# NHS 24 BOARD MEETING

22 APRIL 2021 ITEM 9.3 FOR ASSURANCE

# WHISTLEBLOWING STANDARDS UPDATE

Executive Sponsor:	Director of Nursing and Care/ Interim Director of Workforce			
Lead Officer/Authors:	Director of Nursing and Care/ Interim Director of Workforce			
Action Required	The content of this paper is presented to the Board for discussion and update.			
Key Points for this Committee to consider	To understand and note the actions as appropriate to meet the assurance requirements in relation to the National Whistleblowing Standards which were implemented on 1st April 2021			
Governance process	Progress with and any resulting recommendations will be made to the Executive Management Team, the Staff Governance Committee and the Board.			
Strategic alignment and link to overarching NHS Scotland priorities and strategies	<ul> <li>The appointment of the SPSO as INWO and their associated powers is made under the Public Services Reform (the Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020</li> <li>Whistleblowing Champions are appointed by Scottish Government and the implementation of the National Whistleblowing Standards is a legal requirement</li> <li>Staff Governance Standards</li> <li>NHS 24 Strategy</li> <li>Key Scottish Government Ministerial Priorities</li> <li>NHS 24 Realistic Medicine Framework</li> <li>NHS 24 Strategic and Corporate Risk Register</li> <li>Excellence in Care</li> </ul>			
Key Risks	Failure to implement the Standards would impact on the Corporate Risk Register – reputational damage.			
Financial Implications	At this stage no financial implications have been identified.			
Equality and Diversity	The organisation should consider in reporting whether any analysis by protected characteristics is required.			

#### 1. RECOMMENDATION

- Note the work which is underway to support the ongoing implementation of the National Whistleblowing Standards.
- Consider the update from the Short Life Working Group which has been convened and chaired by the Executive Director of Nursing and Care. This Group is established to ensure NHS 24 continues to work on its preparedness for the ongoing implementation of the Standards
- Note the levels of compliance with the mandatory training on the Standards
- Further and more detailed information will be provided at the Board Workshop in May.

#### 2. BACKGROUND

- 2.1 NHS 24 continues to be committed to dealing responsibility, openly and professionally with any genuine concern about wrongdoing, malpractice or safety risks within the work place. Whistleblowers can have an important role in highlighting any unjust or unethical behaviour potentially resulting in positive change. Affording whistleblowing protection whilst progressing due diligence in relation to the whistleblowing concern is an important balance to maintain.
- 2.2 In support of this objective, the following were progressed
  - Based within the Scottish Public Services Ombudsman (SPSO), a new role of an Independent Whistleblowing Officer (INWO) is being established. The INWO is expected to support all NHSScotland Boards to comply with national whistleblowing and to provide critical oversight to any whistleblowing concerns. The INWO will be the final stage of the process for those raising concerns
  - Development of a new set of 'National Whistleblowing Standards' (accessible through this link www.inwo.org.uk to support the INWO and all NHSScotland Boards to handle any whistleblowing concerns
  - Non-Executive Whistleblowing Champion (NWC) Board Members appointed to each Board. The NWC does not have any operational role in the Board. Each NWC is expected to work alongside the INWO and contribute to the promotion and delivery of a positive working culture
  - The National Whistleblowing Standards provide the Framework for the new national 'Once for Scotland' NHSScotland Whistleblowing Policy (this will render the NHS 24 Whistleblowing Policy redundant)
- 2.3 To this end, training was made available on the TURAS Platform which is broken down into a programme for staff and one for those who manage staff.

#### 3. CURRENT POSITION

- 3.1. A Whistleblowing SLWG has been established, terms of reference agreed (Appendix 1) and continues to meet on a regular basis.
- 3.2. A Workplan (Appendix 2) has been agreed and the Group continues to develop this to ensure the successful roll-out of the Standards.

- 3.3. There are ongoing discussions between the Director of Nursing & Care and the Interim Director of Workforce on where the general day to day management of Whistleblowing will be held to ensure strong governance. The proposal would be to have this established within the Patient Experience (Complaints) Team which sits within the Director of Nursing & Care structure. This would ensure clear lines between Whistleblowing and HR Practices and would ensure full neutrality.
- 3.4. A Communications Plan (Appendix 3) has been developed, agreed and currently timescale are being agreed for the rolled out. This includes regular updates reminding staff to undertake their Training on the Standards, spotlight on the Standards and updates on internal processes.

### 3.5 **Training**

A national training programme has been developed and is held within TURAS. All members of staff are required to either complete the staff module or the Manager's module. Communication is out to staff on a regular basis reminding them of the requirement to undertake this training.

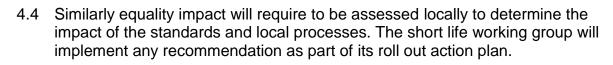
To date - 406 (24.5%) have completed the staffing module and 68 (23.5) have completed the management module. A fuller breakdown will be provided in future Workforce Performance Reports.

#### 4. NHS 24 RESPONSIBILITIES

- 4.1 With respect to the Standards, NHS 24 responsibilities are outlined under four broad domains:
  - NHS 24 Leadership
  - Training and Awareness Raising;
  - Contractors and Joint Working Arrangements; and
  - Monitoring, Learning and Reporting.

Both the Workplan and Communications Plan outline the requirements of each area and a regular report will be provided to the Board to give an update.

- 4.2 As part of the new standards implementation Boards are required to have an electronic system to record whistleblowing concerns. Whilst territorial Boards have agreed to use Datix incident recording system, NHS 24 has an interim solution in place aligned to similar national Boards such as National Services Scotland (NSS). In parallel NHS 24 continues to scope the use of the new Respond system with the initial phase of this system due for implementation in September 2021. The intention will be for the Whistleblowing process to be implemented in the second phase of this project.
  - 4.3 Data privacy and protection is a crucial element of whistleblowing standards. As part of the new standards NHS 24 is confirming its data privacy impact assessment on the standards with a view to implementing any recommendations as part of the short life working group.



### Appendix I

# Short Life Working Group – National Whistleblowing Standards TERMS OF REFERENCE

#### 1. Purpose of the Group

1.1 The Group is responsible to support the implementation of the National Whistleblowing Standards within NHS 24.

#### 2. Composition of the Group

#### 2.1 Membership

- 2.1.1 The Group will comprise:
  - Maria Docherty, Director of Nursing and Care (Chair)
  - Linda Davidson, Interim Director of Workforce (Vice-Chair)
  - Laura Ryan, Medical Director
  - Kenny Woods, Staff Side Representative
  - Kevin McMahon, Head of Risk Management and Resilience
  - David Morrison, Partnership and Equalities Manager
  - Lisa Morton, Associate Head of Communications
  - Margaret Cairns, General Manager
  - Jim Martin, Financial Services & Audit Manager
  - Mark Kelly, Associate Director of Nursing

#### 3. Meetings of the Group

#### 3.1 Frequency

3.1.1 The Group shall meet three times:

Monday 20<sup>th</sup> July 2020 Monday 24<sup>th</sup> August 2020 Monday 21<sup>st</sup> September 2020

3.1.2 The Chair of the Group may at any time convene additional meetings of the group to consider business which may require urgent consideration.

#### 3.2 Agenda and Papers

- 3.2.1 The Chairs will set the Agenda for meetings.
- 3.2.2 The Agenda and supporting papers will be sent out at least three working days in advance of the meetings.

3.2.1 All papers will clearly state the agenda reference, the author, the purpose of the paper and the action the Group is asked to consider.

#### 3.3 Quorum

- 3.3.1 To be quorate meetings will review the attendance of not less than three members of the group. Decisions will be taken by those members in attendance at the time.
- 3.3.2 Any member not able to attend who wishes to input into decisions should let their views be known to the Chair when the Agenda and supporting papers are issued or take responsibility to send a nominated Depute on their behalf.

## 3.4 Actions/Decisions Log

3.4.1 A record of actions/decisions will be taken at each of the meetings and distributed accordingly.

#### 4. Reporting and Authority

- 4.1 The Group shall report in to the Executive Management Team and Staff Governance Committee.
- 4.2 The Group is authorised by the Executive Management Team to take decisions and issue guidance and make rulings within the scope of its remit.

# 1.1 Communications & Engagement Delivery Plan

# 1.2 NHS Whistleblowing

Activity	Detail	Timescales	Additional Information	Status / Next Steps
Internal Communications Plan	<ul> <li>Develop a plan to ensure that staff are fully informed on:         <ul> <li>New legislation coming into practice on 1<sup>st</sup> April</li> <li>Mandatory whistleblowing eLearning module</li> <li>NHS 24 internal process within for reporting whistleblowing</li> <li>Internal support on whistleblowing</li> <li>National Whistleblowing Helpline</li> </ul> </li> </ul>	February 2021 - ongoing	Plan to utilise multi-channel comms & engagement approach to ensure wide reach  Information communicated to staff should be open, consistent, and factual	Initial plan developed – awaiting detailed information on internal processes to support wider staff knowledge and understanding about steps and support they can access before whistleblowing.  Article added to Team Talk on 19.02.21
Intranet	Develop a dedicated intranet page highlighting key information and support on whistleblowing including:  • What is whistleblowing? • NHS 24 Whistleblowing Policy • New legislation coming into practice on 1st April	TBC	Information reviewed and updated as required	Awaiting information to update pages

Activity	Detail	Timescales	Additional Information	Status / Next Steps
	<ul> <li>Mandatory whistleblowing eLearning module</li> <li>NHS 24 internal process within for reporting whistleblowing</li> <li>Internal support on whistleblowing</li> <li>National Whistleblowing Helpline</li> </ul>			
Team Talk	Important information highlighted through Team Talk as required.	Bi-weekly	Bi weekly document issued to staff to encourage and support communications within teams	Mandatory eLearning information added to Team Talk on Friday 19 February.
Huddle Brief	Important information highlighted in the new weekly huddle brief as required	Weekly	Key information shared with frontline staff at their huddles	Mandatory eLearning Update include in issue 1- w/c 22 Feb (awaiting sign off)
Video Content	Use video as a way of promoting key messages for the campaign	TBC	Use video to promote various messages including using members of the Exec Team talking about the new standards, the internal support available i.e. Confidential Contacts etc	
Line manager	Information shared with Line Managers to promote and highlight across their own teams	TBC	Create of packs/or pointing them to information	

Activity	Detail	Timescales	Additional Information	Status / Next Steps
	the support and process around whistleblowing			
Spotlight on whistleblowing	Adhoc promotion through internal communications channels of whistleblowing – what is it? How does it affect me?	TBC	Making it personal to staff Creating an understanding of what it is and what it means in NHS 24	
Spotlight on new standards and NHS 24 policy	Use internal communications channels to do a spotlight on new standards – and NHS 24 Policy	TBC	What is it? How does it impact staff?	
Spotlight on internal support & process	Adhoc promotion through internal communications channels on internal support and processes	TBC	E.g. Confidential contacts: Who are our confidential contacts? What is their role? Purpose? How do you become one? Training?	