

NHS Shetland

Meeting:	Shetland NHS Board
Meeting date:	22 June 2023
Agenda reference:	Board paper 2023/24/26
Title:	Whistleblowing Standards Annual Report 2022/2023
Responsible Executive/Non-Executive:	Executive: Dr Kirsty Brightwell Non-Executive: Joe Higgins
Report Author:	EM Watson, Chief Nurse (Corporate)/ Dr Kirsty Brightwell, Medical Director

1 Purpose

This is presented to the NHS Board for:

- Awareness

This report relates to:

- Legal requirement
- Local policy

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

- Safe
- Effective
- Person Centred

2 Report summary

2.1 Situation

The Whistleblowing Standards have been in place since 1 April 2021. This Annual Report provides an update on progress with implementation and adherence to the Standards throughout the year April 2022 to March 2023. The content of the Annual Report is reflective of the Good Practice Guidance for Annual Whistleblowing Reporting issued by Independent National Whistleblowing Officer (INWO), June 2023.

This report has previously been reported to both the Staff Governance and Clinical Governance Committee's for assurance prior to being reported to the NHS Board.

2.2 Background

The Board is expected to follow the National Whistleblowing Standards set out by the Independent National Whistleblowing Officer in its handling of concerns raised that meet the definition of a “whistleblowing concern.”

Whistleblowing is defined 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 (as defined in section 23 of the [Scottish Public Services Ombudsman Act 2002](#)) 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.

[Definitions: What is whistleblowing? | INWO \(spsso.org.uk\)](#)

The Standards require that the number of concerns raised by staff be reported to a public meeting of the NHS Board on a quarterly basis. Reports should highlight any issues which cut across services and any lessons learnt should be used to inform decision making going forward. Issues raised via the Standards may also inform Board members' discussions on issues in relation to service delivery and/ or organisational culture.

2.3 Assessment

The following provides an overview of the progress with implementation and adherence to the Standards throughout the year April 2022 to March 2023:

Implementation Oversight

A Steering Group comprising the Executive Director, Non-Executive Director (Whistleblowing Champion), HR Director, Corporate Services Manager, Lead for OD, Chair of APF, Chief Nurse (Corporate) as Lead for Clinical Governance, and a Confidential Contact representative is in place. This Steering group initially met every 6-8 weeks but now meets on a quarterly basis.

A new Whistleblowing Champion, Joe Higgins, took up post in December 2022. Prior to Mr Higgins appointment, Mr Taylor, NHS Orkney Whistleblowing Champion covered the role for NHS Shetland. Both NHS Boards have benefitted from the sharing of ideas and experience that was possible under the joint arrangements and have therefore agreed to continue to have a shared meeting between both NHS Boards and to include staff from both NHS Boards where it is helpful to do so, for example, in peer support learning and development sessions for the Confidential Contacts.

The Whistleblowing Champion also attends the national Whistleblowing Champions Network meetings and acts as the conduit between INWO and NHS Shetland, sharing information to inform the NHS Shetland approach to implementation of the Standards. This also facilitates the passing on of all communications received from INWO on various learnings and advices that we require to take account of in our implementation of the Standards.

Investigation Process and Recording

All enquiries to the Confidential Contacts are recorded on a section within the Datix system. This is a separate database from the Adverse Event function of Datix, and has restricted access to only the Whistleblowing Exec Lead and the Confidential Contacts. The outcome of all enquiries are recorded here, including those cases which following discussion are treated under a 'business as usual' approach or for those issues where there is no further action taken.

Data, including the types of issues raised and the outcome of all cases that proceed through the Whistleblowing route, are recorded to support lessons learnt and also for reporting to the NHS Board and the Independent National Whistleblowing Office.

Over the last few months work has been taken forward to review and embed in practice some of the organisational processes around whistleblowing based on experience to date. This will be kept under review as we move forward in 2023/24.

Responsibilities to 3rd Sector/Volunteers, Independent Contractors and University Students

There are Confidential Contacts available within Primary Care and the Local Authority part of the Health and Social Care Partnership (HSCP). There are annual updates sent to Primary Care, HSCP, University partners and Third sector organisations working with the NHS to raise awareness of the Standards with their staff/students and clarify how to access the Confidential Contacts, as required.

Quarterly, and on an Annual basis, these organisations are asked to confirm whether or not they have had any issues raised under the Standards. This is then formally reported to the governance Committee's quarterly and to the NHS Board annually. There have been no issues raised via any of these routes.

Business Continuity

There are currently 7 Confidential Contacts one of whom is part of the Executive Lead's team thus providing senior leadership resilience. The process for recording and reporting concerns is within the Datix system and the Clinical Governance team are able to support individual Confidential Contacts to utilise this system where there is either skills atrophy or for new Confidential Contacts who are unfamiliar with the system.

Access/Awareness

Information on Whistleblowing is available on the internet, intranet and has been shared in the local press. It is planned to develop a general information resource to signpost staff to the variety of support systems available within the organisation.

Within NHS Shetland we are encouraging a safe culture for staff to speak up and for managers to feel confident and competent to manage and/ or escalate concerns appropriately. Managers' bundles are in place which support the development of advanced communication skills and how to manage situations where interpersonal communication difficulties have arisen. Resources which provide support for Managers in

dealing with issues of concern have been developed through INWO and are being promoted with Line Managers throughout the service.

We are in the process of developing a Communications Plan for 2023/24 to ensure that there is regular awareness raising for staff about the Whistleblowing Standards and how to effectively raise any issues of concern.

The iMatter survey in 2023/24 will have 2 questions asking staff to help us understand how they feel about raising concerns at work. These are

- I am confident that I can safely raise concerns about issues in my workplace
- I am confident that my concerns will be followed up and responded to

Whilst the questions are not mandatory staff will be encouraged to respond. The results of these will inform further promotion of the standards and/or any changes in working practice necessary as we move forward.

Engagement sessions for staff were hosted by the Confidential Contacts and Executive Lead during Speak Up week in October 2022. As well as providing an opportunity to raise awareness of the Whistleblowing Standards they also enabled staff to discuss any concerns that they had and to be signposted to appropriate ways to address these whether through Whistleblowing or other organisational processes. It is planned to repeat these sessions during Speak Up week 2023.

From April 2023 a session on Speak Up/whistleblowing has been added to the Corporate Induction. This session will be delivered by either the Confidential Contacts or the Whistleblowing Champion thus providing an opportunity for all new staff to be introduced to one of the key people involved in supporting staff with raising concerns.

Training and Support

All staff are encouraged to undertake the Whistleblowing modules available on TURAS.

Initial training for confidential contacts and managers was held online in 2021. Whilst there has been no further local training since then, the Confidential Contacts have been encouraged to sign up to the national Speak Up Network which is hosted by staff in NHS Lothian. This network hosts meetings approx. 6 weekly and alternates between being peer support meetings and having expert speakers from topics relevant to Whistleblowing/Confidential Contact actions, with the most recent learning session having considered the role and place of adopting a trauma informed approach when dealing with individuals who have raised issues of concern. This network is highly valued by Confidential Contacts across Scotland.

Locally we have commenced a peer support learning and development session for Confidential Contacts and have invited colleagues from NHS Orkney to join us. We plan to utilise the case scenarios developed by INWO to further our learning and development as experience to date both locally and in NHS Orkney has been limited and therefore using the scenarios will enable us to refresh skills and knowledge in terms of process and hopefully increase confidence for those Confidential Contacts that have had no experience to date.

The Executive Lead and the Whistleblowing Champion meet with the Confidential Contacts at the beginning of the Peer support learning and development session to discuss any operational or other issues of concern. This has proven to be a very positive

development and it is intended that the Executive Lead and Whistleblowing Champion will participate in the learning and development sessions with the Confidential Contacts. A Teams channel is also in place to provide a central place for accessing resources and other supporting materials by the Confidential Contacts.

Since appointment as well as being in regular contact with the Executive Lead and Chief Nurse (Corporate), the Whistleblowing Champion has visited NHS Shetland and met with the Confidential Contacts and a range of staff throughout the Organisation. This has been helpful in providing support for the process organisationally and in assisting with raising the profile with staff both of Whistleblowing and more generally regarding the role of the Non-Executive Director.

Annual figures

In the last year, 3 issues have been logged on Datix by the Confidential Contacts. All issues raised have been about services within the NHS Board (1 issue) and/or Community Health and Social Care Partnership (2 issues). An overview of these are provided below:

Date Raised	Stage	Number of Issues	Outcome
March 2023	Business as Usual Process	1	Being addressed within service area
February 2023	Business as Usual Process	1	Being addressed within service area
September 2022*	Stage 2	1	Complex Investigation currently in progress

*Due to the complexity of the issues raised, this Investigation is outwith the 20 days standard for Whistleblowing Investigations. However, the individual has been kept up to date with the progress of the Investigation and has received appropriate support from a Confidential Contact throughout this period.

Details of NHS Shetland's performance against each of the INWO Key Performance Indicators is noted in the full report, Appendix 1.

Summary

Over the last year work has continued to embed awareness of the Whistleblowing Standards across the organisation. Confidential contacts are available and readily accessible to staff across NHS Shetland and the Health and Social Care Partnership, with work being undertaken to ensure that Confidential Contacts can keep their skills current. Although only a few issues have been raised in the last 12 months it is noteworthy that we have had issues raised which have required action at different stages of the process and these have been actioned accordingly.

2.3.1 Quality/ Patient Care

This is the first year where there have been issues recorded as being raised in line with the Whistleblowing Standards. This is hopefully a reflection of the impact of the awareness raising carried out to date and the development of an increasingly open culture within the organisation where staff can feel safe to seek support to talk about any issue of concern.

Accessing Confidential Contacts can help individuals to consider and seek appropriate ways to address their concern, whilst being supported through the process.

The Whistleblowing Standards were introduced to support staff in raising issues of concern about matters that are in the public interest. Matters that are in the public interest include issues relating to patient care, poor practice, unsafe working conditions, fraud etc. It is important that individuals feel safe to raise these issues as this supports the development of a positive patient safety culture across the organisation.

2.3.2 Workforce

Having systems and processes in place to support staff to raise issues of concern is important in ensuring psychological safety in the workplace for staff as well as supporting the development of an overall safety culture in the organisation to the benefits of patients and staff.

2.3.3 Financial

Whilst there is no direct financial impact of this report, there may be a requirement to fund publicity materials and/ or training for staff which will have a financial consequence to the organisation. Any costs will have to be met from within department/service budgets as there is no dedicated budget to support this area of practice.

2.3.4 Risk Assessment/Management

There is a risk that awareness of the Whistleblowing Standards in the organisation erodes over time. This will be monitored by the steering group and appropriate action taken, as required.

Due to the low level of issues raised to date, there is also a risk that the Confidential Contacts' confidence erodes over time and/or that they chose to no longer provide this service. This will be monitored by the steering group and remedial action taken as required to ensure that NHS Shetland can continue to support individuals who raise issues of concern.

We will continue to work closely with Confidential Contact colleagues in NHS Orkney to support resilience and improve confidence in reporting in both teams.

2.3.5 Equality and Diversity, including health inequalities

Due regard requires to be paid by the organisation at all times to assure the Board that it can meet its Public Sector Equality Duty, Fairer Scotland Duty, and the Board's Equalities Outcomes.

Monitoring of the issues raised under the Whistleblowing Standards will enable us to have oversight of whether there are any equality and diversity issues arising. These will be actioned and reported accordingly.

2.3.6 Other impacts

There are no other impacts of this report.

2.3.7 Communication, involvement, engagement and consultation

Alongside regular awareness raising amongst staff, the Board has carried out its duties to involve and engage external stakeholders during 2022/23. This has included:

- Independent Contractors (dental, GP, community pharmacy, opticians);
- Students – via local coordinator for University of Aberdeen medical students and Practice Education Lead for nursing and AHP students;
- Third sector organisations.

2.3.8 Route to the Meeting

This Annual Report provides a summary of the information presented via the quarterly reports to the Governance Committee's throughout 2022/23, minutes from Steering Group meetings and/or meetings of the Confidential Contacts.

2.4 Recommendation

This is presented to the Staff Governance Committee (SGC) for:

- Awareness

2 List of appendices

The following Appendices are attached to this report:

Appendix 1 – NHS Shetland Whistleblowing Annual Report 2022-2023.

NHS Shetland

Whistleblowing Annual Report 2022-2023

Introduction

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Responsibilities to 3rd Sector/Volunteers, Independent Contractors and University Students

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This has been helpful in providing support for the process organisationally and in assisting with raising the profile with staff both of Whistleblowing and more generally regarding the role of the Non-Executive Director.

Key Performance Indicators (KPIs)

The Good Practice guide for Annual Reports has the following KPIs – the NHS Shetland Performance against each one is noted below.

Annual Activity

In the last year, 3 issues have been logged on Datix by the Confidential Contacts. All issues raised have been about services within the NHS Board (1 issue) and/or Health and Social Care Partnership (2 issues). An overview of these are provided below:

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NHS Shetland is a small island Health Board, with a limited number of issues which have been raised with Confidential Contacts under the Whistleblowing Standards, and thus it can prove challenging to report on the issues raised whilst also ensuring that we maintain confidentiality. The importance of maintaining confidentiality in a small organisation is crucial in order to encourage individuals to feel that it is indeed safe to raise issues and that the issues raised will not be attributed to specific individuals.

KPI 1 - Learning, Changes or Improvements to services or procedures made as a result of consideration of whistleblowing concerns

From the issues raised it is evident that individuals who need to use some of the business as usual processes, eg HR processes or professional regulatory matters, may need support to do so, either to know which policy/procedure to raise an issue under or indeed just to be supported through the process. The Confidential Contacts can play a key role in raising awareness of organisational policy and professional guidance or in providing some independent advice/ guidance/ support for individuals who are either not a member of a trade union/professional body or who do not feel it is appropriate to involve the trade union in the matter being addressed.

Through ongoing awareness raising across both the acute sector and community health and social care partnership, the Confidential Contacts will continue to offer a 'listening ear' and endeavour to support and signpost individuals to appropriate routes of action based on the issue of concern shared.

The issue subject to Stage 2 Investigation is a very complex matter that when resolved may have a number of areas for learning and/or improving practice. These will be actioned accordingly once the Investigation has concluded.

KPI 2 - statement to report the experiences of all those involved in the whistleblowing procedure (where this can be provided without compromising confidentiality)

No formal evaluation to date has been carried out of the experiences of either those raising issues under the Whistleblowing Standards nor of any individual/ services subject to Investigation as a result of issues raised. It is planned to develop an evaluation tool for use in 2023/24.

Informal feedback on experiences to date indicate that all of the individuals who have sought advice and support with an issue have felt supported by the Confidential Contacts. The Stage 2 case has had regular ongoing support from a Confidential Contact and has repeatedly advised that they feel well supported and felt better with having a person available to support them through the process.

KPI 3 - statement to report on levels of staff perceptions, awareness and training

Through the Leadership Walkrounds we have been able to evidence that staff are aware of the Whistleblowing process and know how to contact the Confidential Contacts. We have also introduced other methods to raise awareness such as the dedicated slot at Corporate Induction and have a regular feature planned in the Corporate Newsletter throughout 2023/24.

Training is available via the TURAS modules and staff are encouraged to undertake this as appropriate to their role, ie general awareness for all staff, enhanced levels for staff managing services. We have also directly promoted the INWO Managers Checklist and Quick Reference Guide to all who hold Team Leader/ Manager roles.

KPI 4 - the total number of concerns received

Three concerns were raised over the period 1 April 2022 to 31 March 2023.

Total whistleblowing concerns received by quarter

	Q1	Q2	Q3	Q4	Total
Total number of concerns received	0	1	0	2	3
No. reviewed at stage 1 (5 days)	0	0	0	2*	2*
No. reviewed at stage 2 (20 days)	0	1	0	0	1

*both progressed via 'business as usual' processes following initial discussion as opposed to proceeding through Stage 1

KPI 5 - concerns closed at stage 1 and stage 2 of the whistleblowing procedure as a percentage of all concerns closed

Concerns closed by stage as a percentage of all concerns closed

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 five working days target
Stage 2 concerns	
1	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

NB Stage 2 concern – Investigation still ongoing at this time

KPI 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

Stage 2 concern - Investigation still ongoing at this time

KPI 7 – the average time in working days for a full response to concerns at each stage of the whistleblowing procedure

Stage 2 concern - Investigation still ongoing at this time, timescale currently in excess of 6 months from start of Investigation

KPI 8 - the number and percentage of concerns at each stage which were closed in full within the set timescales of 5 and 20 working days

Stage 2 concern - Investigation still ongoing at this time, timescale currently in excess of 6 months from start of Investigation

KPI 9 – the number of concerns at stage 1 where an extension was authorised as a percentage of all concerns at stage 1

No concerns progressed as Stage 1

KPI 10 - the number of concerns at stage 2 where an extension was authorised as a percentage of all concerns at stage 2

Stage 2 concern - Investigation still ongoing at this time, timescale currently in excess of 6 months from start of Investigation

Regular extensions to this Investigation timeframe have been granted and the Whistleblower kept informed of the current position and likely timeframe for overall conclusion of Investigation.

Summary

Over the last year work has continued to embed awareness of the Whistleblowing Standards across the organisation. Confidential contacts are available and readily accessible to staff across NHS Shetland and the Community Health and Social Care Partnership, with work being undertaken to ensure that Confidential Contacts can keep their skills current. Although only a few issues have been raised in the last 12 months it is noteworthy that we have had issues raised which have required action at different stages of the process and these have been actioned accordingly.

Key Performance Indicators	
KPI 1	a statement outlining learning, changes or improvements to services or procedures as a result of consideration of whistleblowing concerns
KPI 2	a statement to report the experiences of all those involved in the whistleblowing procedure (where this can be provided without compromising confidentiality)
KPI 3	a statement to report on levels of staff perceptions, awareness, and training
KPI 4	the total number of concerns received
KPI 5	concerns closed at stage 1 and stage 2 of the whistleblowing procedure as a percentage of all concerns closed
KPI 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
KPI 7	the average time in working days for a full response to concerns at each stage of the whistleblowing procedure
KPI 8	the number and percentage of concerns at each stage which were closed in full within the set timescales of 5 and 20 working days
KPI 9	the number of concerns at stage 1 where an extension was authorised as a percentage of all concerns at stage 1
KPI 10	the number of concerns at stage 2 where an extension was authorised as a percentage of all concerns at stage 2

Reference

Good Practice Guidance for Annual Whistleblowing Reporting issued by Independent National Whistleblowing Officer (INWO), June 2023.