NHS Grampian Whistleblowing Report
2025 - 2026

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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 regard 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 is the learning and action being taken from whistleblowing investigations closed during 2025-2026:

- Supporting environments where staff feel able to raise questions, challenge decisions, and share expertise. Work to foster this is progressing through the work of the Culture Programme Board (set up in April 2026).
- Governance arrangements are being developed to ensure they are proportionate, clear, and supportive, and ensure consistency and optimise learning across the system.
- Learning across teams and organisations will be shared to support system improvements in Grampian and nationally.
- Support being offered to management to review systems, culture, and processes including introduction of an 'Issues' tracker being introduced with SMART plans to support transparency around how issues are being addressed, follow up and create a feedback loop.
- Progress being made and the commitment across the organisation to learn, adapt, and improve being evidenced.
- Workplace culture is being supported to ensure improvement.
- Staff are being supported to ensure improvements occur through new management meetings being established to continue to develop and grow cultural changes and identify any challenges and barriers.

In addition to learning from investigations, a review of NHS Grampian Whistleblowing Processes was undertaken with the assistance of the Board Secretary during June and July 2025. The findings and recommendations that came from this review were considered and endorsed by the Staff Governance Committee in August 2025.

The recommendations of the review which are currently underway are:

- To provide greater clarity of the process for receiving, assessing (triage), investigating and reporting on whistleblowing concerns for people raising concerns, the Whistleblowing Team and managers and Executive leads. The process is defined in stages and flowcharts will be developed to aid understanding. Deadlines for each stage have been defined.
- Refresh SOPs and templates.
- Clearly define the roles and responsibilities of the Whistleblowing team members and provide additional resource, which will allow for concerns to be dealt with more quickly and improve data collection on cases, action plans and sharing learning from concerns.
- Provision of co-ordinated peer support, oversight and learning through a new Whistleblowing Governance Group chaired by the Whistleblowing Champion, which will have oversight of compliance with the Whistleblowing Standards and raise awareness of the themes arising from Whistleblowing concerns.
- Ensuring greater clarity about the Executive Director role in concerns raised in their area of responsibility and how to deal with conflicts of interest

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

Whistleblowers:

- Whistleblowers have a confidential contact (Speak-up Ambassador) who they can keep in contact with and make aware of any questions or concerns.
- Where there exists potential for detriment (particularly in small teams), the concern raiser is encouraged to let their confidential contact know if they are concerned they are experiencing any detriment, and this would be escalated to the Whistleblowing Executive Lead for action if needed.
- Where concern raisers are worried about detriment, or for more serious concerns raised, regular check-ins by the confidential contact occurs to ensure all is ok for the concern raiser.
- We are committed to providing concern raisers with the support they need, through signposting to wellbeing resources, Occupational Health Services (OHS) and through regular meeting with their confidential contact to keep them updated on the process and answer any questions of concerns they may have.
- We are undertaking some work on what support whistleblowers may need from the organisation, after raising concerns in situations where working/professional relationships have broken down.

Other staff involved in or impacted by whistleblowing investigations:

- For any member of staff, being involved in, or hearing the findings of, a whistleblowing investigation can be an anxiety provoking and difficult experience.
- We are developing a staff leaflet for anyone involved in the whistleblowing process, to ensure they are well informed of the process and support available to them.

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
- NHS Grampian's Anti-Racism Plan and training
- Wellbeing and Culture work

All managers and staff are encouraged to undertake the whistleblowing e-learning modules on Turas.

Time period	Number of Whistleblowing 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 above chart shows the number of Whistleblowing Modules that staff have undertaken since they were introduced in 2021. Staff having time to complete non-mandatory training can often be a challenge, but we will continue to promote these modules, particularly during Speak-up week in October 2026.

Additional Actions and Training:

- The Whistleblowing Champion, Executive Lead and the Whistleblowing Manager attends large staff groups, staff town halls and management forums to discuss the importance of speaking-up and listening well when concerns are raised.
- We continue to offer and promote the Crucial Conversations for Accountability training at NHS Grampian, which is designed to enhance leadership capabilities, equip leaders to engage effectively with their teams and drive positive change. Pre-April 2025 - 48 senior managers had done this training, between April 25 and March 26 – 44 senior managers did this training.
- The Wellbeing, Culture and Development Directorate introduced two new 90-minute courses to support staff around giving and receiving feedback; Giving Feedback: Speaking Truth with Compassion | Turas | Learn and Receiving Feedback: Listening Up with Courage | Turas | Learn giving and receiving feedback are important skills for everyone to have. These were piloted in March and April and formally launched in May (bookable via Turas). Numbers of staff who have undertaken these are; Giving Feedback - from 5 May to 22 June = 45 staff, and Receiving Feedback - from 11 May to 24 June = 40 staff. These courses are offered twice a month over a variety of days and timings.
- These courses were developed last year in response to feedback received from staff and managers about the challenges experienced with having honest and supportive conversations.
- We also offer support to staff and managers through the NHSG Coaching and Mentoring Banks - Coaching and mentoring in NHS Grampian | Turas | Learn.
- One of our 2026/27 priorities is launching a new managers' fundamentals training programme which will include whistleblowing as a mandated module, so that new and existing managers receive training and education on how to respond appropriately to staff concerns and their role and responsibility as line managers.

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

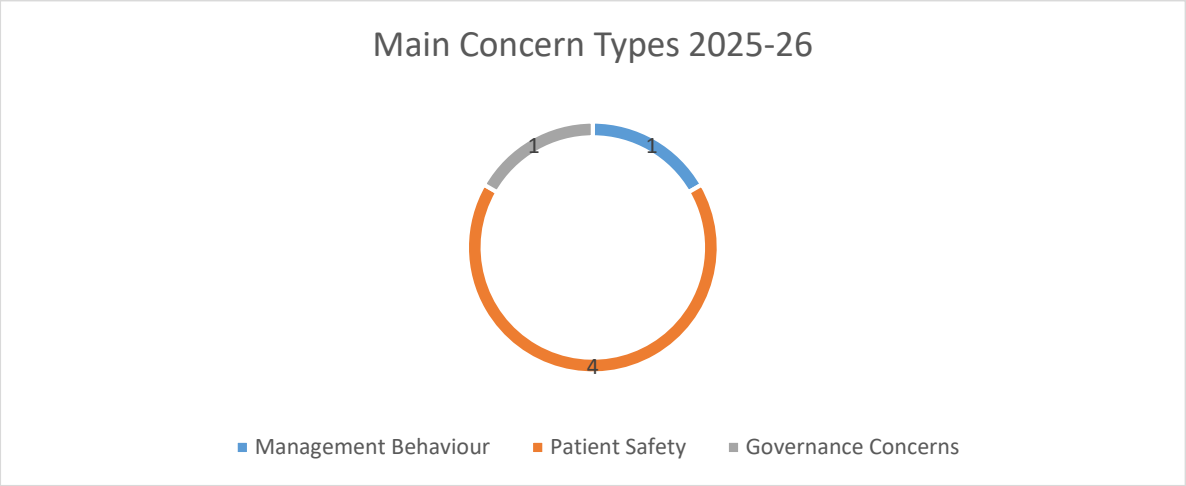
KPI	Category (link to Guidance)	Description	Total	Percentage
3		No of staff (headcount)	17,000	
3		No of staff who completed training	255	
3		% of total staff who completed training	2%	2%
3		Manager headcount	1200	
3		No of managers who completed training	38	
3		% of managers who completed training	3%	3%
4	Received	Total number of concerns received	6	
5	Closed	Total number of concerns closed	9	
5	Stage 1	Number of concerns closed at Stage 1	0	0%
5	Stage 2	Number of concerns closed at Stage 2	9	100%
6	Stage 1 Outcomes	Number of concerns upheld at Stage 1	0	0%
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	2	67%
6	Stage 2 Outcomes	Number of concerns partially upheld at Stage 2	4	
6	Stage 2 Outcomes	Number of concerns not upheld at Stage 2	3	33%
7	Stage 1 Avg Working Days	Average working days for concerns at Stage 1	0	
7	Stage 2 Ave Working Days	Average working days for concerns at Stage 2	160	
8	Stage 1 Timescales	Number of concerns at Stage 1 closed within 5 working days	0	0%
8	Stage 2 Timescales	Number of concerns at Stage 2 closed within 20 working days	0	0%
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	9	100%

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.

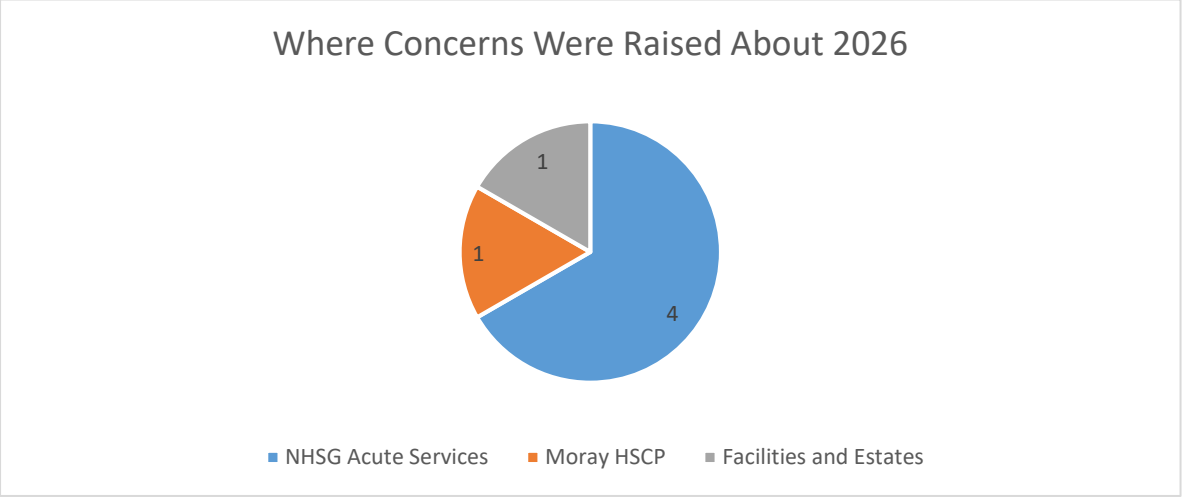
This information is displayed in graphs on the next pages, with some narrative to offer some explanations of any themes, trends or outlying data.

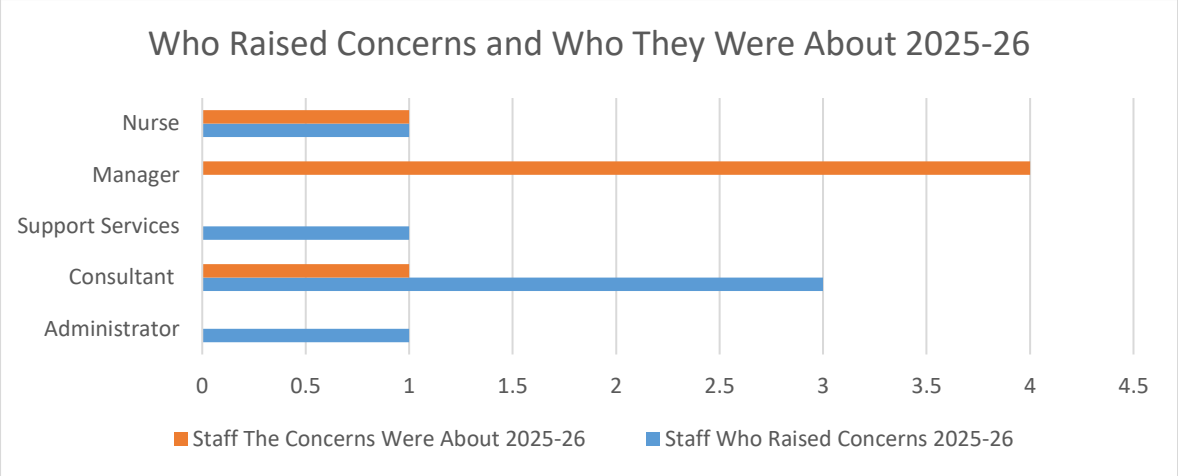
Whistleblowing Performance Reporting Information 2025-2026

Only 6 concerns raised this year met the criteria to be handled under the Whistleblowing Standards. Four were about Patient Safety, one was about Management Behaviour and one about Governance arrangements.

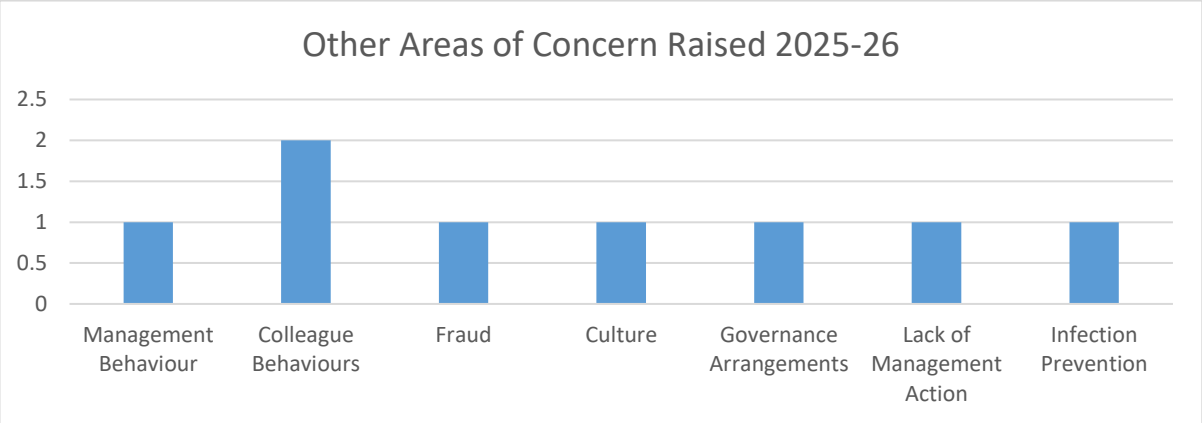


Four of the concerns raised were about Acute NHS Grampian Services, one was about Moray Health and Social Care Partnership (HSCP) and one was about NHS Grampian Facilities and Estates.



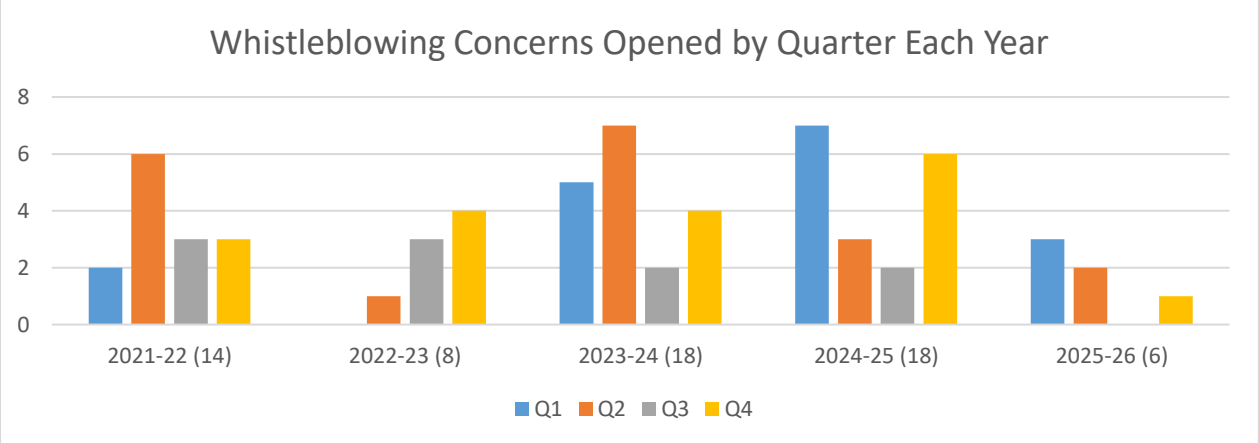


The graph above shows which staff groups raised concerns and which staff concerns were raised about. Consultants were the largest staff group to raise concerns and management was the staff group most concerns were raised about.

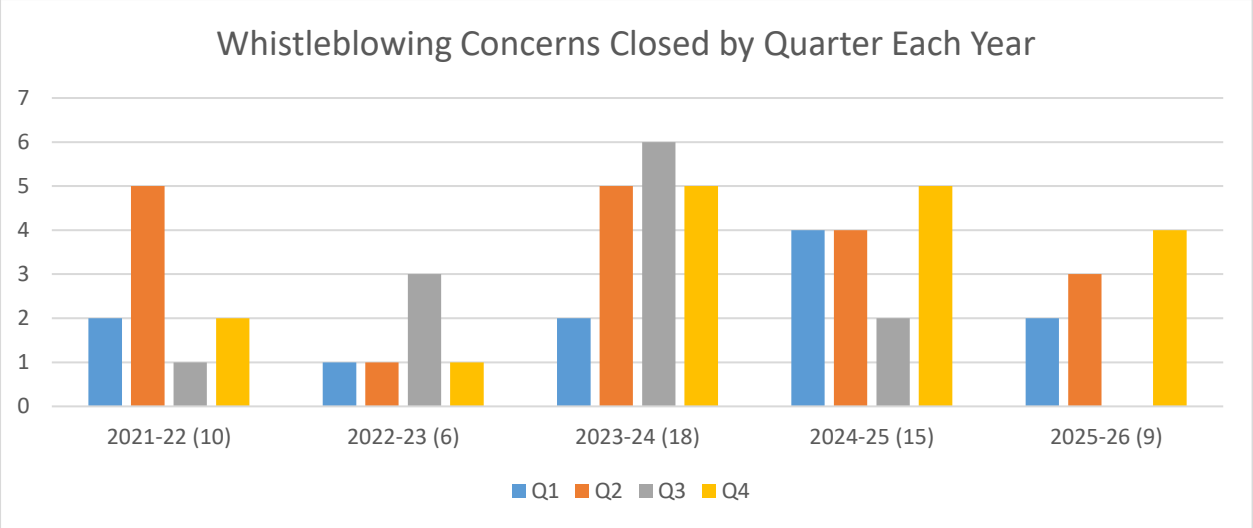


The graph above shows some of the other issues raised in these 6 whistleblowing cases.

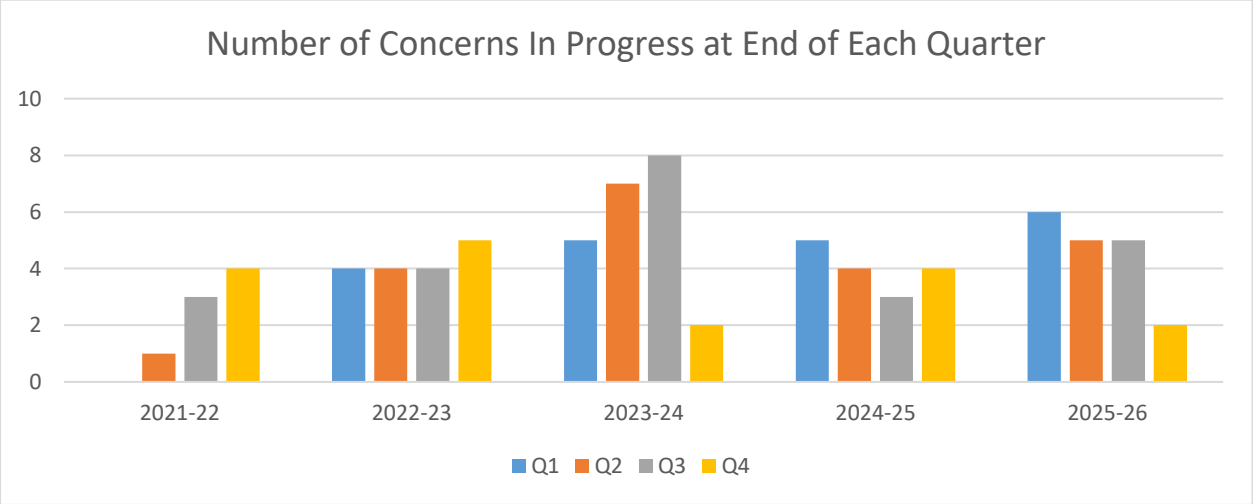
Whistleblowing Performance Reporting Information Trends 2021-2026



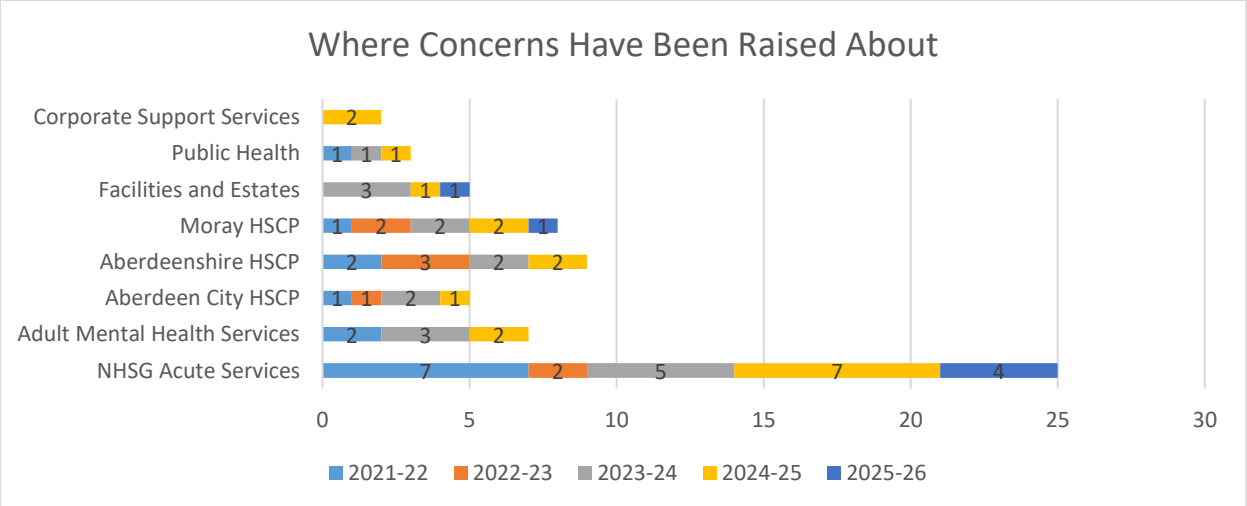
The graph above shows how many concerns were received in each quarter, since 2021. Which averaged out has been 13 concerns per year, and 4 per quarter.



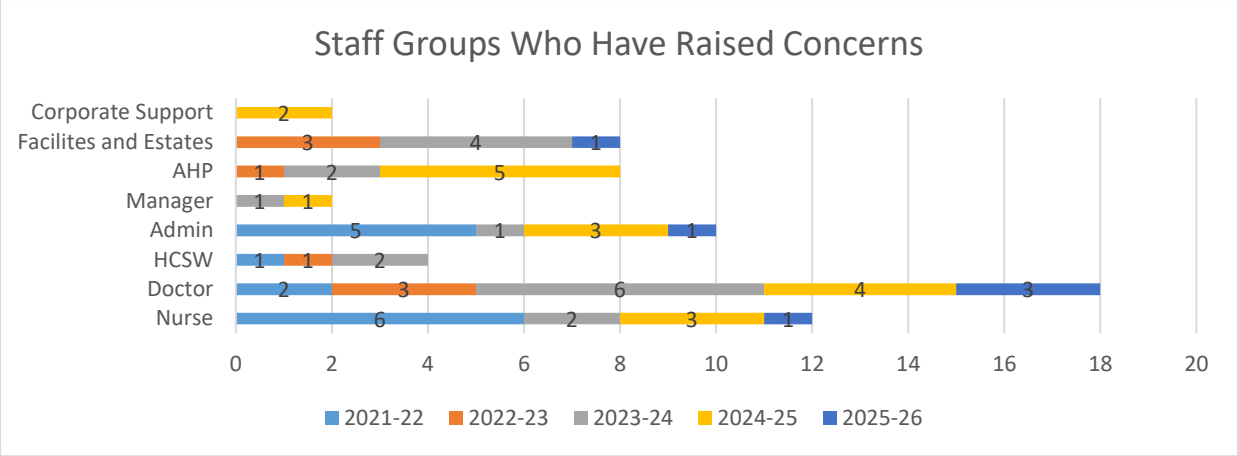
The graph above shows how many concern investigations were concluded, since 2021.



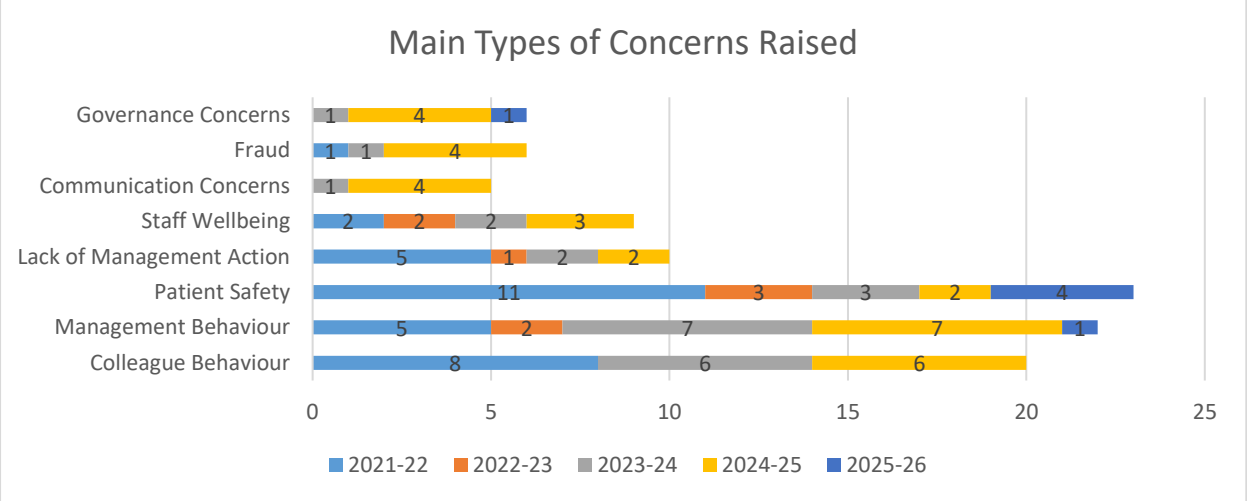
The graph above shows how many concern investigations were in progress at the end of each quarter, since 2021. This has been fairly consistent over the 5 years.



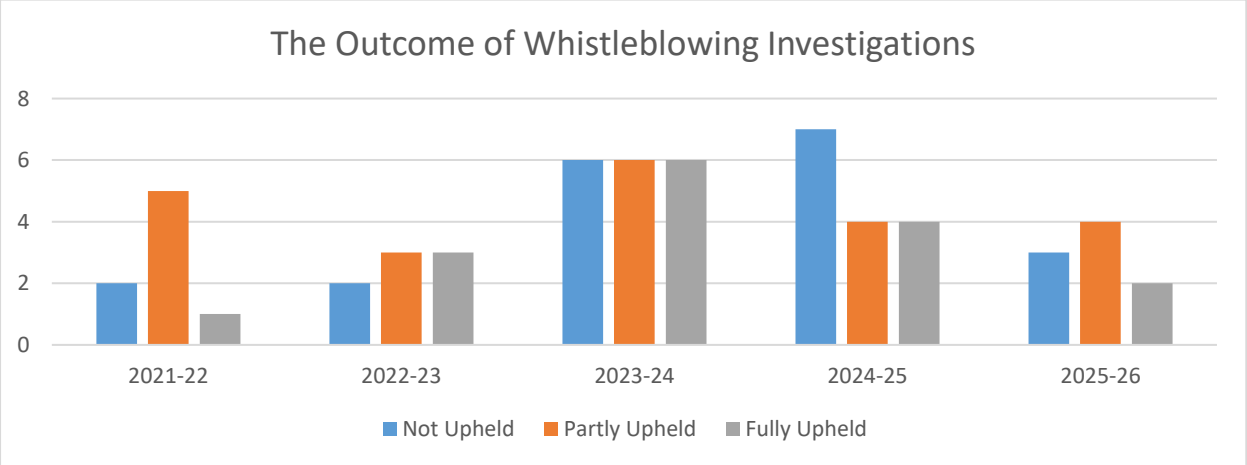
The graph above shows where concerns were raised about, since 2021. The top 3 being Acute Services, Aberdeenshire HSCP and Moray HSCP.



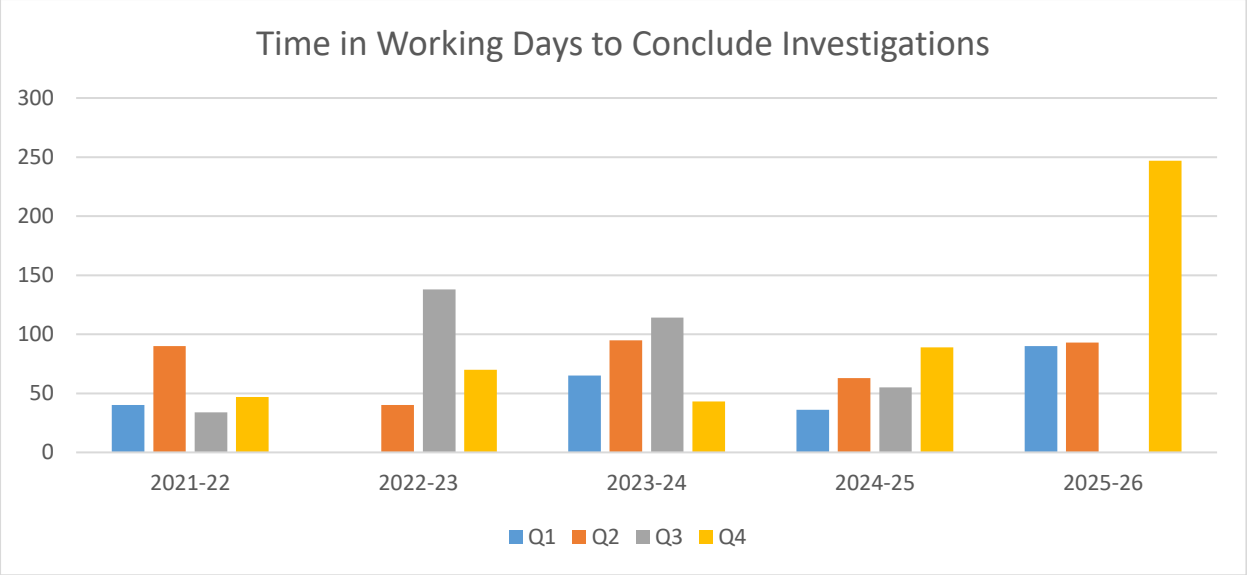
The graph above shows which staff groups' concern raisers were from, since 2021. The top 3 being Doctors, Nurses and Administrators.



The graph above shows the main types of concerns raised since 2021. The top 3 being Patient Safety, Management Behaviour and Colleagues Behaviours.

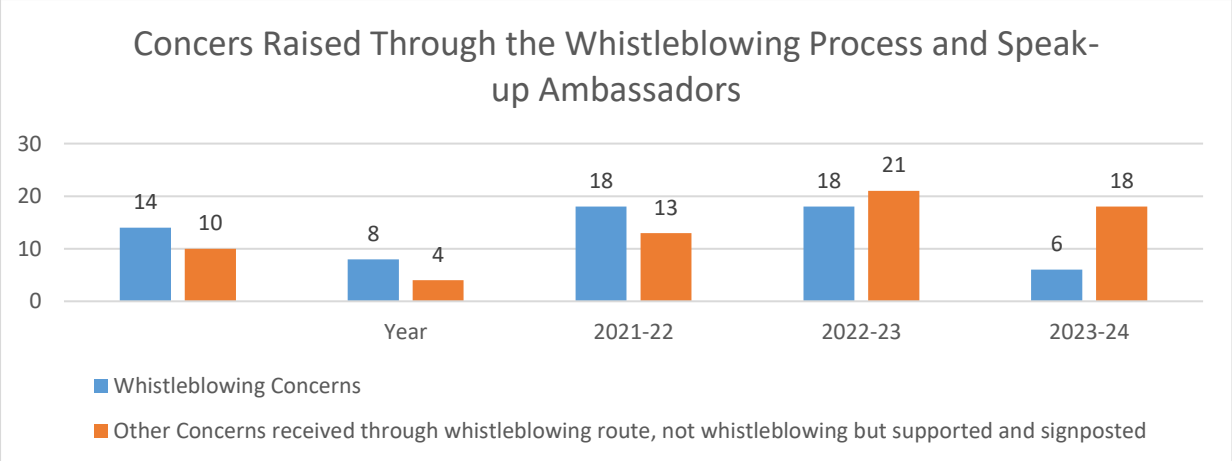


Whistleblowing investigation outcomes are fairly consistently a mix of being fully upheld, partly upheld and not upheld.



The graph above shows the average length of time that it took to complete the whistleblowing process since, 2021. There have been some very complex concerns investigated this year and we have commissioned an external investigation which has meant our average time has risen in the last quarter of 2025/26.

Our average investigation timescales are far higher than we would want them to be. However, we are about to recruit a full-time Whistleblowing Coordinator which we hope will reduce our timescales and improve our efficiency and effectiveness of all staff concern raising.



The graph above shows that in addition to receiving Whistleblowing Concerns, other concerns are raised through the whistleblowing route and Speak-up Ambassadors. These concerns are often about HR/the staff members own employment situation, and are therefore supported to raise these with HR colleagues.

We also get staff seeking advice about how best to raise concerns about the area they work in. These staff are encouraged to raise their concerns by speaking up through the existing routes for raising concerns e.g. to their line manager or another

manager they feel comfortable to approach. If they don't feel able to do this, then they are offered support to do this.

The main focus for this last year has been to become more efficient and effective at handling the concerns raised through the whistleblowing/Speak-up Ambassador route. We have encouraged more resolution through routine routes for escalation and raising concerns, and we feel we have had some success with this due to only needing to take 6 concerns through the Whistleblowing Standard process this year.

NHS Grampian is committed to improving how well informed and supported all staff are when raising concerns, and to ensure it is as good an experience as possible for all.

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 2025-2026:

- 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.
- 1 concern was raised directly to NHS Grampian by a member of staff from an HSCP.
- 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	2021-22	2022-23	2023-24	2024-25	2025-26	Total
INVESTIGATION COMMENCED	0	CASE 1	CASE 2	CASE 3 & CASE 4	CASE 5	5
DECISION REACHED	0	0	CASE 1	CASE 2	CASE 3 & CASE 4	4

AREAS OF FAILINGS	NA	NA	CASE 1 = FAILINGS FOUND IN CONCERN HANDLING & INVESTIGATION ROBUSTNESS	CASE 2 = FAILINGS FOUND IN CONCERN HANDLING & INVESTIGATION ROBUSTNESS	CASE 3 = LACK OF SERVICE PLANNING, IMPLEMENTATION AND DELIVERY & CASE 4 = DID NOT MANAGE RISKS RE CONCERNS ABOUT POOR SPEAKUP CULTURE, INVESTIGATION LACKED ROBUSTNESS AND SUPPORT FOR WB	

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.

There has been 5 cases that the INWO have decided to investigate over the last 5 years. 4 of these have concluded. 3 found failings in our concern handling and investigation robustness and 1 found failings in service improvement implementation.

Improvements have been made to our handling and investigation processes as a result of these cases, including the development of a Standard Operating Procedure and Guidance for Investigators.

Learning from handling whistleblowing concerns

How learning from whistleblowing cases is implemented and shared

- Learning from whistleblowing cases and how and where this should be shared across the system is discussed and agreed at the Whistleblowing Governance Group which meets quarterly and membership includes representation from across the system including Acute Services, Primary Care and the HSCPs.
- The Whistleblowing Governance Group provides oversight and assurance on NHS Grampian's whistleblowing arrangements and activity, ensuring concerns are handled efficiently, and that timely improvements occur and system wide learning is shared as appropriate, in line with statutory requirements and organisational procedures.

Remit of the Whistleblowing Governance Group:

- Oversee whistleblowing processes and compliance with relevant legislation.
- Provide assurance to the Board on governance and risk management related to whistleblowing.
- Recommend improvements to policy, training, and communication.

- Receive an update from the whistleblowing manager on the timeliness of open whistleblowing cases to explore any themes or barriers that are impacting on efficient handling.
- Receive an update from whistleblowing investigation commissioners on progress against improvement plans created as a result of whistleblowing.
- Review learning from cases closed in the last 3 months to assess the need for wider sharing, to ensure learning is communicated across the organisation as required to improve patient care, staff experience culture and systems.
- Have oversight of all whistleblowing cases to be able to identify themes, trends, and systemic risks that need addressed across the system.

Below is an example of a whistleblowing case this year, where changes to practice are taking place because a whistleblower spoke up and was listened to

- As a result of a whistleblowing case that concluded earlier this year, surgical clinical governance arrangements are being reviewed to ensure there is consistency in the level of investigation that occurs following incidents during surgery, and to ensure a consistent approach is followed in regards to sharing learning with all relevant staff. These improvements are being overseen by the Whistleblowing Governance Group which meets and received updates on whistleblowing improvement actions quarterly.

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 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 any follow up if requested.

In addition, NHS Grampian Board ensure there are clear, accessible and trusted processes for raising concerns, including those relating to Board members, as described below:

- Whistleblowing processes are described this annual report, that all Board members receive, discuss and take a decision on if they feel assured by the report that National Whistleblowing Standards are being met.
- Where any conflict of interest could exist for Board members, we look out with our Board area for a Commissioner and Investigators for whistleblowing concerns.
- We ensure the Whistleblowing Champion is sighted on and agrees with any actions being taken to ensure independence for concerns with Executive or Board level involvement.

The below information is aimed to provide assurance that reporting arrangements align with the Governance section of the Whistleblowing Standards.

- NHS Grampian confirms that its whistleblowing reporting and governance arrangements are consistent with the Governance requirements set out in the National Whistleblowing Standards.
- Oversight of whistleblowing activity is supported through established reporting structures and clear lines of accountability.
- NHS Grampian produces regular whistleblowing reports containing non-identifiable information on concerns raised, themes identified, learning arising, and actions taken. Quarterly reports are submitted to the Staff Governance Committee to enable scrutiny and assurance, with an Annual Whistleblowing Report presented to the NHS Grampian Board.
- Our independently appointed Board Whistleblowing Champion provides senior-level oversight and assurance, supporting transparency and reinforcing appropriate separation between operational case handling and governance oversight. These arrangements support organisational learning and continuous improvement while ensuring that whistleblowing matters are considered at the appropriate governance levels.
- Taken together, these governance and reporting arrangements provide appropriate assurance that NHS Grampian is applying the Governance section of the National Whistleblowing Standards.

Conclusion

Our fifth 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 2025/26, 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, June 2026