

NHS Grampian Whistleblowing Report

2024 - 2025

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Page 3	Introduction
Page 3	Whistleblowing Criteria
Page 3	Whistleblowing Key Performance Indicators (KPIs):
Page 4	KPI 1 - Learning, changes or improvements to services or procedures as a result of Whistleblowing Concerns
Page 5	KPI 2 - Experiences of all those involved in the whistleblowing procedure
Page 5	KPI 3 - Levels of staff perceptions, awareness, and training
Page 7	KPIs 4 to 10 - Whistleblowing Performance Reporting Information
Page 8	Whistleblowing Performance Reporting Information 2024-2025
Page 9	Whistleblowing Performance Reporting Information 2021-2025
Page 13	Primary care and contracted services
Page 13	Independent National Whistleblowing Officer (INWO)
Page 14	Learning from handling whistleblowing concerns
Page 14	Governance arrangements
Page 15	Conclusion

Introduction

This paper reports on all whistleblowing concerns received during this period by NHS Grampian, as per the criteria set out in the [National Whistleblowing Standards](#).

The key aims of the Whistleblowing Standards (the Standards) is to encourage and simplify public interest concern raising, to ensure concern raisers are fully supported in a confidential way, and for organisations to make improvements and learn from concerns they may not otherwise hear about.

Whistleblowing Criteria

The criteria for a concern to be handled through the whistleblowing process are:

- ✓ That the concern relates to a public interest issue in regards to; patient care, patient safety/wellbeing, staff safety/wellbeing, fraud/misuse of public funds, and is **not** about the concern raiser's own employment situation.
- ✓ That the outcome the concern raiser is hoping for addresses or improves things for the public, patients or staff, and is **not** about improving things for them as an individual.

Concerns about a member of staff's own employment situation should be raised through the HR Hub. This can be done by email gram.hr@nhs.scot or by phone 01224 552888. Confidential advice can be asked for through the HR Hub.

In addition to support provided through the HR Hub, NHS Grampian also has 17 Speak up Ambassadors (SuAs). The SuAs are available to everyone and provide confidential support and advice regarding any type of concern.

The contact details of these SuAs can be found at [Whistleblowing Confidential Contacts](#).

It is everyone's responsibility to speak-up if they see something that is not right. Concerns are best handled as locally as possible by raising concerns to your line manager or another manager if this would be difficult.

The Whistleblowing process can be used by all NHS Grampian employed staff, and any staff, students, trainees, agency and locum staff, and volunteers who are working alongside our staff and providing care to patients in Grampian.

This includes all staff providing care in the community and all primary care organisations staff. Arrangements may have been made for local authority staff to use the Whistleblowing Standards, if not, separate local Whistleblowing arrangements may be in place.

Whistleblowing Annual Report Key Performance Indicators

There are 10 key performance indicators that all Scottish Boards are required to report on each year. Each of these will be taken in turn and will describe what improvements we are making to how we handle and share learning from whistleblowing.

Key Performance Indicator 1 - Learning, changes or improvements to services or procedures as a result of Whistleblowing Concerns

Below are actions that occurred in 2024-25 from whistleblowing cases in Grampian:

- An area performed a culture review by interviewing staff about how it feels to be working as part of that team and improvements were made as a result.
- Staff have been supported to improve their communication and interpersonal skills.
- A review of Fire Safety Protocols in several locations has been undertaken.
- A staff reminder was sent through the Daily Brief about the importance of not wearing uniforms outwith work where at all possible.
- Staff compliance with administration practices were reviewed and improvements introduced.
- A patient survey was used to explore, identify and address any common themes and inform areas in need of improvement.
- Communications and wider sharing notices have been shared with relevant staff across the system to ensure compliance with best practice standards.
- Audits and spot checks have been put in place to monitor compliance and ensure best practice standards in a range of clinical environments.
- Staff compliance with administration practices were audited and reviewed and improvements introduced.
- Spot checks have been put in place to monitor compliance in a non-clinical area to ensure staff behaviours are in line with expected standards.
- Communications have been shared with staff to provide information updates, increase understanding and improve staff wellbeing and engagement.
- Communications have been shared with the public to reduce the amount of concerns being raised directly to front line staff about changes introduced.
- Workplace culture support is being provided to ensure improvement to culture and staff wellbeing.
- Staff in a variety of roles and settings have been supported to ensure improvements in behaviour and conduct.
- Service improvement planning is taking place in a range of settings to improve patient services and the way staff communicate and work together.
- Service planning and implementation is taking place to improve equity of access for patient services and the patient and staff experience.

Key Performance Indicator 2 - The experiences of all those involved in the whistleblowing procedure

During 2024-25, whistleblowing concern raisers have in general reported feeling listened to and reassured that improvements will be made after the whistleblowing process concluded.

However, an area that does impact the experience of raising concerns through whistleblowing, is the length of time it takes to conduct an investigation and feedback the findings.

Investigations are further delayed if there is already HR involvement in the area where the concern is being raised through whistleblowing.

To try and improve this issue, a session took place with an HR manager and SuAs, with the aim of increasing understanding of the HR process exploring how we can work as efficiently as possible when there is HR involvement in whistleblowing cases.

To further improve our understanding of how it feels to use the whistleblowing process and be involved in whistleblowing investigations, a survey is being created. This will be an anonymous survey but the person will need to identify how they were involved in the process, i.e. concern raiser, investigator, investigation interviewee, etc.

This will allow us to understand more how it feels to be involved in whistleblowing and will ensure areas of improvements are realised and addressed.

A whistleblowing information leaflet is also being produced to explain what to expect when raising a whistleblowing concern, leading or being involved in a whistleblowing investigation.

Key Performance Indicator 3 - Levels of staff perceptions, awareness, and training

NHS Grampian continues to encourage all staff groups, practitioners, students and volunteers to report any concerns they have, and are always actively promoting a Speak-up culture through:

- The Staff Equality Network
- The Grampian Empowered Multicultural Staff Group
- The Staff Neurodiversity Empowerment Group
- The Staff Culture Collaborative
- The Wider Staff Leadership Group
- NHS Grampian's Anti-Racism Plan
- Wellbeing and Culture work

In addition to this, staff involved in whistleblowing continue to attend staff and department meetings to promote the whistleblowing standards, speaking up and the SuAs.

The whistleblowing Turas modules are also promoted and staff are encouraged to undertake these. The information below shows the numbers of modules undertaken by staff on Turas over the last 4 years:

Time period	Number of Modules undertaken by staff
1 April 2021 to 31 March 2022	351 Modules
1 April 2022 to 31 March 2023	53 Modules
1 April 2023 to 31 March 2024	260 Modules
1 April 2024 to 31 March 2025	64 Modules
Total Modules Undertaken	728 Modules

The table above shows that the most modules were undertaken (351) when new whistleblowing Standards were first introduced in 2021. The modules were also promoted heavily during the first Speak-up week in 2023, which led to 260 staff doing the modules.

Speak-up Week is a great opportunity to raise awareness of whistleblowing, concern raising and responding.

In 2023 there was a focus on how to 'Speak up' and in 2024 the focus was on how to 'Listen up', raising awareness of what to do if someone raises concerns to you under 'Business as Usual' processes.

Presentations were created, delivered, recorded and shared to engage with and raise awareness with many staff groups with a reach of more than 300 staff.

Videos were also recorded and uploaded to webpages and NHS Grampian took part in the live Speak-up Webinar session. Please see below examples.



To watch these videos and find out more about NHS Grampian's Speak up activities please click this link: [Speak Up Week 2024](#).

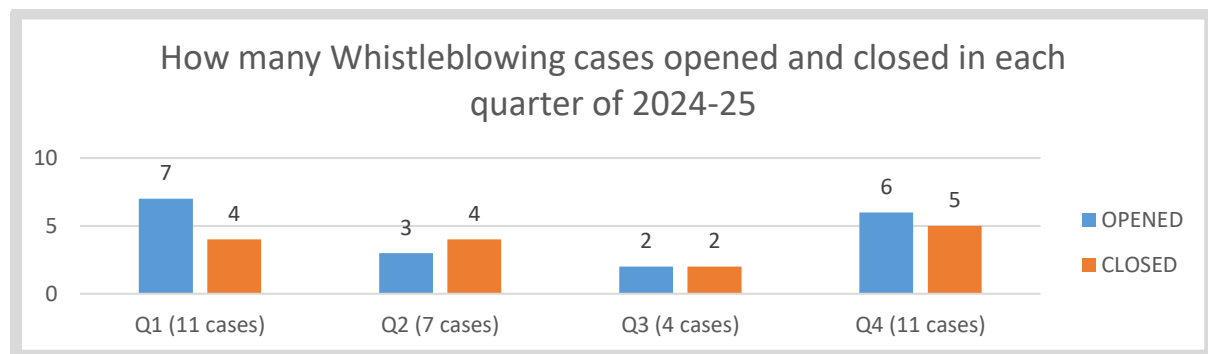
KPIs 4 - 10 = Whistleblowing Performance Reporting Information 2024-2025

KPI	Category (link to Guidance)	Description	Total	Percentage
4	Received	Total number of concerns received	18	
5	Closed	Total number of concerns closed	18	
5	Stage 1	Number of concerns closed at Stage 1	1	6%
5	Stage 2	Number of concerns closed at Stage 2	17	94%
6	Stage 1 Outcomes	Number of concerns upheld at Stage 1	1	100%
6	Stage 1 Outcomes	Number of concerns partially upheld at Stage 1	0	
6	Stage 1 Outcomes	Number of concerns not upheld at Stage 1	0	0%
6	Stage 2 Outcomes	Number of concerns upheld at Stage 2	5	65%
6	Stage 2 Outcomes	Number of concerns partially upheld at Stage 2	6	
6	Stage 2 Outcomes	Number of concerns not upheld at Stage 2	6	35%
7	Stage 1 Avg Working Days	Average working days for concerns at Stage 1	5	
7	Stage 2 Ave Working Days	Average working days for concerns at Stage 2	79	
8	Stage 1 Timescales	Number of concerns at Stage 1 closed within 5 working days	1	100%
8	Stage 2 Timescales	Number of concerns at Stage 2 closed within 20 working days	3	18%
9	Stage 1 Extensions	Number of concerns at Stage 1 with authorised extension	0	0%
10	Stage 2 Extensions	Number of concerns at Stage 2 with authorised extension	14	82%

The table above shows the number of concerns received and closed during 2024-25, how the concerns were handled, what the outcomes were and how long it took to complete each case.

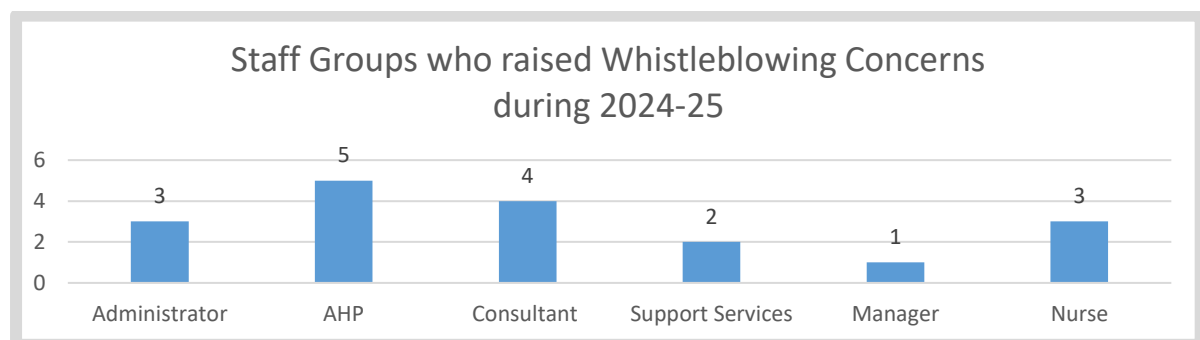
This information is displayed in graphs on the next pages, with some narrative to offer some explanations of any themes, trends or outlying data.

Whistleblowing Performance Reporting Information 2024-2025

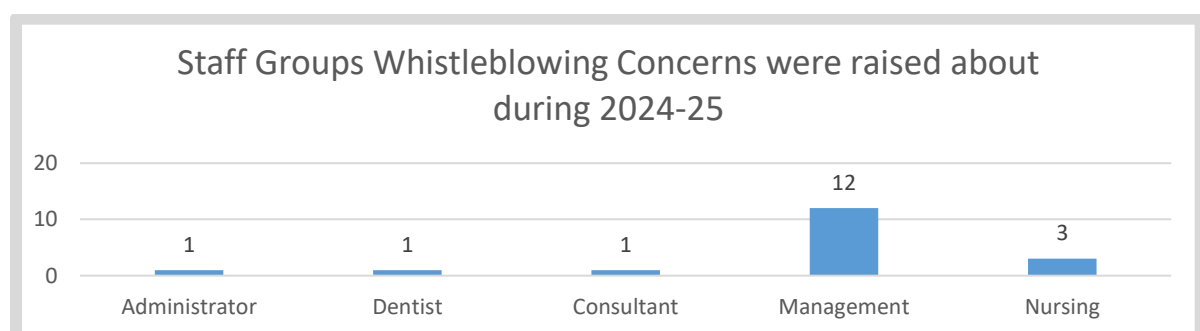


The graph above shows per quarter the amount of whistleblowing concerns which were received and closed in each quarter of 2024-25. The information in this graph tells us how busy the quarters have been in regards to workload intensity.

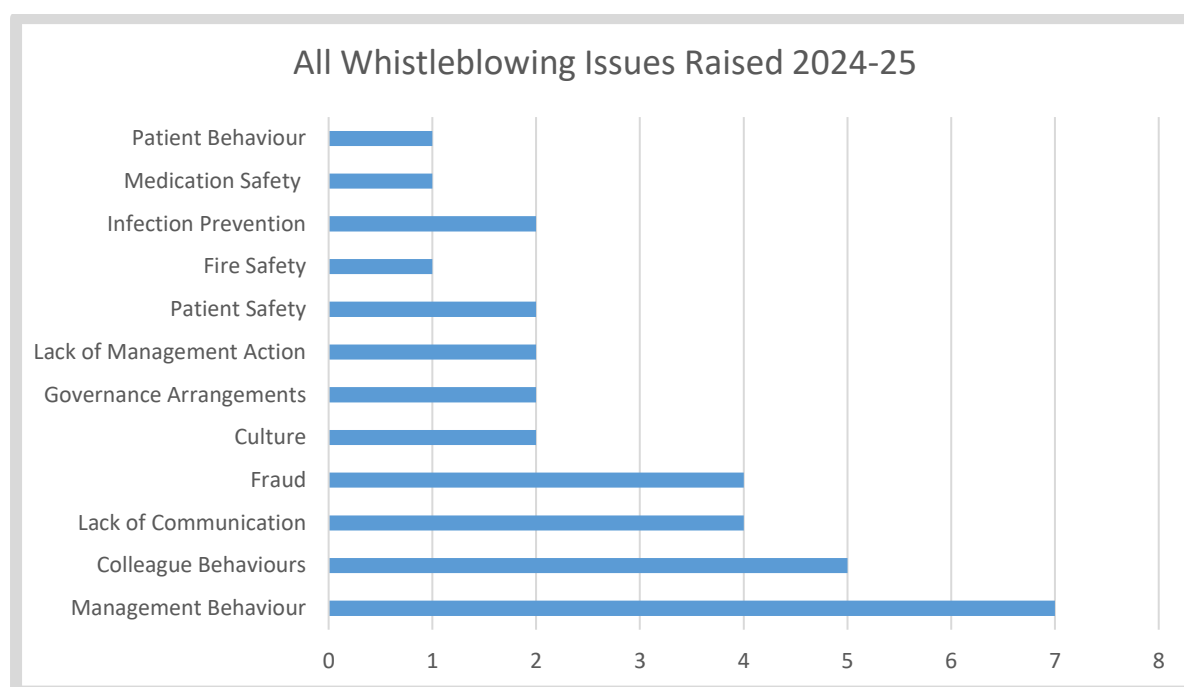
This is because the beginning and end of the whistleblowing process is the most labour intensive from both an administrative perspective and when there is most contact and support with the concern raiser. The data shows Quarter 1 and 4 were particularly busy times with 11 cases beginning and ending in each of those quarters.



The graph above shows which staff groups those who raised whistleblowing concerns were from during 2024-25. This demonstrates that we have a good mix of staff who are aware of the Standards, know how to raise concerns and have hopefully been reassured by the information provided on our webpages and posters that we have a supportive and confidential process in place to hear about concerns.



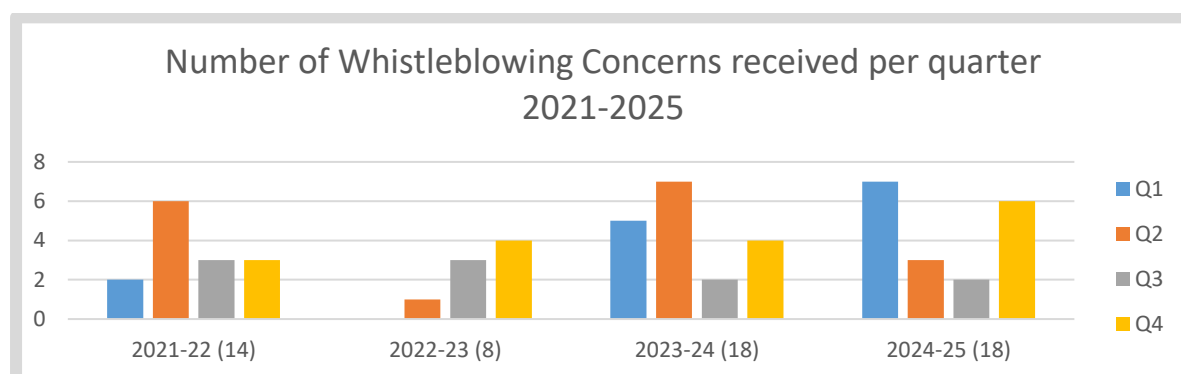
The graph above shows which staff groups were involved in the concerns raised through the whistleblowing process during 2024-25. This demonstrates that the majority of concerns (66%) raised involved management roles, and that clinical roles and an administration role made up the other 33%.



The graph above shows the 33 issues that were raised in the 18 whistleblowing cases handled. Management behaviour, lack of management action and lack of communication accounted for 29% of the concerns.

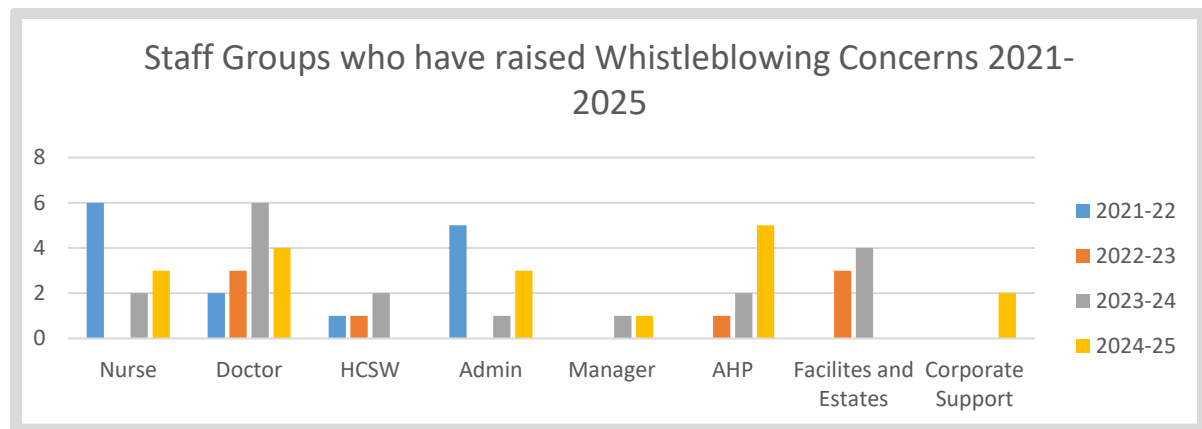
Staff/colleague behaviours (15%) and allegations of fraud (12%) were the next 2 highest issues raised.

Whistleblowing Performance Reporting Information Trends 2021-2025

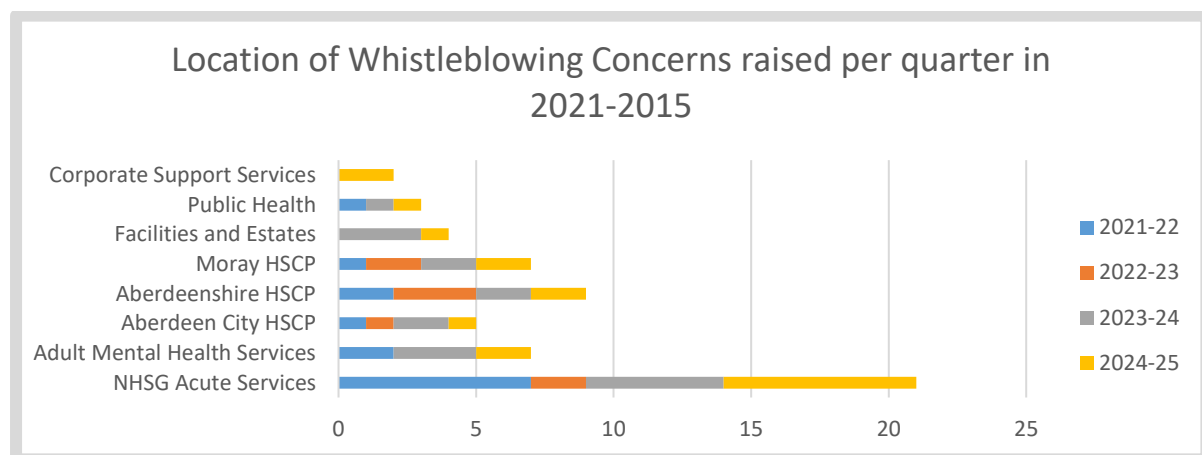


The graph above shows the number of concerns received per quarter since 1 April 2021 when the Nation Whistleblowing Standards were introduced. Before this date NHS Grampian had received no whistleblowing concerns.

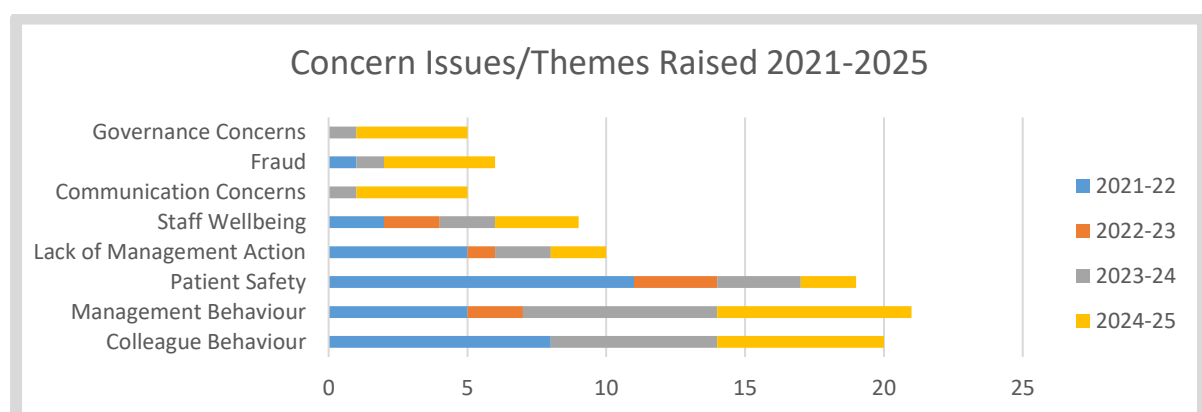
This demonstrates that we have successfully introduced and implemented the Standards and that staff have continued to feel safe and encouraged to come forward with their concerns.



The graph above shows the Staff Groups who have raised whistleblowing concerns over the last 4 years. This also demonstrates that a range of staff groups are aware of and have used the whistleblowing process.

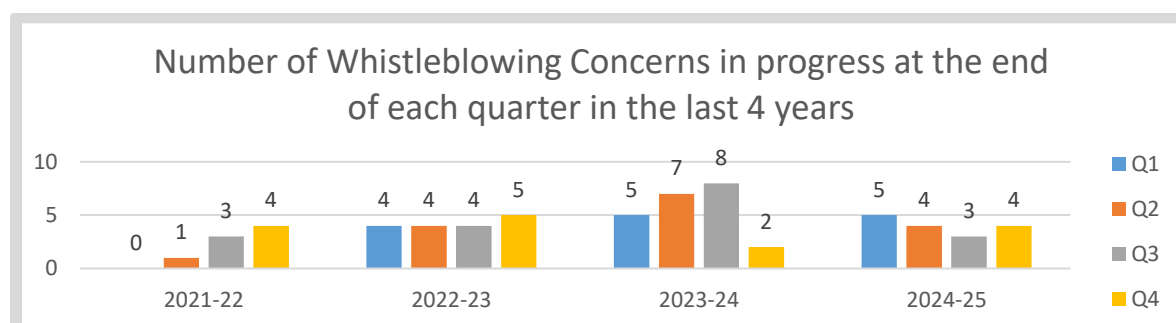


The graph above shows there has been a range locations where whistleblowing concerns have been raised, which includes staff from Primary Care Organisations.

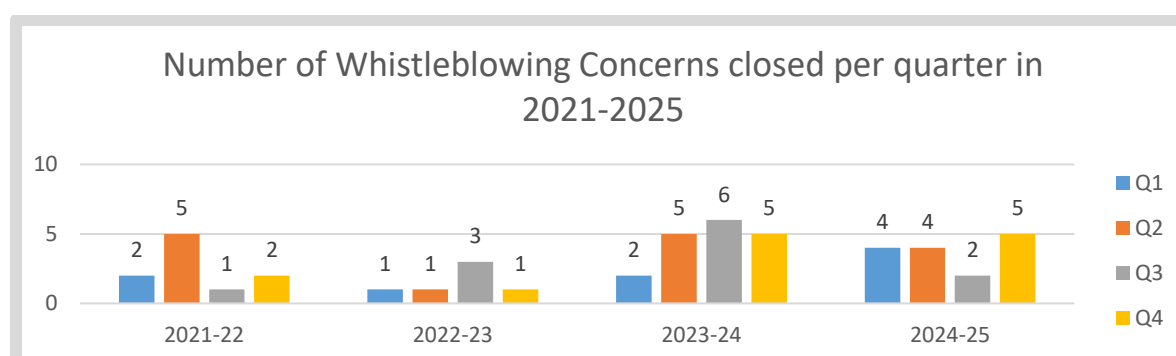


The graph above shows the issues raised in whistleblowing concerns over 4 years. Patient safety was highest reported in years 1 and 2. Management behaviours were highest reported in years 3 and 4. Governance, Fraud and Communications have also been more highly reported in year 4.

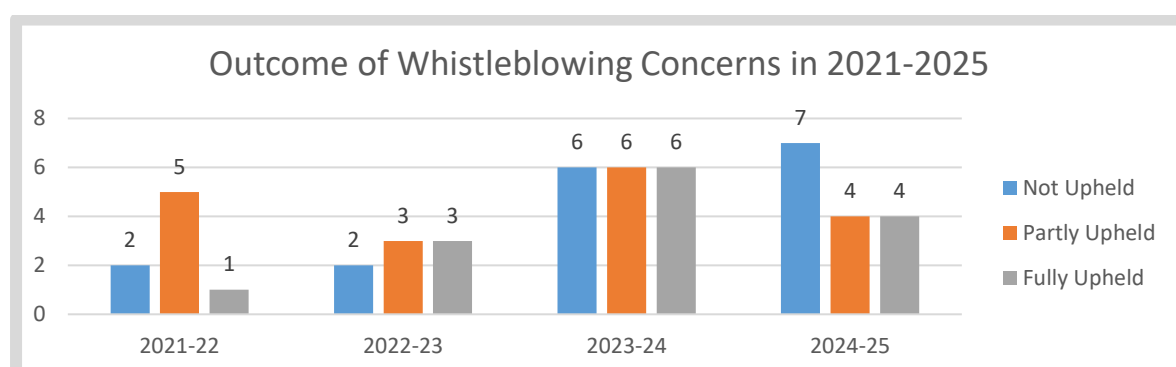
These new themes are coming from concerns about management decisions and communication around service reduction, and concern about the process followed to decide this/and where money is being spent this year. Colleague behaviour has also remained quite high and consistent except for year 2 where activity was lower.



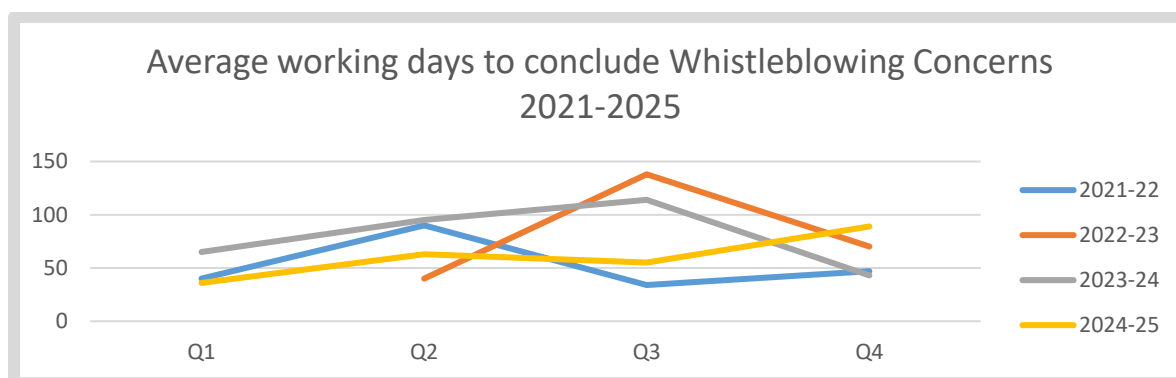
The graph above shows that the average number of concerns (4) being handled at one time has remained fairly consistent over the 4 years. It also shows that during the summer of 2023 we had a particularly high amount of cases but that stabilised over the year.



The graph above shows that with the exception of Q2 in year 1 and Q3 in year 2, we were closing less whistleblowing concerns than were coming in. This could have resulted in the higher workload numbers during summer 2023, and since this time we can see the activity of closing a higher number of complaints has remained.



The graph above shows the outcome of Whistleblowing concerns since 2021. Generally the outcomes are quite evenly spread out in years 2 and 3, whilst year 1 had a higher number of Partly Upheld and year 4 higher Not Upheld.



The graph above shows the amount of working days it has taken on average to conclude a whistleblowing case per quarter. We are expected to try and meet a 20 working day target to complete the whistleblowing process, however, over the 4 years we have taken on average 69 working days/3 months to conclude a case.

It is very difficult to meet the 20 working day target for many reasons such as the complexity of the concerns raised and the number of issues raised. However, the main reason for the length of time it takes can be because staff being asked to investigate concerns are often very busy and don't have dedicated or protected time to do this.

Staff annual leave also causes many delays, particularly during the summer months, as many investigations involve interviewing teams or multiple members of staff.

AVERAGE WORKING DAYS	2021-22	2022-23	2023-24	2024-25
QUARTER 1	40	NA	65	36
QUARTER 2	90	40	95	63
QUARTER 3	34	138	114	55
QUARTER 4	47	70	43	89
TOTAL	211	248	317	243
AVERAGED OUT OVER THE YEAR	53	83	79	61

We can see in the table above that in years 2 and 3 we had our highest working day figures in quarters in Q3. These are for concerns which concluded in October, November and December, so were in progress over the summer months.

Our next 2 highest quarters are Q2 in year 1 and 3. These concerns concluded in the months July, August and September, so again are likely to have been affected by holiday leave of staff.

We are in the progress of planning for more resource to improve the efficiency and effectiveness of our whistleblowing handling. This will include more focus on

supporting staff to raise concerns through ‘business as usual’ reporting of concerns to line managers, and also aiming for more early resolution, lower down in the management system, which again fosters a more proactive business of usual approach and culture.

Primary care and contracted services

For the purposes of producing this Annual Report, all Primary Care Organisations (PCOs) are asked to report any concerns handled under the Whistleblowing Standards to NHS Grampian.

The three Health and Social Care Partnerships (HSCPs) must also report any concerns handled by them under the standards to the Board, or must produce their own annual report. For the period 2024-2025:

- No concerns have been reported to NHS Grampian as being raised directly to any PCOs or the three HSCPs.
- 1 concern was raised directly to NHS Grampian by a member of staff from a PCO.
- 4 concerns were raised directly to NHS Grampian by members of staff from HSCP provided services.
- The learning and improvements made as a result of these concerns are included as part of all of the learning and improvements for NHS Grampian.
- The same support and advice is offered by the Speak up Ambassadors for all staff (students, trainees, volunteers, etc.) providing health care services or working alongside those who do in Grampian.

The number of whistleblowing concerns that have progressed as a complaint to the Independent National Whistleblowing Officer (INWO)

INWO INVESTIGATIONS INTO NHSG CONCLUDED WHISTLEBLOWING CASES	2021-22	2022-23	2023-24	2024-25	Total
INVESTIGATION COMMENCED	0	CASE A	CASE B	CASE C and CASE D	4
DECISION REACHED	0	0	CASE A	CASE B	2

The table above shows the number of whistleblowing cases where, following conclusion of the whistleblowing process, the concern raiser has contacted the Independent National Whistleblowing Officer (INWO), asking for a review of their case.

The first review occurred in 2022/23, a further review occurred in 2023-24 and 2 reviews are currently underway. In the 2 concluded reviews (Case A and Case B), the INWOs findings were that the investigations were not as robust as they should have been and they found failings in the handling of the concerns.

As a result, in Case A, a new investigation was undertaken and in Case B recommendations for improvement were asked for.

Learning from handling whistleblowing concerns

NHS Grampian arranged for an external audit of handling procedures to take place in November 2022, to identify learning due to whistleblowing handling being a new process. In addition, a 'Pause and Reflect' session took place in June 2024 to further identify opportunities for improvement.

From this session, an action plan for improvement was created, but due to the high volume of concerns being supported, limited progress has been possible. As a result, a special meeting of the Staff Governance Committee took place to discuss the challenges being faced with the volume of concerns and a small resource to manage this. As a result recommendations have been made to support this situation.

Since April 2021, whilst NHS Grampian has received 58 whistleblowing concerns, there has also been a further 48 concerns through the whistleblowing route which did not meet the whistleblowing criteria.

Year	Whistleblowing Concerns	Other Concerns received through whistleblowing route, not whistleblowing but supported and signposted	Total
2021-22	14	10	24
2022-23	8	4	12
2023-24	18	13	31
2024-25	18	21	39
Total	58	48	106

All staff who make contact through the whistleblowing route are offered support from a SuA and almost all staff accept this. Where possible the SuA encourages all concern raisers to raise their concerns through 'business as usual' process, by speaking with their line manager.

If this isn't possible, staff may be signposted to HR for support if concerns are about their own employment situation, or HR advice can be sought on their behalf.

The main focus for next year is to become more efficient and effective at handling all concerns raised. Encourage more business as usual resolution and where this is not possible, attempt to resolve concerns through early resolution, as low in the system as possible and within 5 working days.

NHS Grampian is committed to improving how well informed and supported all staff are when involved in the whistleblowing process, and to ensure it is as good an experience as possible for all.

Governance arrangements

NHS Grampian produces quarterly and annual whistleblowing reports. These include all whistleblowing concerns that have been raised and handled under the Standards. The reporting arrangements for all quarterly whistleblowing reports is to the NHS Grampian Staff Governance Committee for discussion and approval. The Annual report goes to the Board for discussion and approval.

All boards have independently appointed Whistleblowing Champions. The role of the Whistleblowing Champion is to seek assurance that the NHS Board they are assigned to, are taking the steps required to be an organisation that encourages, truly values, and responds efficiently and effectively to whistleblowing concerns as laid out in the new Standards.

In addition to this, quarterly meetings take place with NHS Grampian's:

- Whistleblowing Champion
- Executive Lead for whistleblowing
- Whistleblowing Lead
- Whistleblowing and Speak-up Manager
- Staff Governance Manager

At this meeting updates are given on active and newly closed cases in a confidential and non-identifiable way, which allows for a discussion around process, whistleblowing experience, action being taken (and follow up if requested) and learning being achieved and shared as needed.

Conclusion

Our fourth year of handling whistleblowing concerns has brought further learning and improvement opportunities for NHS Grampian. The Whistleblowing Standards will continue to be promoted and improvements to process will be progressed, with the aim that the experience of concern raisers will be improved and our handling will become more efficient.

We would like to acknowledge those who have come forward with concerns during 2024-25, and give thanks to everyone for contributions whether as a whistleblower, those who contributed to investigations and those involved in the process.

Louise Ballantyne, NHS Grampian Head of Engagement, July 2025