

Grampian-wide Whistleblowing Standards Implementation Action Plan 2020-2021

The National Whistleblowing Standards (The Standards) were finalised in the summer of 2020 and are due to be implemented across Scotland by 1 April 2021. This requires NHS Boards, Health and Social Care Partnerships, Primary Care and Contracted Service Providers to familiarise themselves with The Standards and be ready to implement them in full.

To explore readiness to implement The Standards across Grampian and to support the actions required to achieve this, a Whistleblowing Standards Implementation Group (WSIG) was established in July 2020. The WSIG's membership includes representation from across Grampian to ensure cross system input, a consistent approach and to identify any areas that require additional support.

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 are summarised below. The WSIG are working through each part of The Standards, will support the relevant discussions to take place with key stakeholders, with the aim of complete readiness for implementation of the Standards across the Health and Social Care System in Grampian.

The Standards, Part 1 – THE PRINCIPLES (pages 7 - 10) (The introduction covers pages 1-6)	Action
Establish a culture that values concern raising, handles them openly and transparently, and has a focus on system wide learning and improving.	
Ensure clear governance and accountability arrangements exist to support staff to follow, monitor and review the whistleblowing procedure.	
Have systems in place to ensure all concerns are investigated quickly, appropriately, and we are able to monitor how they were handled and identify trends to support continuous improving.	
Staff investigating concerns should be impartial, independent, accountable and ensure the investigation is handled objectively, confidentially and sensitively.	
Procedures for raising concerns should be well known, easy to access, written clearly, leaving no doubt that staff raising concerns will be well supported and can remain anonymous.	

Grampian-wide Whistleblowing Standards Implementation Action Plan 2020-2021

Outcomes of investigations should be appropriate to the findings and set out what action will be taken to put things right or improve practice.	
---	--

The Standards, Part 2 – THE PROCEDURE (pages 11 - 28)	Action
Whistleblowing can be defined as: a member of staff (or ex-staff member) 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.	
Grievance raising is different to whistleblowing/concern raising, as it is generally about the staff member's own employment situation and not about public interest issues.	
Concerns can be raised by anyone providing services for the NHS, or working with NHS staff; agency workers, contractors (including third sector service providers), students, volunteers, etc.	
The Public Interest Disclosure Act 1998 (PIDA) allows legal protection against discrimination for people who use the whistleblowing procedure. A concern is considered a 'protected disclosure' when the legal test is met that the person 'reasonably believes' the concern they are raising is in the public's best interest.	
It is important to be aware that some people may feel at greater risk of raising concerns, such as; agency staff, students who are due to be assessed, people who need a visa to work in the UK or are from recognised equality groups.	
The Standards should only normally be used if; a concern is raised where no other HR procedure or processes are being used, or have been used (with the outcome not being what they expected), or if the person says they want to use the whistleblowing procedure.	
Raising a concern can be stressful and isolating, with trust being placed in an organisation when an opportunity is given to put right a wrong or reduce risk. This trust should be repaid by ensuring protection is given throughout the process, ensuring no harm comes as a result of speaking up.	

Grampian-wide Whistleblowing Standards Implementation Action Plan 2020-2021

As people who raise concerns may not know about The Standards, managers are responsible for identifying if issues would be appropriate to be handled in this way and highlight this to the person.	
Concerns about fraud can be raised through The Standards but must be raised within 2 days with the NHS Board's fraud liaison officer to allow this to be reported to the NHS Counter Fraud Services.	
Immediate action must be taken if a concern is raised that could pose any risk to patient safety.	
Disciplinary action should be taken if a false concern is knowingly raised maliciously.	

The Standards, Part 3 – INVESTIGATING CONCERNS (pages 29-45)	Action
Concerns raised under The Standards follow an almost identical process, and timescales, to the way concerns and complaints are handled when received from members of the public, including that concerns can usually only be investigated if they are raised within 6 months of becoming aware of an issue.	
Early resolution should be first attempted within 5 working days, if appropriate and possible, if not a full investigation should take place and be reported back within 20 working days.	
All whistleblowing concerns must be recorded on a system, and the person raising the concern provided with a written acknowledgement and response.	
There is no flexibility to pause or delay the whistleblowing procedure, and the 5 or 20 working day timescales can only be extended if a senior manager authorises this and a new timescale agreed and explained to the concern raiser along with the reason for the delay.	
Following an investigation it must always be considered if wider learning is needed across other services, departments, health care providers, etc. or with other Boards across Scotland and shared as appropriate.	
If the person who raised the concern is unhappy with the outcome of the investigation they are able to contact the Independent National Whistleblowing Officer (INWO) to ask that the investigation is looked into.	
The INWO can only usually look into concerns raised to them within 12 months of the person becoming aware of the issue they are raising, and if the concern has gone through the full whistleblowing procedure.	

Grampian-wide Whistleblowing Standards Implementation Action Plan 2020-2021

The Standards, Part 4 – NHS BOARD AND STAFF ROLE RESPONSIBILITIES (pages 46-57)	Action
Board members have a critical role in setting a tone and culture in their organisation that values the contribution of all staff, including those who identify the need for changes through speaking up.	
Board members need to show interest and enthusiasm for issues that arise through concerns raised and support the learning and improvements that stem from them.	
Board members need to ensure the arrangements in place promote trust between staff and the board.	
The Board must ensure there is clear descriptions of roles and responsibilities of staff in relation to raising and receiving concerns at each level of the organisation.	
The Board is responsible that quarterly reporting of whistleblowing concerns is on time and accurate, and show an interest in what these reports say in regards of service delivery and culture. Board members should challenge information or seek additional evidence of outcomes and improvements as appropriate.	
The Board is responsible for ensuring that services contracted out by their organisation (including primary care and on site contracted services) have arrangements in place encouraging staff to raise concerns.	
The Board is responsible for ensuring arrangements are in place ensuring students and volunteers are aware of their right to access the procedure, and that concerns can be raised by universities and colleges.	
The Board is expected to work with integrated joint boards (IJBs) to ensure that all staff in the partnership can raise concerns through this procedure.	
As non-executive directors, whistleblowing champions are part of the Board and are responsible for monitoring and supporting the effective delivery of the whistleblowing policy. They should receive support from and be listened to by the Board, and action taken as a result of the issues they raise.	
The whistleblowing champion is an assurance role, providing critical oversight that managers are responding to concerns in accordance with The Standards, and raising issues of concerns to the Board.	

Grampian-wide Whistleblowing Standards Implementation Action Plan 2020-2021

<p>The whistleblowing champion is responsible for ensuring appropriate systems are in place for services delivered indirectly, including primary care and contracted services, and those delivered by H&SCPs, meaning they may need to work with IJB colleagues to clarify expectations and requirements.</p>	
<p>Overall responsibility and accountability for the management of whistleblowing concerns lies with the chief executive, executive directors and appropriate senior management.</p>	
<p>The chief executive should ensure there is an effective whistleblowing procedure, with a robust investigation process, that organisational learning from concerns raised can be demonstrated and must work with board members to decide how oversight of the implementation of the standards can be achieved and who will have responsibility for this. Responsibility if delegated, must be clearly stated and accepted.</p>	
<p>Executive directors are responsibility and accountability for signing off stage 2 decision letters, so must be satisfied that the investigation is complete and the response addresses all aspects of the concern raised.</p>	
<p>Decisions on concerns should be made by an independent senior member of staff from another directorate, but the area director will retain ownership and accountable for managing and reporting the concerns.</p>	
<p>The director responsible for primary care services (PCSs) has specific responsibilities for concerns raised within and about PCSs, and must ensure that all PCSs contracted by the board are reporting appropriately.</p>	
<p>Workforce directors are responsible for ensuring that all staff are aware of the Standards, have access to the procedure and the support they need, that managers are appropriately trained to identify concerns and handle them at stage 1, and that concerns raised within HR procedures which could amount to whistleblowing is appropriately signposted to this procedure.</p>	
<p>HR teams will assist managers and confidential contacts to identify HR issues, but HR functions should not be involved in investigating whistleblowing concerns unless the concern directly relates to staff conduct.</p>	
<p>Appropriately skilled senior members of staff, from another directorate, with no conflict, or perceived conflict of interest should carry out investigations into whistleblowing concerns and draft any recommendations.</p>	
<p>All organisations that deliver services for NHS Scotland must provide staff with at least one point of contact who is independent of normal management. Smaller organisations, such as in Primary Care should work with their board to allow their staff to access these confidential contacts.</p>	

Grampian-wide Whistleblowing Standards Implementation Action Plan 2020-2021

Confidential contacts should be appropriately skilled to support staff to raise concerns, work with the whistleblowing champion to ensure all staff are aware of the arrangements, promote a culture of trust, which values raising of concerns as a route to learning and improving, assist managers to use concerns to influence change and work with the chief executive, or delegated others, to oversee application of The Standards to ensure they are being applied and functioning at all levels of the organisation.	
The Board will have an INWO liaison officer who is the main point of contact between the INWO and the organisation and have overall responsibility to provide the INWO with whistleblowing concern information in an orderly, structured way, within given timescales, and confirm and provide evidence that any INWO recommendations have been implemented.	
The Board's Fraud liaison officer must be aware of the Standards, so if a concern about fraud is raised with them, they enquire if the person wishes to use the Standards and if so they are signposted appropriately.	
All managers should be aware of the whistleblowing procedure and how to handle and record concerns that are raised to them. They must be trained and empowered to make decisions on stage 1 concerns.	
All staff who deliver an NHS service should feel able and empowered to raise concerns about harm or wrong-doing. They should be trained so they are aware of the channels available to raise concerns.	
Union representatives can provide helpful insights in the functioning of systems for raising concerns and should be involve in implementation and monitoring of these systems where possible.	
The Board need to ensure that staff have the knowledge, skills and appropriate training to implement the Standards, including; whistleblowing champions, confidential contacts/ whistleblowing ambassadors, executive directors signing off investigations and investigators, i.e. supportive conversation skills.	
The organisation must ensure there are strong governance arrangements in place that set out clear procedures for handling whistleblowing concerns raised about senior staff, ensuring instigations are conducted by an individual independent of the situation and empowered to make decision on any finding of the investigation.	
The Board must ensure that all services they use to deliver their services, including primary care organisations or contractors, have procedures in place in line with the Standards and that external service providers are meeting the requirements of the Standards and mechanisms in place to provide assurance.	

Grampian-wide Whistleblowing Standards Implementation Action Plan 2020-2021

The Board must ensure that systems are in place to facilitate reporting by the above providers and that quarterly reports about concerns raised and performance against the Standards are received.	
There must be systems in place to gather reports of concerns from primary care and contractors on a quarterly basis. (DOES NOT SAY WHO SHOULD ENSURE THIS)	
The Board must ensure staff under contract with higher education institutions (HEIs) have equal access to any systems and arrangements for raising concerns as with those under contract with the NHS.	
The Board must ensure students have access to the standards, meaning placements must include information for students and course representatives on how to raise a concern and confidential contacts.	
The Board must ensure concerns raised by staff or students of HEIs about the board's services and considered through the standards are included in reporting of concerns to the board and externally.	
The Board is expected to work with local authority (LA) colleagues to ensure arrangements are made by IJBs to enable all those working in NHS services to raise concerns about these services in line with the Standards, whether employed by the LA or directly by the NHS.	
Each IJB is required to develop an agreement that allows for staff working across the partnership to raise concerns in line with the Standards, however the final stage for concerns relating to social work and care services is to be signposted to the Care Inspectorate instead of the INWO for review.	
The Board must ensure concerns raised by staff in integrated services are included in any reporting of concerns to the board and externally.	
The Board must ensure there is clear information for voluntary organisations (VO) who work alongside or with the NHS on how concerns can be raised in line with the Standards, and that all VO staff and volunteers have access to the board's confidential contacts or other representative for raising concerns.	
The Board must ensure concerns raised by volunteers or volunteer coordinators about the board's services are considered through the standards and included in any reporting to the board and externally.	

Grampian-wide Whistleblowing Standards Implementation Action Plan 2020-2021

<p>The Board is expected to work with organisations that regulate their services or staff, ensuring investigations are as effective and efficient as possible, inform regulators if investigations identify issues in fitness to practice and ensuring whistleblowing concerns are kept separate from disciplinary issues.</p>	
--	--

<p>The Standards, Part 5 – RECORDING AND LESSONS LEARNED (pages 58-65)</p>	<p>Action</p>
<p>One of the main aims of the whistleblowing procedure is to ensure learning occurs from concerns raised.</p>	
<p>Structured systems must be in place to record concerns, their outcomes and any action taken, and be able to hold records in a way that protects staff confidentiality and ensures compliance with General Data Protection Regulations and Scottish Government Records Management Code of Practice requirements.</p>	
<p>All managers, confidential contacts and whistleblowing ambassadors must be able to record concerns on the system but shouldn't be able to access other records without good reason.</p>	
<p>The systems used must allow for full reporting of all concerns raised, regardless of who they have been raised with and must as a minimum include the confidential contact or whistleblowing ambassador and the Board's whistleblowing champion.</p>	
<p>All NHS service providers must record and review information about the concerns raised about their services quarterly, the key performance indicators (KPIs) are the same as used in public complaint handling and include timescales achieved, learning and changes that have occurred, whistleblowers experience of raising a concern and staff awareness, perceptions and training.</p>	
<p>Any related HR processes should progress in parallel with whistleblowing concern investigations with every effort to avoid delay which could risk unsafe service delivery occurring.</p>	
<p>Senior management review should take place quarterly to look for trends and service failings, and include consideration if any policies or procedures need reviewed, and if any new INWO recommendations have been made. Root cause analysis should be proactively undertaken if failings are identified and every opportunity explored when service improvements can lead to wider organisational change.</p>	

Grampian-wide Whistleblowing Standards Implementation Action Plan 2020-2021

NHS Boards are responsible for ensuring all primary care and other contracted service providers supply their KPI information to their Board as soon as possible after the quarter end.	
For contacted services, the contract must set out the requirements in relation to reporting concerns.	
If no concerns are raised within primary care or contracted services, they do not need to report this to the Board quarterly, but will need to submit an annual report setting out concerns raised in that year, or explaining there had been no concerns raised during that time.	
Boards should monitor the reporting of concerns to gain insurances that staff have confidence in the systems in place.	
Boards must publish an annual report which sets out performance in handling whistleblowing concerns and build on the quarterly KPI reports. Boards must work with their services providers (including primary care) to ensure they get the information required so the annual report covers all the NHS services provided through the board. IJB reporting will also be covered in this report unless a separate annual report covering all IJB services is published by the IJB itself. The report must also include concerns raised by students, trainees and volunteers.	

The Standards, Part 6 – NHS BOARD AND EXTERNAL SERVICE PROVIDERS (pages 67-71)	Action
Boards must ensure that all services delivered by them or on their behalf have appropriate procedures in place for their staff, students, contractors, volunteers and others.	
Boards must have effective mechanisms for oversight of the concerns raised about their own services, the services they fund or support through alternative delivery routes.	
Boards will be expected to compile reports quarterly on concerns raised with primary care providers and contracted services, and must review these quarterly reports and take a considered approach to what these reports say about the culture of speaking up within the organisation and follow up any issues raised.	
The requirement for primary care and other contracted services to have procedures in place in line with the Standards is the Board's responsibility and must form a part of all contracts or service level agreements.	

Grampian-wide Whistleblowing Standards Implementation Action Plan 2020-2021

Boards must have mechanisms for ensuring compliance with these requirements, including the requirement to report concern handling information to the board on a quarterly basis.	
Students must be able to raise concerns and have access to support services in line with the Standards.	
Students should be encouraged to raise concerns with an appropriate manager and have access to the board's confidential contact.	
Health Education Institution (HEI) courses must identify a contact for students working in an NHS service.	
HIE staff should be encouraged to raise concerns with an appropriate manager in the department they are working in, and should have access to this procedure and the support needed to raise a concern.	
Voluntary organisations (VOs) most commonly work with the NHS by providing additional services, i.e. Macmillan nurses, providing services contracted by the NHS, i.e. nursing care at home and by recruiting volunteers to enhance patient experience in care settings. All these groups must be able to access the procedure, support and protection provided by the Standards.	
People working for VOs contracted to provide a service, are treated in line with other contracted service providers.	
Each VO that works within an NHS setting will have at least one member of staff who is informed and able to support volunteers or colleagues through the procedure, acting as an advocate if preferred.	
Confidential contacts must be aware of the board's obligation to receive concerns and provide support to anyone working within or alongside a service provided by the board.	
Confidential contacts are encourage to develop relations with representatives from HEIs and voluntary sector providers to develop a mutual understanding of roles and ensure effective communication.	

The Standards, Part 7 – PRIMARY CARE AND CONTRACTED SERVICE PROVIDERS (pages 72-77)	Action
Staff in small teams can find it particularly difficult to raise concerns so support is often needed.	

Grampian-wide Whistleblowing Standards Implementation Action Plan 2020-2021

Leadership behaviours set the tone for the way other staff behave, all NHS services must strive for a culture that welcomes concerns from people working within their services, whoever they are.	
Anyone delivering NHS services must be able to raise concerns, access the Standards and support, including those working for another organisation but within these services i.e. district or agency nurses.	
When a primary care or contracted service is being delivered by a much larger organisation, such as a local pharmacy that is run by a national company, this company must ensure that any services delivered on behalf of NHS Scotland are compliant with the Standards.	
Small organisations face varying challenges around raising concerns, including due to the size of the team it might be obvious who raised the concern. A way to overcome this is for confidential contacts to be shared amongst other local services or practices allowing them to act as an advocate.	
NHS Boards are required to provide a confidential contact for primary care and contracted providers, if necessary the confidential contact will ensure that appropriate action is taken to reduce immediate risk.	
If there would be a potential conflict of interest for an investigation to take place internally, the provider must discuss the concern with board and work with the board to investigate the issue.	
Boards must be willing to assist with contactors investigations if appropriate, this may include providing an investigator or advising how to conduct an investigation, but boards must gain assurances that appropriate action has been taken to address the concerns raised.	
Staff must be encouraged to raise concerns, know who they can raise them to, and other routes to do this.	
Primary care services must report concerns data annually to the board, even if to report no concerns were raised, in addition a quarterly report of concerns raised in that period should be reported to the board.	
All primary care and contracted services must publish information about concerns that have been raised with them, unless this is likely to identify anyone, if so high level reporting may only be appropriate.	

The Standards, Part 8 – HEALTH AND SOCIAL CARE PARTNERSHIPS (pages 78-83)	Action
--	---------------

Grampian-wide Whistleblowing Standards Implementation Action Plan 2020-2021

<p>HSCPs, having employees from two organisations delivering services together, may find staff feel uneasy raising concerns about staff with different lines of management or where arrangements in place for whistleblowing are different, meaning IJB and partnership managers must promote a culture that encourages concern raising.</p>	
<p>IJBs must ensure that all HSCP staff across both local authority and the NHS, as well as students, trainees, agency staff or volunteers are able to raise concerns through this procedure, that all concerns are recorded and reported to the IJB and NHS board quarterly, and that service improvements made as a result of concern raising are shared.</p>	
<p>It may be that in considering concerns about NHS services, issues are identified which relate to local authority services. If so the whistleblower should be signposted to the INWO for the NHS service issues and the Care Inspectorate or other appropriate regulatory or oversight body for issues that relate to local authority services.</p>	
<p>An agreement by the IJB may be required to ensure support and protection for all those working within the HSCP, in raising concerns about NHS services.</p>	
<p>There is a requirement for all concerns raised to be recorded and reported to the IJB and NHS board quarterly.</p>	
<p>To ensue equity for staff, the INWO recommends that HSCPs adopt the same approach to handling concerns raised about local authority services as they do in relation to NHS services, the only difference being at the final stage, the whistleblower would be signposted to the Care Inspectorate, or in some cases Audit Scotland, instead of the INWO.</p>	
<p>The detail of any extended agreement are for each IJB and their HSCP to consider; each HSCP have different arrangements in place for the delivery of their services, and it will be for them to consider whether such an agreement should cover all of their services; it would not be appropriate to create confusion for local authority staff in how to raise concerns about their services.</p>	
<p>Chief Officers are responsible for ensuring that systems are in place for raising concerns within these Standards. They must also take a leading role in reviewing arrangements in relation to local authority services and taking forward any changes to ensure the Standards can be met, and any other changes ensuring equity of access across HSCPs.</p>	
<p>Within HSCPs, the confidential contact will need to be familiar with the way concerns are handled across its services, as well as the board’s expectations around handling concerns.</p>	
<p>The board’s whistleblowing champion has a role in ensuring appropriate arrangements are in place to ensure delivery of the Standards, and will be able to provide guidance for HSCP managers on how concerns raised in relation to NHS services must be handled, as well as sharing information about appropriate governance arrangements.</p>	
<p>Each HSCP needs to consider how they hold information about concerns that have raised through this procedure. In particular there need to be systems in place to ensure that personal information is only shared with individuals as</p>	

Grampian-wide Whistleblowing Standards Implementation Action Plan 2020-2021

agreed or explained to the person raising the concern. The details of the concern itself, and how it has been handled, need to be stored in a way that will enable reporting and monitoring of concerns and concern handling.	
This may mean concerns raised about local authority services are recorded separately from those relating to NHS services. Any joint systems developed will need to be able to separate out local authority from NHS service concerns so the NHS board can carry out appropriate monitoring of these concerns.	
NHS boards are responsible for collating reports of concerns raised in relation to the services they deliver, including those raised within the HSCPs in its area. In this way, boards will be able to identify areas for specific attention, based on the themes and trends across the HSCPs.	
All IJBs must ensure that information is published and promoted about the concerns that have been raised about their services, unless likely to identify individuals, in which case only high level information can be provided as appropriate.	

The Standards, Part 9 – STUDENTS AND TRAINEES (pages 84-87)	Actions
All students, trainees, apprentices and interns working, or studying within NHS services must have access to The Standards and must be able to speak out about patient safety or malpractice concerns, and access support to do this.	
Students may be deterred from raising concerns if they feel this could impact on their marks and this must be taken into consideration when responding to concerns raised by students.	
NHS Boards must be open to receiving whistleblowing concerns from students directly or through representatives from their course, but concerns about their course should be raised through the university.	
Students can remain anonymous to the board if they choose to raise their concern through a course advocate, and all communication would be with the advocate who would share with the student.	
Trainees under a direct contract with NHS Education Scotland (NES) can raise their concern with NES or the board they are working for, and should be told the contact at NES if they wish to do so.	

The Standards, Part 10 - VOLUNTEERS (pages 88-91)	Actions
--	----------------

Grampian-wide Whistleblowing Standards Implementation Action Plan 2020-2021

All volunteers working within NHS services must have access to The Standards and must be able to speak out about patient safety or malpractice concerns, and access the support they need to do this.	
Volunteers should be encouraged, and given the opportunity, to share any concerns they might have and be told about the procedure and how to access it, as volunteers do not have access to most HR policies.	
NHS Boards must be open to receiving whistleblowing concerns from volunteers or volunteer leads. If the volunteer chooses to, they can use the volunteer lead to raise the concern on their behalf, allowing them to remain anonymous to the board, but this means all communication will be with the volunteer lead.	
Boards must ensure that volunteers have the same access to support that staff do, including counselling which would normally be provided through an employee assistance scheme.	

Summarised by Louise Ballantyne, Head of Engagement, NHS Grampian, October 2020