



REPORT TO: MORAY INTEGRATION JOINT BOARD ON 25 MARCH 2021

SUBJECT: WHISTLEBLOWING STANDARDS – PLAN FOR IMPLEMENTATION

BY: CHIEF OFFICER

1. REASON FOR REPORT

1.1 To outline the requirements of the whistleblowing standards and present the proposal for implementation.

2. RECOMMENDATION

2.1 It is recommended that the Moray Integration Joint Board (MIJB) :

i) agree the application of the standards across all staff groups, contractors and external providers be undertaken in a phased basis as described at 4.6;

ii) consider and note the phases of implementation; and

iii) approve the proposed implementation plan at APPENDIX 1.

3. BACKGROUND

3.1 National Whistleblowing Standards (The Standards) are about to come into effect across all NHS services across Scotland. This requires all NHS Boards, Health and Social Care Partnerships, Primary Care and Contracted Service Providers, Third Sector Organisations (TSOs) and Healthcare Education Institutes (HEI) to familiarise themselves with The Standards and be ready to implement them in full by 1 April 2021.

3.2 It also required NHS Boards to replace their locally appointed Whistleblowing Champions with a Scottish Government recruited independent Whistleblowing Champion. This was completed in February 2020 by NHS Grampian Board with the appointment of Mr Bert Donald. In addition, Boards will replace their local whistleblowing policies with a new national policy which was agreed in January 2021.

3.3 NHS Grampian has a clear ambition to create a positive concern raising a response culture that welcomes whistleblowing concerns from staff and others that deliver their services. To achieve this an efficient, consistent, system wide approach will need to be embedded to promote, encourage, record, report and learn from whistleblowing concerns raised throughout Grampian.

3.4 To support readiness to implement The Standards across the system, a Whistleblowing Standards Implementation Group (WSIG) led by the Head of

Engagement, NHS Grampian, was established in July 2020 and met monthly up to December 2020. The WSIG's membership comprises representation from across Grampian to ensure cross-system input, a consistent approach and to identify areas that will require additional support.

- 3.5 The Scottish Government had a soft launch of the Standards on 1 January 2021 and national e-learning modules are available on Turas, (the NHS Education for Scotland's single unified platform for health and social care professionals) to raise awareness and understanding of the Standards amongst staff.

4. KEY MATTERS RELEVANT TO RECOMMENDATION

- 4.1 A whistleblower can be defined as: 'a person who delivers or used to deliver services, raising a concern that relates to speaking up in the public interest, where an act or omission has created, or may create, a risk of harm or wrong doing'. This is different from raising a grievance, which is generally about the staff member's own employment situation and not about public interest issues.
- 4.2 A key part of whistleblowing is that when a concern is raised which meets the legal test that the person 'reasonably believes' the concern they are raising is in the public's best interest, then it is considered a 'protected disclosure' under the Public Interest Disclosure Act (PIDA) 1998.
- 4.3 This allows legal protection against discrimination for people using the whistleblowing procedure and is why, when concerns are raised anywhere in the system, by anyone who is providing NHS services on behalf of NHS Grampian, that staff are able to identify the appropriate way to handle that concern and afford the person raising the concern the protection they legally deserve.
- 4.4 The Standards are set out in a 92 page document which is broken into ten parts. To allow a high level understanding of The Standards, the key points from each of these parts were summarised, and is shown in **Appendix 1**. The WSIG have been working through each part of The Standards, to support the relevant discussions that need to take place with key stakeholders.
- 4.5 In order to meet the requirements of the standard and facilitate the implementation across all staff the following areas need to be addressed. Whilst good proactive progress was made prior to December 2020, the impact of the second lockdown and implementation of Operation Snowdrop command and control arrangements, which resulted in key officers undertaking other priority duties. The key areas, comments and challenges in implementing in full by 1 April 2021 are identified in the table below:

Area	Comment	Concerns and Challenges
1) Promoting the Standard and the ability for staff to raise concerns	<p>Anyone providing health NHS services on behalf of NHS Grampian should know about The Standards and should receive support to raise their concern. To do this we are asked to ensure 'Confidential Contacts' are available across the system.</p> <p>Louise Ballantyne, Head of Engagement and Steve Stott, Consultant ITU of NHS Grampian will be the confidential contacts in the first instance. Final stages for concerns relating to social work and care services will be signposted to the Care Inspectorate instead of the Independent National Whistleblowing Officer for review.</p>	Timescale now available to promote the Standard adequately to everyone who provides services, or support on behalf of NHS Grampian during the Pandemic.
2) Embedding a system wide, consistent, best practice approach to responding to, handling and recording whistleblowing concerns.	<p>There is a requirement for all whistleblowing concerns to be recorded in a way that protects confidentiality, but allows efficient handling and recording. Although Datix is used and is accessible to many staff it is not available to everyone.</p> <p>There needs to be a way for concerns raised in Primary Care, Commissioned Services, TSOs and HEIs, etc. to be recorded which enables a consistent approach to the information being held confidentiality.</p> <p>There also needs to be consideration for H&SCPs who have health and local authority (LA) staff, if they intend for an extended agreement to be in place for LA staff to also use the national policy.</p>	<p>The ability to embed a system wide, consistent, best practice approach to responding to, handling, recording and reporting on whistleblowing concerns</p> <p>The ability to update NHS Datix system, provide training and arrange access to those who will be responsible for reporting and responding to whistleblowing concerns.</p> <p>The development of another mechanism to raise a concern that is available to all staff, such as an electronic form, and then the communication of such to all parties.</p>
3) Ensuring mechanisms	There is a requirement for H&SCPs, Primary Care and other Contracted Service Providers, HEIs and TSOs to report any whistleblowing concerns raised to	Our ability to influence all primary care and commissioned services, Third Sector Organisations and Health

<p>are in place to take and share learning from investigations or cases raised.</p>	<p>them each quarter to the NHS Board, and also to the IJB for H&SCPs. They must also report annually to the Board of any whistleblowing concerns raised throughout that year or report that they have received none.</p> <p>There is also a requirement for NHS Boards and IJBs to have a management review and publish themes from whistleblowing concerns raised to them each quarter, and to provide an annual report for the Scottish Government.</p>	<p>Education Institutes at this time, to ensure they are fully compliant in promoting the Standards, and that they can handle, record and report on concerns, with the strict confidentiality, and protecting anonymity as required, as well as updating commissioning and service level agreements to reflect this.</p> <p>The ability of the Integrated Joint Board Chief Officers and Local Authority (LA) Chief Officers to fully engage in discussions, reach agreement and put the processes and policies in place to be able to extend the Standards to also be available for LA staff, as recommended.</p>
<p>4) Creating a positive concern raising and response culture, to get ahead of the curve and minimise the need for whistleblowing.</p>	<p>There is a requirement to have a culture that truly values and encourages concern raising as one of the ways of ensuring the care we provide is the best it can be. That staff feel concerns raised are gifts of knowledge and not a criticism of each other or the system.</p>	<p>The ability of all those mentioned above to be able to work in partnership together, creating create a culture that truly values and encourages concern raising as one of the ways of ensuring the care we provide is the best it can be, that staff can feel concerns raised are gifts of knowledge and not a criticism of each other or the system and for us to get ahead of the curve and minimise the need for whistleblowing.</p>

- 4.6 The recommendation from NHS Grampian is that we adopt a phased approach to implementation and the steps and timescales are outlined in **APPENDIX 2**.
- 4.7 There have been discussions at HSCM Workforce forum and HSCM System leadership group and the consensus is that the Standards should be made available to all staff, NHS Grampian or Moray Council employed from 1 April 2021 and that a phased approach, as described in **APPENDIX 2**, be adopted. It should be noted however, that further discussion and consultation is required with Moray Council HR Officers and trade unions to more fully consider the implications and management of the NHS Standards for Moray Council employees and the links to the Council's existing Whistleblowing Policy.
- 4.8 In summary, during the soft launch period 1 January to 31 March 2021 work is underway and on target to ensure:-
- Cross system communications are made to raise awareness of the Standards the Whistleblowing Champion, Confidential contract and expectations, support and protection for those providing services on behalf of NHS Grampian.
 - Systems to record concerns are developed and operational – Datix, or digital survey tool
 - Systems to report concerns are in place – Limesurvey or digital survey tool
 - Awareness raising of Turas training for staff and managers is undertaken.
 - Locally agreed procedures for identification of investigators and sign off of concerns implemented.
- 4.9 In the period to end of Summer 2021, the plan is to progress
- Implementation of arrangements across the wider staff groups
 - Defining and implementing a form of words into contracts and service level agreements that the Standard and requirement to report will be adhered to
 - Promotion and rolling out further whistleblowing confidential contact roles across Grampian
 - Continuing to support the recording of concerns, the compilation of reports and publication of system wide learning from whistleblowing concerns.
 - Continuing to promote the value of concern raising, as a way to benefit service users and our colleagues, by highlighting improvements that can be made to the services we provide.

5. SUMMARY OF IMPLICATIONS

(a) Corporate Plan and 10 Year Plan (Local Outcomes Improvement Plan (LOIP)) and Moray Integration Joint Board Strategic Plan “Moray Partners in Care 2019 – 2029”

As defined within the Moray Integration Scheme values.

(b) Policy and Legal

The National Whistleblowing Standards set out how the Independent National Whistleblowing Officer (INWO) expects all NHS Service providers to handle concerns that are raised with them and which meet the definition of a “whistleblowing concern”. This report outlines the steps and timescales being taken to implement the Standards.

(c) Financial implications

None directly associated with this report

(d) Risk Implications and Mitigation

None directly associated with this report

(e) Staffing Implications

None directly associated with this report

(f) Property

None directly associated with this report

(g) Equalities/Socio Economic Impact

An Equality Impact Assessment is not required as the report does not deal with actions which may impact adversely on groups with protected characteristics.

(h) Consultations

Consultation on this report has taken place with the Workforce Forum, System Leadership Group, Chief Officer and Chief Financial Officer and Tracey Sutherland, Committee Services Officer who are in agreement with the content in relation to their area of responsibility.

6. CONCLUSION

- 6.1 This report outlines the work that has been undertaken and the work that still requires to be completed to embed the standards for implementation across all NHS services. It is recommended that progress continues on the phased approach in line with NHS Grampian’s plans as outlined in this report and appendices.**

Author of Report: Jeanette Netherwood, Corporate Manager
Background Papers: held by Louise Ballantyne, Head of Engagement, NHS Grampian.

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