

NHS Ayrshire & Arran

Meeting:	Ayrshire and Arran NHS Board
Meeting date:	Monday 29 November 2021
Title:	Whistleblowing Report – Quarter 2 - July to 30 September 2021
Responsible Director:	Jenny Wilson, interim Nurse Director
Report Author:	Karen Callaghan, Corporate Governance Coordinator

1. Purpose

This is presented to the NHS Board for:

- Discussion

This paper relates to:

- Government policy/directive

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

- Safe
- Effective
- Person Centred

2. Report summary

2.1 Situation

The National Whistleblowing Standards and Once for Scotland whistleblowing policy (the Standards) were introduced on 1 April 2021. Board Members are asked to discuss the report on organisational activity in relation to whistleblowing concerns raised in Quarter 2 (July - September 2021).

2.2 Background

The National Whistleblowing Standards (the Standards) set out how the Independent National Whistleblowing Officer (INWO) expects all NHS Boards to manage, record and report whistleblowing concerns. It is a requirement of the Standards that whistleblowing data is reported quarterly to the NHS Board.

The Standards also require that Boards publish an annual report setting out performance in handling whistleblowing concerns. The annual report will summarise and build on the quarterly reports produced by the board, including performance against the requirements of the Standards, Key Performance Indicators (KPIs), the issues that have been raised and the actions that have been or will be taken to improve services as a result of concerns. The first annual report will be provided in 2022 and will align with the quarterly report for Quarter 4.

In NHS Ayrshire & Arran the agreed governance route for reporting on whistleblowing is to Staff Governance Committee and then to the NHS Board. The NHS Board report will be shared with Integration Joint Boards following the NHS Board meeting.

This second quarterly report provides information in accordance with the requirements of the Standards. This provides information on our performance for Quarter 2 (July – September 2021).

2.3 Assessment

Appendix 1 provides details of Whistleblowing concerns raised across the organisation by staff and those who provide services on behalf of NHS Ayrshire & Arran. This demonstrates our performance in the national key indicators as required by the INWO and includes key areas of Whistleblowing handling, as well as highlighting outcomes and providing more detail on Whistleblowing themes. Over time, this approach will illustrate trends and more importantly, allow us to evidence necessary improvement and learning in response to the trends and themes demonstrated.

The report at Appendix 1 provides performance information on:

- Whistleblowing concerns raised
- Learning, changes or improvements to service or procedures
- Experience of individual raising concern/s
- Level of staff perceptions, awareness and training
- Whistleblowing themes, trends and patterns

2.3.1 Quality

Procedures for raising concerns should provide good-quality outcomes through a thorough but proportionate investigation. The approach to handling whistleblowing concerns ensures that learning and improvement is progressed for upheld whistleblowing concerns and are shared across all relevant services.

2.3.2 Workforce

The Standards support our ambition for an open and honest organisational culture where staff have the confidence to speak up and all voices are heard. This is focused through our organisational Values of 'Caring, Safe and Respectful' and promoting a culture of psychological safety.

2.3.3 Financial

There is no financial impact.

2.3.4 Risk assessment/management

If staff do not have confidence in the fairness of the procedures through which their concerns are raised, or do not feel assured that concerns raised will be acted upon, there is a risk that they will not raise valid concerns about quality, safety or malpractice. The opportunity to investigate and address these concerns will have been lost, with potentially adverse impact on quality, safety and effectiveness of services.

There is also a wider risk to organisational integrity and reputation, if staff do not believe they will be listened to and do not feel senior leaders in NHS Ayrshire & Arran

are fulfilling the organisation's Values of 'Caring, Safe and Respectful' and promoting a culture of Psychological Safety.

2.3.5 Equality and diversity, including health inequalities

A local Equality Impact Assessment (EQIA) for the Standards is in place and published on our [public facing web](#). This assesses the impact of the Whistleblowing Standards on staff and those who provide services on behalf of the NHS with protected characteristics.

2.3.6 Other impacts

- **Best value:** Governance and accountability and Performance management. The delivery of an effective process for whistleblowing concerns will support the Board's commitment to safe, effective and person-centred care. Effective handling of concerns supports the delivery of the Healthcare Quality Strategy.
- **Compliance with Corporate Objectives** - Create compassionate partnerships between patients, their families and those delivering health and care services which respect individual needs and values; and result in the people using our services having a positive experience of care to get the outcome they expect.

2.3.7 Communication, involvement, engagement and consultation

There is no requirement for formal engagement with external stakeholders in relation to the formulation of this paper. There has been wide communication of the Standards across the organisation.

2.3.8 Route to the meeting

This has been previously considered by the following groups as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report.

- Whistleblowing Oversight Group on 21 October 2021
- Staff Governance Committee on 15 November 2021

2.4 Recommendation

The Board are asked to discuss the performance report in relation to concerns raised in Quarter 2 (July – September 2021).

3. List of appendices

- Appendix 1 - Whistleblowing Report for Quarter 2 July to September 2021.

Appendix 1 - Whistleblowing Report Quarter 2 - July to September 2021

1. Introduction

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

2. Whistleblowing handling performance

2.1 Whistleblowing concerns received

Table 1 below shows the total number of concerns received in quarter 2 through the whistleblowing process.

Total no of concerns received Q2	Appropriate for WB	Stage 1	Stage 2
2	2	1 ¹	2

Table 1

¹ It is important to note that of the two concerns received in Q2 one of concerns was initially reviewed at Stage 1 of the process and was escalated to a Stage 2. The two concerns received in Quarter 2 were appropriate for the whistleblowing process.

Chart 1 below shows the total number of whistleblowing concerns in 2021/22. .

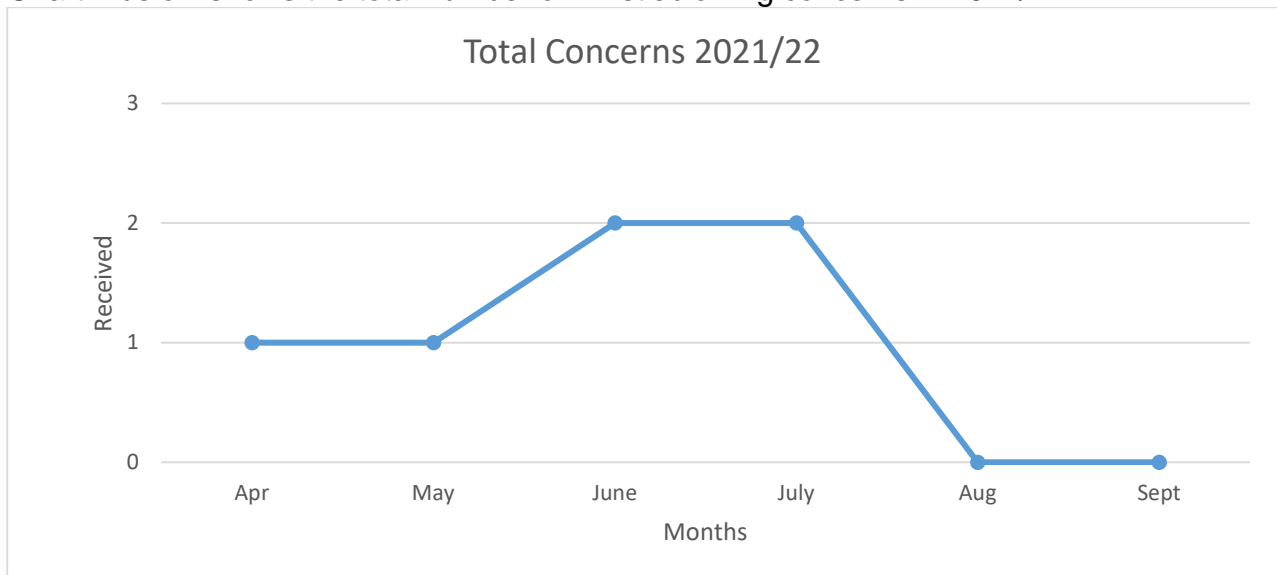


Chart 1

2.2 Concerns closed

Table 2 provides the numbers of concerns closed at Stage 1 and Stage 2 of the procedure as a percentage of all concerns closed.

Total no of concerns received Q2		Nos closed	Nos ongoing	% Closed against all received
Stage 1	0	-		-
Stage 2	2	1	1	50%

Table 2

From Q1 - it is important to note that one WB concern raised in Q1 remains open. This investigation is taking time to conclude to ensure it is appropriately investigated and extensions have been agreed with the person raising the concern.

2.3 Concerns outcomes

Table 3 records Q2 concerns upheld, partially upheld and not upheld at each stage of the whistleblowing procedures as a percentage of all concerns closed in full at each stage.

Concern	Not Upheld	Partially Upheld	Fully Upheld
Stage 1	-	-	-
Stage 2	-	100%	-

Table 3

2.4 Responding to concerns

Table 4 provides the average time in working days for a full response to Q2 concerns at each stage of the whistleblowing procedure

Concern	Nos received	Average time to full response
Stage 1	-	-
Stage 2	2	1 closed at time of report 52 days

Table 4

Of the two concerns received in Q2 one has been concluded. One is ongoing. Although the average number of days to respond seems lengthy this is impacted by the low numbers received. Both of the Stage 2 concerns received in Q2 agreed an extension and hence there is an agreed longer time to respond.

Table 5 below shows the number and percentage of concerns at each stage which were closed in full within the set timescales of 5 and 20 working days. This reflects the extensions agreed.

	Nos received	% Closed in 5 working days		Nos received	% Closed in 20 working days
Stage 1	-	-	Stage 2	2	0%

Table 5

Table 6 shows the concerns where an extension was authorised

Concern	Nos received	Extension authorised	As % of all concerns
Stage 1	0	-	-
Stage 2	2	2	100%

Table 6

Both of the Stage 2 concerns received in Q2 agreed an extensions. This was to allow adequate time for the required detailed investigations to be held. This was discussed and agreed with those who raised the concerns.

2.5. Breakdown of concerns by service

Table 7 provides information on service areas related to concerns raised in Q2.

Service	Stage 1	Stage 2	Complete
Acute	0	1	0
EA HSCP	0	0	0
NA HSCP	0	1 ¹	1
SA HSCP	0	1 ¹	1

Table 7

¹ One enquiry covered concerns raised across 2 areas.

3. Learning, changes or improvements to service or procedures

Q2 - For the Stage 2 concern closed in Q2, an improvement plan has still to be developed from the report recommendations. This will be taken through the appropriate group to ensure completion.

Q1 - An improvement plan is in place for the Stage 2 concern closed in Q1. This is being monitored by the Corporate Governance Coordinator who is engaging with the lead for the plan to ensure that this is progressed.

4. Experience of individuals raising concern/s

This section reports the experiences of all those involved in the whistleblowing procedure (where this can be provided without compromising confidentiality)

A process to gather feedback from those involved in the whistleblowing process is being developed and will reflect the need for confidentiality of those raising concerns.

5. Level of staff perception, awareness and training

There has been a wide-ranging communication exercise across the organisation from early in 2021. This focused on providing 7 minute briefs and sharing these widely across the organisation, via 700+ managers, for use in team meetings, noticeboards and shared work spaces. Communication also via Daily Digest and weekly e-News has continued.

Whistleblowing training has been rolled out across the organisation using the national Turas modules with good uptake, to date 1751 staff and 407 managers have accessed. Managers are being targeted via facilitated sessions. Facilitated sessions will continue to be offered through the year and monthly communications will continue.

Feedback from staff to date has been positive and comments from managers' facilitated sessions indicated that staff and managers were aware of the new process under the Standards.

There is a focused training programme in place for Q3 to deliver facilitated session for leaders. Feedback to date has been extremely positive.

We are considering how to engage with staff to gauge levels of awareness going forward.

6. Whistleblowing themes, trends and patterns

This section provides information on themes from whistleblowing concerns being raised and will aid identification of any shared root causes, and to progress learning and improvement in a targeted manner.

From the concerns received in Q1 and Q2 the majority are linked to patient care and patient safety. It is not possible to highlight trends and patterns as yet and this will be available in future reports.

Whistleblowing Themes	Case 1	Case 2	Case 3	Case 4
Patient Safety	X		X	X
Patient Care	X		X	X
Poor Practice	X		X	X
Unsafe working conditions				
Fraud		X		
Changing or falsifying information				
Breach/Breaking legal obligation				
Abusing authority				
Concealment of any of the above				

Table 9

7. Independent National Whistleblowing Officer referrals and investigations

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

8. Conclusion

The Whistleblowing Standards were introduced on 1 April and have been implemented successfully across NHS Ayrshire & Arran and our partners.

It is not possible at this point to evidence any trends or patterns in reporting or if higher numbers of concerns are being raised than there were through the previous whistleblowing policy and this will become more evident in the coming year.

The Whistleblowing Oversight Group will continue to meet through 2021-2022 to provide oversight as we move beyond implementation to normal working in regard to whistleblowing, recognising that this is a learning process and that processes may require to be changed or developed as we learn from the concerns raised and how these are managed.

The Board members are asked to note the current performance for whistleblowing concerns received.