Freedom to speak up: raising concerns (whistleblowing) policy

When using this document please be sure that the version you are using is the most up to date either by checking on the Trust intranet or if the review date has passed, please contact the author.

Out of date policy documents must not be relied upon

<table>
<thead>
<tr>
<th>Approval Committee</th>
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Speak up – we will listen

Speaking up about any concern you have at work is really important. In fact, it’s vital because it will help us to keep improving our services for all patients and the working environment for our staff.

You may feel worried about raising a concern, and we understand this. But please don’t be put off. In accordance with our duty of candour, our senior leaders and entire board are committed to an open and honest culture. We will look into what you say and you will always have access to the support you need.

This policy

This ‘standard integrated policy’ was one of a number of recommendations of the review by Sir Robert Francis into whistleblowing in the NHS, aimed at improving the experience of whistleblowing in the NHS. It is expected that this policy (produced by NHS Improvement and NHS England) will be adopted by all NHS organisations in England as a minimum standard to help to normalise the raising of concerns for the benefit of all patients.

Our local process has been integrated into this policy and provides more detail about how we will look into a concern at The Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust (RBCH).
What concerns can I raise?

You can raise a concern about risk, malpractice or wrongdoing you think is harming the service we deliver. Just a few examples of this might include (but are by no means restricted to):

- unsafe patient care
- unsafe working conditions
- inadequate induction or training for staff
- lack of, or poor, response to a reported patient safety incident
- suspicions of fraud (which can be reported to our local counter fraud team on):

  Kim Hampson - Counter Fraud Specialist
  Tel: 07881 840869 or Email: kim.hampson@tiaa.co.uk

  Or
  Tony Hall - Fraud Manager
  Tel: 07580 971240 or Email: tony.hall@tiaa.co.uk

  Or
  Central NHS fraud and corruption hotline
  Tel: 0800 028 4060 or Website: www.reportnhsfraud.nhs.uk

- a bullying culture (across a team or organisation rather than individual instances of bullying).

For further examples, please refer to the video produced by Health Education England by clicking on the link below:

Health Education England video

Remember that if you are a healthcare professional you may have a professional duty to report a concern. If in doubt, please raise it.

Don’t wait for proof. We would like you to raise the matter while it is still a concern. It doesn’t matter if you turn out to be mistaken as long as you are genuinely troubled.

This policy is not for people with concerns about their employment that affect only them – that type of concern is better suited to our grievance policy (link below).

http://rbhintranet/policies/human_resources/policy_a02_grievance_disciplinary.pdf
Feel safe to raise your concern

If you raise a genuine concern under this policy, you will not be at risk of losing your job or suffering any form of reprisal as a result. We will not tolerate the harassment or victimisation of anyone raising a concern. Nor will we tolerate any attempt to bully you into not raising any such concern. Any such behaviour is a breach of our values as an organisation and, if upheld following investigation, could result in disciplinary action.

Provided you are acting honestly, it does not matter if you are mistaken or if there is an innocent explanation for your concerns.

Confidentiality

We hope you will feel comfortable raising your concern openly, but we also appreciate that you may want to raise it confidentially. This means that while you are willing for your identity to be known to the person you report your concern to, you do not want anyone else to know your identity. Therefore, we will keep your identity confidential, if that is what you want, unless required to disclose it by law (for example, by the police). You can choose to raise your concern anonymously, without giving anyone your name, but that may make it more difficult for us to investigate thoroughly and give you feedback on the outcome.

Who can raise concerns?

Anyone who works (or has worked) in the NHS, or for an independent organisation that provides NHS services can raise concerns. This includes agency workers, temporary workers, students, volunteers and governors.

Who should I raise my concern with?

In many circumstances the easiest way to get your concern resolved will be to raise it formally or informally with your line manager (or lead clinician or tutor). But where you don’t think it is appropriate to do this, you can use any of the options set out below in the first instance.

If raising it with your line manager (or lead clinician or tutor) does not resolve matters¹ or you do not feel able to raise it with them, you can contact one of the following people:

Our Freedom to Speak Up Guardians: Helen Martin and Karole Smith who can be

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¹ Annex A sets out how our local process escalates a concern.
contacted on:

- 01202 704220 or
- freedomtospeakup@rbch.nhs.uk.
- LERN – share an issue reporting system via Datix web. The web form can be accessed via the front page of the intranet and can be accessed by any member of staff. A login is not required to report an incident.

This is an important role identified in the Freedom to Speak Up review to act as an independent and impartial source of advice to staff at any stage of raising a concern, with access to anyone in the organisation, including the chief executive, or if necessary, outside the organisation.

If you still remain concerned after this, you can contact:

- our executive director with responsibility for whistleblowing:
  Tony Spotswood on 01202 704242 or Tony.Spotswood@rbch.nhs.uk
- our non-executive director with responsibility for whistleblowing:
  Alex Jablonowski on 01202 704427 or Alex.Jablonowski@rbch.nhs.uk

If for any reason you do not feel comfortable raising your concern internally, you can raise concerns with external bodies, listed on page 10.

**Advice and support**

Support and advice is available in a number of places including human resources, occupational health and chaplaincy. However, you can also contact the Whistleblowing Helpline for the NHS and social care, your professional body or trade union representative.

**How should I raise my concern?**

You can raise your concerns with any of the people listed above in person, by phone or in writing (including email). You can also use the Share to care, LERN form described below.

Whichever route you choose, please be ready to explain as fully as you can the information and circumstances that gave rise to your concern.
Share to care, LERN forms

New Learning Event Report Notification (LERN) forms have replaced the Adverse Incident Reporting (AIRs) forms. The new forms have a renewed focus on learning from the things that go well, as well as when things don't go according to plan.

The new forms are for:

- when an incident has occurred and someone has, or could have come to harm
- when something has been done really well
- when you need to raise an issue
- when you have an improvement idea

If you have an issue or concern that you would like to raise please complete the Share an issue form. The web form can be accessed via the front page of the intranet and can be accessed by any member of staff.

A login is not required to report an incident. If you would prefer to raise your issue with the Freedom to Speak Up Guardians then please tick the relevant box on the web form and the concern will forwarded to them.

What will we do?

We are committed to the principles of the Freedom to Speak Up review and its vision for raising concerns, and will respond in line with them (see Annex B).

We are committed to listening to our staff, learning lessons and improving patient care. On receipt the concern will be recorded and you will receive an acknowledgement within two working days. The central record will record the date the concern was received, whether you have requested confidentiality, a summary of the concerns and dates when we have given you updates or feedback.

Investigation

Where you have been unable to resolve the matter quickly (usually within a few days) with your line manager, we will carry out a proportionate investigation – using someone suitably independent (usually from a different part of the organisation) and properly trained – and we will reach a conclusion within a reasonable timescale (which we will notify you of). Wherever possible we will carry out a single investigation (so, for example, where a concern is raised about a patient safety incident, we will usually undertake a single investigation that looks at your concern and the wider circumstances...
of the Incident\(^2\). The investigation will be objective and evidence-based, and will produce a report that focuses on identifying and rectifying any issues, and learning lessons to prevent problems recurring.

We may decide that your concern would be better looked at under another process; for example, our process for dealing with bullying and harassment. If so, we will discuss that with you.

Any employment issues (that affect only you and not others) identified during the investigation will be considered separately.

**Communicating with you**

We will treat you with respect at all times and will thank you for raising your concerns. We will discuss your concerns with you to ensure we understand exactly what you are worried about. We will tell you how long we expect the investigation to take and keep you up to date with its progress. Wherever possible, we will share the full investigation report with you (while respecting the confidentiality of others).

**How will we learn from your concern?**

The focus of the investigation will be on improving the service we provide for patients. Where it identifies improvements that can be made, we will track them to ensure necessary changes are made, and are working effectively. Lessons will be shared with teams across the organisation, or more widely, as appropriate.

**Board oversight**

The board will be given high level information about all concerns raised by our staff through this policy and what we are doing to address any problems. We will include similar high level information in our annual report. The board supports staff raising concerns and wants you to feel free to speak up.

**Review**

We will review the effectiveness of this policy and local process at least annually, with the outcome published and changes made as appropriate.

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\(^2\) If your concern suggests a Serious Incident has occurred, an investigation will be carried out in accordance with the **Serious Incident Framework**.
Raising your concern with an outside body

Alternatively, you can raise your concern outside the organisation with:

- **NHS Improvement** for concerns about:
  - how NHS trusts and foundation trusts are being run
  - other providers with an NHS provider licence
  - NHS procurement, choice and competition
  - the national tariff
- **Care Quality Commission** for quality and safety concerns
- **NHS England** for concerns about:
  - primary medical services (general practice)
  - primary dental services
  - primary ophthalmic services
  - local pharmaceutical services
- **Health Education England** for education and training in the NHS
- **NHS Protect** for concerns about fraud and corruption.

Making a ‘protected disclosure’

There are very specific criteria that need to be met for an individual to be covered by whistleblowing law when they raise a concern (to be able to claim the protection that accompanies it). There is also a defined list of ‘prescribed persons’, similar to the list of outside bodies above, to which you can make a protected disclosure. To help you consider whether you might meet these criteria, please seek independent advice from the Whistleblowing Helpline for the NHS and social care, Public Concern at Work or a legal representative.

National Guardian Freedom to Speak Up

The new National Guardian can independently review how staff have been treated having raised concerns where NHS trusts and foundation trusts may have failed to follow good practice, working with some of the bodies listed above to take action where needed.
Annex A: Process for raising and escalating a concern at RBCH

Step one
If you have a concern about a risk, malpractice or wrongdoing at work, we hope you will feel able to raise it first with your line manager, lead clinician or tutor (for students). This may be done orally or in writing.

Step two
If you feel unable to raise the matter with your line manager, lead clinician or tutor, for whatever reason, please raise the matter with our local Freedom to Speak Up Guardian(s):

- Helen Martin and Karole Smith
- 01202 704220
- freedomtospeakup@rbch.nhs.uk
- Via LERN form

These people have been given special responsibility and training in dealing with whistleblowing concerns. They will:

- treat your concern confidentially unless otherwise agreed
- ensure you receive timely support to progress your concern
- escalate to the board any indications that you are being subjected to detriment for raising your concern
- remind the organisation of the need to give you timely feedback on how your concern is being dealt with
- ensure you have access to personal support since raising your concern may be stressful.

If you want to raise the matter in confidence, please say so at the outset so that appropriate arrangements can be made.

Step three
If these channels have been followed and you still have concerns, or if you feel that the matter is so serious that you cannot discuss it with any of the above, please contact:

- our executive director with responsibility for whistleblowing:
  Tony Spotswood on 01202 704242 or Tony.Spotswood@rbch.nhs.uk
- our non-executive director with responsibility for whistleblowing:
Step four

You can raise concerns formally with external bodies. Refer to page 10.
Diagram to highlight the process for raising and escalating concerns at RBCH

1. Have a concern to raise?
2. Are you able to speak to your line manager?
   - Yes: Issue Resolved
   - No: Issue not resolved
   - Raise your concern with another manager, via a LERN, or one of the Freedom to Speak Up Guardians
3. Issue investigated, appropriate action taken and feedback given
   - Issue Resolved
   - All above steps taken however issue not resolved
4. Raise a concern with Chief Executive with support from a senior manager or Freedom to Speak up Guardian
   - Issue not resolved
   - Issue Resolved
5. Raise externally to prescribed person, regulatory/other external body as defined in the Public Interest Disclosure Act
   - Speak once again to senior manager/Freedom to speak up Guardian before raising externally
Annex B: A vision for raising concerns in the NHS

Source: Sir Robert Francis QC (2015) *Freedom to Speak Up: an independent report into creating an open and honest reporting culture in the NHS.*
Consultation Process for this document

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<th>Author</th>
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                                      | Audit Committee (Sept 17)  
                                      | Vicky Douglas, Human Resources  
                                      | Joanne Sims, Risk and Governance |

This Policy has been produced by NHS Improvement with local adaptation.  
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W: improvement.nhs.uk

NHS Improvement is the operational name for the organisation that brings together Monitor, NHS Trust Development Authority, Patient Safety, the National Reporting and Learning System, the Advancing Change Team and the Intensive Support Teams.

This publication can be made available in a number of other formats on request.

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### EQUALITY IMPACT ASSESSMENT – SCREENING FORM

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<th>1. Title of document/service for assessment</th>
<th>Freedom to speak up: raising concerns (whistleblowing) policy</th>
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<tr>
<td>2. Date of assessment</td>
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<tr>
<td>4. Directorate/Service</td>
<td>Corporate</td>
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<tr>
<td>5. Approval Committee</td>
<td>Audit</td>
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| 6. Does the document/service affect one group less or more favourably than another on the basis of: N.B. The ‘Rationale’ box must be completed whether the answer is Yes or No. |
|-----------------------------------------------|-----------------------------------------------------------|
| • Race                                        | No                                                        |
| • Gender (including transgender)              | No                                                        |
| • Religion or belief                          | No                                                        |
| • Sexual orientation, to include heterosexual, lesbian, gay and bisexual people | No |
| • Age                                         | No                                                        |
| • Disability – learning disabilities, physical disabilities, sensory impairment and mental health issues | No |
| • Marriage and Civil Partnership              | No                                                        |
| • Pregnancy and Maternity                     | No                                                        |

| 7. Does this document affect an individual’s human rights? | No |

| 8. If you have identified potential discrimination, are the exceptions valid, legal and/or justified? | N/A |

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<th>9. If the answers to any of the above questions is ‘yes’ then:</th>
<th>Tick</th>
<th>Rationale</th>
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<td>Demonstrate that such a disadvantage or advantage can be justified or is valid</td>
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<tr>
<td>Adjust the policy to remove disadvantage identified or better promote equality</td>
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<tr>
<td>If neither of the above possible, submit to Diversity Committee for review.</td>
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### 10. Screener(s)

Print name: Helen Martin & Karole Smith

### 11. Date Policy approved by Committee

### 12. Upon completion of the screening and approval by Committee, this document should be uploaded to papertrail.