing Officer

A clear indicator of the satisfaction of those who raise concerns can be derived from the number of concerns that are escalated to the Independent National Whistleblowing Officer (INWO). At the end of the second year there have been no referrals to the INWO.

15. Our plans for 2022/2023

- To continue to learn, review and identify improvements for change in our process. We will review feedback from users of the process, best practice from colleagues in other boards and the Independent National Whistleblowing Officer (INWO).
- We will continue to link with the INWO to seek guidance.
- We will continue to promote the Standards and how to raise concerns safely within the organisation and a systematised approach to sharing learning.
- We will work with investigators and Directors, to review learning from the process and share as appropriate across the organisation.
- We will continue to engage with our Confidential Contacts and Speak Up Advocates to address any barriers identified by staff about raising concerns.
- We will continue to provide communications on a monthly basis using the mediums of Daily Digest and eNews and our 7-minute briefing format.
- We will recruit new Confidential Contacts and develop and support them in their roles, for example, through local and national training and engagement, peer group meetings, links to our whistleblowing champion.
- We will build on the experience of last year's Speak Up Week by increasing the number of engagement sessions, taking the opportunity to raise awareness about local arrangements for speaking up and to promote the role of our Speak Up Advocates and Confidential Contacts.

16. Conclusion

The first NHS Scotland Speak Up Week afforded us the opportunity to further promote the whistleblowing process, the Confidential Contacts, the Speak Up Advocates and the training available. The face to face sessions were invaluable in linking with staff at all levels within the organisation, we plan to build on this success as we develop a programme for the next speak up week in October 2023.

In line with the National Whistleblowing Standards, we reiterate our commitments to dealing responsibly, openly and professionally regarding any whistleblowing concern. Continuing to encourage all those involved to raise any concerns as early as possible. It is hoped that continued improvements in process, continued communications and using feedback from colleagues will enable NHSAA to develop its culture so that all those who might have a concern feel able to Speak Up freely without fear of any adverse impact against them. It is recognised, as noted in Our Plans above, that this

is a continuous improvement process and the learning gained from the first year will inform improvements as we go forward.

The organisations Whistleblowing Oversight Group (WBOG) will continue to meet to provide oversight of our processes and systems, recognising that this is a learning process and performance reports will continue to be provided to our Staff Governance Committee and Board meetings to provide assurance that the organisation is delivering the requirements of the Standards.