



NHS Grampian

Whistleblowing Annual Report

2022-2023

NHS Grampian – Caring – Listening – Improving

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Introduction

This is NHS Grampian's second annual Whistleblowing report, covering the period 1 April 2022 to 31 March 2023. This report includes the whistleblowing concerns received during this period by NHS Grampian, as per the criteria set out in the [National Whistleblowing Standards](#), which was introduced on 1 April 2021.

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

The public value of whistleblowing has been increasingly recognised since the term was introduced in the 1960s, and is an invaluable mechanism for organisations to become aware of issues that need to be addressed.

Whistleblowing is defined in the Public Services Reform (the Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020 as: *when a person who delivers services or used to deliver services on behalf of a health service body, family health service provider or independent provider raises a concern that relates to speaking up, in the public interest, about an NHS service, where an act or omission has created, or may create, a risk of harm or wrong doing.*

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

- I. That the concern relates to a public interest issue – is not about the concern raiser's own employment situation.
- II. That the outcome the concern raiser is hoping for addresses or improves things for the public, patients or staff - is not about improving things for them as an individual.

Concerns about a member of staff's own employment situation is termed as a grievance. Advice and support for these concerns is available through the [HR Hub](#).

NHS Grampian also have [Whistleblowing Confidential Contacts](#) and [Bullying and Harassment Confidential Contacts](#) who can provide support and signposting advice.

In some cases individual grievances may be part of a wider public or staff safety concern, in which case they may be separated out and handled through an HR process. If the grievance aspect is very minimal it can be handled as part of the whistleblowing concern, with the appropriate HR input.

The Focus for Whistleblowing Annual Reports

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

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

NHS Grampian's ambition for 2023-24 is to continue to raise the profile of whistleblowing and the value we place on it. We will continue to encourage all those who provide services on our behalf and work or volunteer alongside us, to come forward with any concerns they have.

As with last year, this annual report will be shared widely to help raise the profile and transparency of whistleblowing, and as a way to demonstrate that raising concerns can improve and influence service delivery.

There was a number of changes introduced to how we handled whistleblowing concerns. These include:

- We arranged for our handling procedures to be externally audited by PricewaterhouseCoopers (PWC) at the end of 2022, and are implementing the changes recommended:
 - We have developed a Standard Operating Procedure flow diagram to increase knowledge and understanding among staff what the process is if they raise a whistleblowing concern.
 - We are developing a job description and secured a budget to employ a part-time Whistleblowing Coordinator which will be recruited to shortly to increase capacity and reduce person dependency.
- We have taken a time to pause and reflect about what whistleblowing concerns has shown us about our culture, and have been gathering data and addressing any cultural issues we find.
- We are also ensuring mechanisms are in place to gather system intelligence as to where our culture doesn't meet our expectations and to oversee that action is taken.

At the conclusion of a whistleblowing investigation the offer is made to meet on MS Teams (or in person if preferred) to go through the findings and what action is being taken as a result. During this conversation the concern raiser is asked about their experience of using the Standards to aid learning and improvements.

A good example openness and transparency at completion of a whistleblowing investigation, to ensure lessons are learned and shared both locally and more widely, is demonstrated in a case study shown as Appendix A. This was an example of good practice which demonstrated to the wider team that raising concerns can influence service delivery which improved the profile of whistleblowing.

How effectiveness and impact of change will be measured:

We have put in place a mechanism which prompts a review of progress of any actions from whistleblowing concerns 6 months after the case has closed. We will seek support from our clinical governance audit team to support with the measurement and review of this addition to our whistleblowing process.

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

Reported Experiences of Whistleblowers

Concerns raised during 2022/2023 have come from a variety of staff from a variety of settings. We are hugely grateful to all of the individuals who came forward with their concerns as we recognise this is not an easy thing to do and holds a certain amount of anxiety about being identified as a whistleblower by management or their team.

We believe in keeping the 'spirit of the Standards' in everything we do around whistleblowing concerns, by being as supportive and helpful as possible to those who raised concerns, and also to those impacted by concern raising. Feedback received from concern raisers this year has been that in the main they report feeling listened to, that their concerns have been taken seriously, that where action has occurred that this seemed the right action, and in general they felt well supported. The main negative feedback that we have got from concern raisers is how long the process takes, and that this can be a period of unsettlement for them.

This year we have used a senior manager who has dedicated time to investigate whistleblowing concerns when an independent review is needed. We have found this speeds up the time taken to conclude concerns significantly compared to when a manager is taking on an investigation in addition to their usual workload. We will continue to have a focus on timelier conclusion for whistleblowing concerns this year in the hope of improving the concern raiser's experience and reducing their anxiety.

NHS Grampian appreciate that it is a courageous thing to speak up on behalf of others, especially when this can be an uncertain and anxiety provoking experience for the person doing this. We are extremely grateful for to all of the individuals who have come forward this past year which has allowed for many improvements to be made.

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

NHS Grampian has embarked on a range of initiatives to raise staff awareness of Whistleblowing. This has included having content in the Staff Daily Brief, recording a Pod Cast of the Whistleblowing Champion and a Confidential Contact having a conversation about whistleblowing, and sharing this widely during Speak-up Week.

In addition the Whistleblowing Champion has been attending meetings and staff groups to promote whistleblowing and the importance of speaking up.

An awareness campaign is planned to run from Speak-up Week in October 2023 for a year which will promote amongst other things the importance of Speaking-up which is targeting all staff groups and care sites across Grampian. The effectiveness of this campaign will be monitored and measured throughout the year.

Staff training

We need to ensure that staff have the knowledge and skills to implement and access the Standards. The key messages we aim to communicate to all staff groups are:

- Where to go for advice.
- How to raise concerns.
- What support is available.
- Why speaking up is important and how NHS Grampian benefits from this.

We also need to ensure those with whistleblowing roles are appropriately trained which includes:

- Whistleblowing champions.
- Confidential contacts.
- Investigators.
- Executive directors involved in signing off investigations.

426 members of staff have completed the Whistleblowing TURAS modules which is a very low percentage of our approximately 17,000 members of staff.

It should be noted that there is a general poorer uptake of Turas training modules since the pandemic as a result of the continued system pressures.

Barriers to staff undertaking Whistleblowing training on Turas:

- It takes 30-40 minutes to complete each module
- There are many mandatory Turas modules that staff struggle to complete

Steps being taken to overcome these barriers:

- As part of Speak-up Week during October 2022 we ran a campaign of promoting different aspects of Speaking-up each day that week with the Wednesday being a focus on Whistleblowing. For this we recorded a Pod Cast of our Whistleblowing Champion and one of the Confidential Contacts talking about the value and importance of Whistleblowing.
- Our Whistleblowing Champion undertakes regular information update sessions for teams and directorates to ensure staff are aware of and have a basic understanding about whistleblowing, where they can go for more information, and encourage doing the Turas modules – please see appendix B as an example of this in a Case Study.
- Mostly all staff groups have raised concerns therefore there does not appear to be gaps in awareness per staff group but we are continuing to raise awareness across all staff groups in a way that is accessible to them.
- We are in the process of arranging training for approximately 30 members of staff to become Speak-up Ambassadors.
- We are holding a Diversity Festival as part of Speak-up month this year, where there will be a focus on the value of speaking up, promoting the support available to staff who speak up and providing a safe space for those who would like to speak with a confidential contact.

Key Performance Indicator 4 - Total number of concerns received

- NHS Grampian received 8 whistleblowing concerns from 1 April 2022 to 31 March 2023.
- This is 6 less than last year where we received 14 concerns.
- During this time 8 whistleblowing concerns concluded.
- 5 concerns were still open and in progress on 31 March 2023.

NHS Grampian has followed best practice guidance in having a senior manager accountable for recording whistleblowing information, and ensuring systems are in place to capture it accurately. This manager reports quarterly at the Staff Governance Committee meeting and monitors in year trends.

Whistleblowing quantitative data is presented using graphics and charts that make it easy to understand, and methodology for the interpretation and analysis including on cases which span over two reporting years is explained.

Key Performance Indicator 5 - Concerns closed at stage 1 and stage 2 of the whistleblowing procedure as a percentage of all concerns closed

- Of the 8 concerns which closed this year, only 1 closed at Stage 1 and 7 were closed at Stage 2.
- All concerns investigated as Stage 2 were escalated directly to Stage 2.
- This means 12% of concerns raised were handled through early resolution/Stage 1 and 88% of concerns raised escalated directly to Stage 2.

Key Performance Indicator 6 - Concerns upheld, partially upheld, and not upheld at each stage of the whistleblowing procedure as a percentage of all concerns closed in full at each stage

The only concern handled at Stage 1 was upheld and a safety notice was issued to all relevant staff as a result.

From the 7 concerns escalated directly to and handled at Stage 2:

- Upheld = 1
- Partly Upheld = 3
- Not Upheld = 3

Improvements made as result of the above include:

- An external agency was used to support culture improvement work.
- Improvements made to patient case decision making and management
- Behavioural improvements and team and individual support were put in place.
- An improvement plan was revisited and support given to fully embed the changes required.

- The NHS Grampian Clinical Governance Committee which is chaired by a non-Executive member of the Board is overseeing implementation of some of the above improvements.
- Communication was shared to remind staff of the importance of maintaining staff confidentiality.
- Estates maintenance improvements were made.
- An improvement work plan was re-instating with regular meetings put in place to review performance against standards.

Key Performance Indicator 7 - The average time in working days for a full response to concerns at each stage of the whistleblowing procedure

Whistleblowing concerns should be handled at Stage 1 (referred to as Early Resolution), if only a quick investigation is needed and the concerns can be resolved within 5 working days. However, if the concern is more complex it should be handled at Stage 2, where a full and comprehensive investigation is undertaken and completed (or progress fed back if not completed) within 20 working days if possible.

- The average time taken to respond to whistleblowing concerns handled during 2022-23 was 127 days.
- The average time for a concern being handled at Stage 1 was 1 working day.
- The average time for a concern being handled at Stage 2 was 148 working days.
- The concerns that took the longest time to conclude were very complex, with multiple concerns raised and where external review occurred.

Some of the reasons for delays in progressing or concluding concerns can be:

- The time taken to ensure the remit of the investigation will cover all aspects of the concerns and to get additional information from the concern raiser if needed.
- Finding an independent investigator from out with the service area where the concern is raised.
- Investigating multiple issues being raised.
- The availability of staff when interviews are required (ie annual leave).

It is recognised in the Standards that: *“The timescale of 20 working days for a concern to be closed at the investigation stage aims to ensure cases are progressed as efficiently as possible; while overall timescales will be measured, there is no performance measure or KPI that sets down how many cases must be closed within this timescale.”* [NationalWhistleblowingStandardsPart05_GovernanceRecording.pdf \(spsa.org.uk\)](#)

Key Performance Indicator 8: Number and percentage of concerns at each stage which were closed in full within the set timescales of 5 and 20 working days

- The concern handled at Stage 1 was closed within the timescale of within 5 days.
- For the 7 concerns handled at Stage 2, none of these met the target of within 20 working days.

Key Performance Indicator 9: Number of concerns at stage 1 where an extension was authorised as a percentage of all concerns at stage 1

- None = 0%

Key Performance Indicator 10: Number of concerns at stage 2 where an extension was authorised as a percentage of all concerns at stage 2

- All (7) = 100%

Other good practice guidance

Confidential contact's role

- NHS Grampian has 2 Confidential Contacts.
- One is based in Adult Mental Health and the other in Corporate Communications.
- Both have a clinical background and bring many years' experience and knowledge.
- Support is in place for the Confidential Contacts through a small team made up of the Whistleblowing Champion, Responsible Officer for Whistleblowing and the HR Lead for Whistleblowing.
- Neither Confidential Contact has dedicated time for the role although have support from management to undertake this additional role.
- It is thought that across both Confidential Contacts the time spent on Whistleblowing is approximately 1 day per week = 0.2 whole time equivalent of a full time role.
- As a result of this funding has been allocated from the Workforce Directorate to fund a 2 day per week Whistleblowing Coordinator, who will take over the service liaison role, will coordinate all concerns and will develop and support a Speak-up Advocate and Ambassador model for NHS Grampian, allowing staff to seek support more widely around the organisation.
- The Confidential Contacts are usually the conduit for staff raising concerns anonymously, so act as liaison between the service/investigator and the concern raiser.

- Most concern raisers wish to meet on MS Teams with the Confidential Contact to speak about their concerns and access support.
- Some concern raisers prefer to communicate by email or phone – whatever the preference it is supported and accommodated.
- Confidential Contacts report getting job satisfaction from supporting staff to speak-up and improvements being made as a result.
- Being able to be responsive to concern raisers and prioritising these contacts, especially when the concern is first raised whilst juggling a busy workload and other priorities can be a challenge.
- Staff who raise concerns have sometimes been negatively affected by the issues they are raising and often they are in need for moral and emotional support. Confidential Contacts try to establish if the person has a support network they can tap into, and if not will support as they can and encourage contacting Occupational Health or their GP if they are struggling to cope mentally.

Support for those involved in the process

All whistleblowing concerns raised are handled completely confidentially. This means the identity of the concern raiser will not be shared with anyone other than the person they make initial contact with.

Regardless of the route whistleblowing concerns come in, only the details of the concern are carefully passed on to an individual (who is conflict free) to investigate, the identity of the concern raiser is never shared on.

Protection and support is always offered to the person raising the concern whichever route their concern comes in through. The individual they make contact with will remain their point of contact (unless it is jointly agreed another person is better placed), and they will receive verbal and written updates on progress, completion, and outcome of the investigation, including action being taken.

The support that concern raisers have received through the whistleblowing process is also recorded and evaluated with the person at the end of the process to aid learning and improvement in this area.

Explanation of governance arrangements

NHS Grampian produces quarterly and annual whistleblowing reports. These reports include all whistleblowing concerns that have been raised and handled under the Standards. The reporting arrangements for all whistleblowing reports is to the NHS Grampian Staff Governance Committee for discussion and approval. The Annual report also 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 the Whistleblowing Champion has regular meetings with the Executive Lead for whistleblowing, which for NHS Grampian is the Deputy Chief Executive, along with NHS Grampian's two Whistleblowing Confidential Contacts and NHS Grampian's Staff Governance Manager.

At this meeting updates are given on active and newly closed cases by the Confidential Contacts 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.

Primary care and contracted services

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.

- No concerns have been reported to NHS Grampian of 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.
- 3 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 Confidential Contacts for PCO and HSCP staff as is available for staff from NHS Grampian provided services.

As PCOs are often small teams we know it is harder for staff to speak up in these situations. This year we will be re-promote the Standards across Primary Care and ensure returns are reported on, including nil returns.

In Conclusion

This second year of following the Whistleblowing Standards has brought another year of learning and improving for NHS Grampian. We will continue to promote the Standards and with the changes described in this report, hope 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 2022-23, and give thanks to everyone for contributions whether as a whistleblower, those who contributed to investigation and those involved in the process.

Appendix A – Sharing Learning from Whistleblowing Concerns

At conclusion of a whistleblowing concern investigation the concern raiser gave permission for the outcome and action being taken as a result to be shared with the wider team.

This was done by inviting the whole team to join a meeting being held on MS Teams, where the investigation findings and an action plan was shared and explained.

We are extremely grateful to the concern raiser to allow this amount of transparency and team involvement. This will not only aid bring about meaningful and sustainable change but has also raised the profile and value of the whistleblowing process within that team and more widely from those who have heard about this.

It also demonstrates that managers have acted transparently and are open and welcoming of change where needed, which helps to build a trusting culture.

As part of the action being taken, the Planning, Innovation and Projects Directorate are providing input and supporting to the team with data analysis and improvement methodology and the Engagement Team are also providing support.

Appendix B – Staff Awareness Raising Session

NHS Grampian Whistleblowing Champion visits a variety of departments throughout the year in order to:

- Promote the Whistleblowing Standards
- Gain a sense of culture
- Learn about service provision and healthcare issues
- Provide visibility and leadership as non-Executive Board member and as the Whistleblowing champion

During these visits staff are encouraged to be open and candid around their awareness of whistleblowing and their experience of their workplace culture. In addition, a safe space is provided for staff to speak with the Whistleblowing Champion on a 1:1 to ask for any advice or support about any concerns they have in confidence.

Following the visit the Whistleblowing Champion provides a report which he shares back with management and the team to summarise the conclusions he has gained from the non-confidential discussions from their visit.

As a result of a recent visit, a member of staff came forward with a whistleblowing concern which will result in improvements to communication and culture.