

<p>NHS 24 BOARD MEETING</p> <p style="text-align: right;">18 AUGUST 2022 ITEM NO 12.3 FOR ASSURANCE</p> <p style="text-align: center;">NHS 24 WHISTLEBLOWING ANNUAL REPORT 2021/22</p>	
Executive Sponsor:	Maria Docherty, Executive Director of Nursing & Care
Lead Officer/Author:	Andrew Moore, Deputy Director of Nursing & Care
Action Required	The Board is asked to note the Whistleblowing Annual Report 2021/22.
Key Points	The Annual Report details activities and developments relating to the Whistleblowing from 1 April 2021 - 31 March 2022.
Governance process	<p>The report was presented to the National Clinical Governance Group on 27 July 2022 and Clinical Governance Committee on 8 August 2022.</p> <p>The report was virtually approved by the NHS Board in June 2022.</p>
Strategic alignment and link to overarching NHS Scotland priorities and strategies	<ul style="list-style-type: none"> • 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 • Whistleblowing Champions are appointed by Scottish Government and the implementation of the National Whistleblowing Standards is a legal requirement • Staff Governance Standards • NHS 24 Strategy • Key Scottish Government Ministerial Priorities • NHS 24 Realistic Medicine Framework • NHS 24 Strategic and Corporate Risk Register
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.



Annual Whistleblowing Report 1st April 2021 – 31st March 2022

Version: 4.0
Author: A. Moore
Owner: Executive Director of Nursing and Care
Approval: NHS 24 Board

1. Introduction

The National Whistleblowing Standards came into force in NHS Scotland on the 1st of April 2021.

The principles have been approved by the Scottish Parliament and underpin how NHS Scotland services must approach any concerns which are raised. Every organisation providing a service on behalf of the NHS must follow the standards.

2. Legislation

The Scottish Public Services Ombudsman Act 2002 was amended to allow the investigation of healthcare whistleblowing matters.

3. Standards

The National Whistleblowing Standards set out how the Independent National Whistleblowing Officer (INWO) expects all NHS Scotland service providers to handle concerns that are raised with them, and which meet the definition of a 'whistleblowing concern'.

These Standards are underpinned by a suite of supporting documents, which provide instructions on how the INWO expects concerns to be handled. Together these documents form a framework for the delivery of the National Whistleblowing Standards.

4. Governance, Decisions and Oversight

The Standards set out the requirement that the NHS 24 Board and Clinical Governance Committee plays a critical role in ensuring the Whistleblowing Standards are adhered to, including ensuring quarterly reporting is presented and robust challenge and interrogation of this takes place.

The Executive Director of Nursing and Care is the executive lead for Whistleblowing. The Deputy Director of Nursing and Care is the key contact point for oversight/coordination of all possible and ongoing Whistleblowing cases within NHS 24.

The criteria for what constitutes a whistleblowing concern is set out in the National Whistleblowing Standards [Definitions: What is whistleblowing? | INWO \(spsso.org.uk\)](https://www.spsso.org.uk/whistleblowing-standards/definitions-what-is-whistleblowing/). If the complaint is not Whistleblowing, a response is drafted with clear reasons why it is not Whistleblowing and sent to the complainant by the Director of Nursing and Care. If there is another process or route for their concern, this is signposted. If the concern is Whistleblowing, then the Director/Deputy Director of Nursing and Care liaises with relevant senior leadership and contacts to identify a manager to lead on the concern. The Deputy Director of Nursing and Care will oversee progress, ensure timelines and communications are maintained. The Director of Nursing and Care will review the outcome and any follow up actions and learnings needed to ensure these are progressed appropriately, with relevant internal and external individuals, bodies, and committees, as appropriate based on the nature of the concern.

A summary of every closed case in the period will be included in future quarterly reports, including any outcome and action taken or planned.

5. Roles and Responsibilities for National Whistleblowing Standards

We have set out the various roles and responsibilities, as a reminder, within NHS 24 in respect of the Whistleblowing Standards. Everyone in the organisation has a responsibility under the Standards, however, there are some specific roles which are particularly important.

NHS 24 Board / Clinical Governance Committee

The Board/ Clinical Governance Committee plays a critical role in ensuring the standards are adhered to.

Leadership – Setting the tone to encourage speaking up and ensuring concerns are addressed appropriately

Monitoring – through ensuring quarterly reporting is presented and robust challenge and interrogation of this

Overseeing access – ensuring HSCP, third party and independent contractors who provide services can raise concerns, as well as students and volunteers.

Support – providing support to the Whistleblowing champion and to those who raise concerns.

Board Non-Executive Whistleblowing Champion

This role is taken on by **Liz Mallinson**, who has been in place since February 2020.

The role monitors and supports the effective delivery of the organisation's whistleblowing policy and is predominantly an assurance role which helps NHS boards comply with their responsibilities in relation to whistleblowing. The whistleblowing champion is also expected to raise any issues of concern with the board as appropriate, either in relation to the implementation of the Standards, patterns in reporting of concerns or in relation to specific cases. The Whistleblowing Champion meets regularly with Executive and Operational Leads to discuss strategic and operational aspects of adherence to the standards and opportunities for improvement.

INWO Liaison Officer

This role is taken on by **Maria Docherty**, in her executive lead role for Whistleblowing.

This is the main point of contact between the INWO and the organisation, particularly in relation to any concerns that are raised with the INWO. They have overall responsibility for providing the INWO with whistleblowing concern information in an orderly, structured way within requested timescales. They may also provide comments on factual accuracy on behalf of the organisation in response to INWO investigation reports. They are also expected to confirm and provide evidence that INWO recommendations have been implemented.

HR Lead

This role is taken on by **Marnie Westwood, Head of Resourcing and Planning** and is responsible for the local policy development/review, as well as the support for individuals who have raised a concern. They are also responsible for ensuring that anything raised within HR procedures which could amount to a whistleblowing concern is appropriately signposted to this procedure for full consideration, ensuring that all staff are made aware of the Standards and how to access them, including the channels available to them for raising concerns. They must also ensure that managers have the training they need to identify concerns that might be appropriate for the Standards and to manage them appropriately.

However, it is important to note that Whistleblowing is not a process overseen by the HR team and as set out above, it is separate to our main people processes, reflecting the different scope and nature of Whistleblowing concerns.

Confidential Contacts

This “confidential contact” role, which is set out in the Standards, is carried out by staff volunteers across NHS 24. All organisations that deliver services for NHS Scotland must ensure that they provide staff with at least one point of contact who is independent of normal management structures and who has the capacity and capability to be an initial point of contact for staff who want to raise concerns. They support staff by providing a safe space to discuss the concern and assist the staff member in raising their concern with an appropriate manager.

Chief Executive / Executive Directors / Senior Management

Overall responsibility and accountability for the management of whistleblowing concerns lies with the organisation’s chief executive, executive directors, and appropriate senior management.

Managers

Any manager in the organisation may receive a whistleblowing concern. Therefore, all managers must be aware of the whistleblowing procedure and how to handle and record concerns that are raised with them, with their colleagues and with any third party or independent contractors who deliver services on our behalf. All managers are asked to undertake the training module available on Turas Learn.

Union representatives

Union representatives play a key role in supporting members to raise concerns and providing insight into the effectiveness of our systems and processes.

All colleagues

Anyone who delivers an NHS service should feel able and empowered to raise concerns about harm or wrongdoing. They should be trained so they are aware of the channels available to them for raising concerns, and what access to the Standards means.

Managers and Supervisors of Students and Trainees

Those who supervise students and trainees who are working in our organisation, but aren’t usually employed by us, have a specific responsibility to ensure that they are aware of the Standards and how they can raise a concern.

Volunteer Coordinator

The Standards also apply to Volunteers, who are working in our services. It is important that they are made aware of the Standards and how to raise a concern and access support.

6. Implementation

NHS 24 established a short-life implementation group was established in July 2020 to ensure that the National Whistleblowing Standards could be implemented in a planned and structured way within NHS 24 and in consultation with the different departments and colleague groups.

Our Whistleblowing Champion/ Non-Executive Director, Liz Mallinson has supported the implementation through gaining the awareness and support of colleague Board members including a Board workshop session on the Whistleblowing Standards/NHS24 delivery plan in May 2021. The Independent National Whistleblowing Officer attended this meeting to provide an overview of the INWO role. The Whistleblowing Champion engages nationally with the National Whistleblowing Champions Network, which provides the opportunity to learn and share from the experiences of other NHS Boards.

Managers and colleagues have been encouraged to access the National Whistleblowing Standards training which is available via Turas Learn. It is essential that managers complete this training, as any manager could potentially receive a whistleblowing concern and be required to take the appropriate action to ensure it is recorded and progressed in accordance with the Standards.

Colleagues were also encouraged to visit the INWO website which has a huge amount of information and resources about the Whistleblowing Standards.

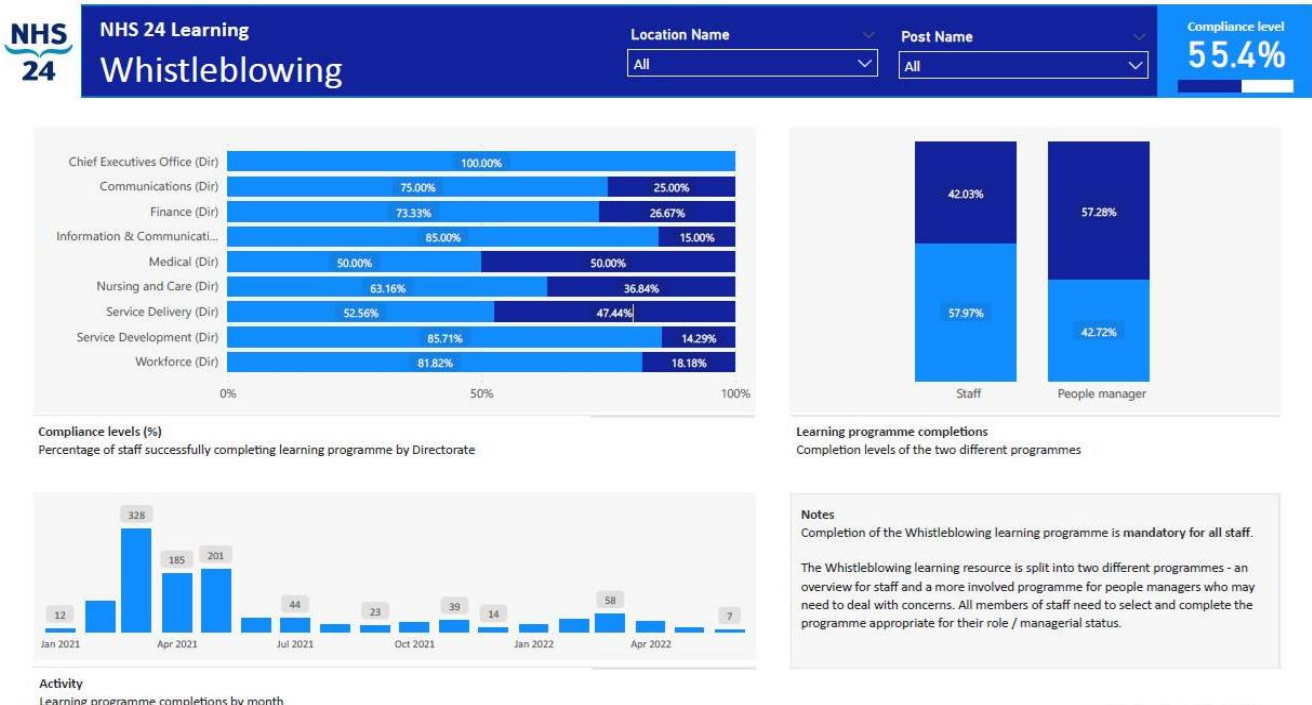
7. Raising a Whistleblowing Concern in NHS 24

Managers and employees can raise a concern:

- through an existing procedure in NHS 24,
- by contacting their manager, a colleague, or a trade union representative
- by contacting a confidential contact or via the dedicated email address - whistleblowing@nhs24.scot.nhs.uk

8. Completion of the Whistleblowing Modules

Overall compliance for the mandatory Whistleblowing TURAS modules is 55.4% (calculated on a rolling in year basis). NHS 24 was in incident management mode for much of the reporting period, with training paused where necessary (as per corporate escalation plan). Going forward completion of these essential modules will form part of induction sign off for new staff. The compliance rate will also be reported using a cumulative in year total. Please see Figure 1 Below.



9. Whistleblowing Activity during the reporting period 2021-22

There have been no whistleblowing concerns raised during the reporting period

10. Comparison to pre-April 2021 Whistleblowing Cases

There were 2 whistleblowing concerns raised during the last reporting period.

11. Impact on other processes to raise concerns

No issues to report.

12. Colleague experience of the Whistleblowing procedures

A voluntary survey has been developed which will be used to evaluate the experience of individuals who raise concerns to identify areas for improvement.

13. Development Priorities for 2022-23

- Complete a refresh of the Whistleblowing Policy.
- Develop and deliver a Communications Plan for 2022-23 to raise awareness of whistleblowing (this includes a refresh of the intranet whistleblowing site/ completion of TURAS modules).
- Recruit and retain additional confidential contacts (including planned programme of development)
- Support the activities of the Whistleblowing Champion to raise staff awareness