

## NHS GRAMPIAN

### Implementation of National Whistleblowing Standards

#### 1. Actions Recommended

The Board is asked to note that:

- i. New National Whistleblowing Standards (referred to as 'the Standards') come into effect for all Scottish Boards on 1 April 2021; and
- ii. The Standards replace Board's local whistleblowing arrangements, which applied only to NHS employed staff, meaning now anyone who is providing care or services on behalf of the Board, has the protection of raising whistleblowing concerns using the Standards.

The implementation of the new standards will require that the Board

- works with Integration Joint Boards (IJBs) to ensure that all staff in the Health and Social Care Partnerships (H&SCPs) can raise concerns through this procedure; and
- has mechanisms in place to ensure compliance with the Standards, including the requirement to report concern handling information to the Board on a quarterly basis, publish an annual report which is also submitted to the Scottish Government.

#### 2. Strategic Context

National Whistleblowing Standards come into effect from 1 April 2021, and apply to any organisation providing an NHS service in Scotland. The Standards replace any existing whistleblowing arrangements.

Previously all Boards had internal Whistleblowing Champions (a role held by an existing non-executive Board member), and a whistleblowing policy available for staff with an employment contract with the Board. All Boards now have a dedicated non-executive Board Member with responsibility for whistleblowing in place, and the new Standards mean that anyone providing services on behalf of the NHS Board can raise a whistleblowing concern, this includes:

- All employees (current and former)
- Students, Trainees and Apprentices
- Agency Staff and Volunteers
- Non-Executive Board Members
- Primary Care and other Contracted Service Providers and
- Anyone working alongside NHS staff such as in Health and Social Care Partnerships

The Standards require 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 implement them in full.

### **3. Key matters relevant to recommendation**

A steering group and a short life working group were established in July 2020. Membership of the steering group includes the: Director of Strategy and Deputy Chief Executive, Whistleblowing Champion (non-executive Board Member), Head of HR, HR Manager and Head of Engagement. The short life working group, Chaired by the Head of Engagement, includes representation from across Grampian, to ensure cross system, consistent approach and to identify areas that required additional support to be ready for implementation.

These groups identified five key areas of focus which included:

#### **(i) Culture**

NHS Grampian has a clear ambition to create a positive culture that welcomes staff, and others that deliver their services, to raise concerns and an organisational approach that positively responds to such concerns. Under the new standards, all whistleblowing concerns will be handled openly and transparently, with a focus on system wide learning and improving.

Board members have a critical role in setting a tone and culture in NHS Grampian that values the contribution of all staff, including those who identify the need for changes through speaking up. Leadership behaviours also set the tone for the way other staff behave. Board members need to ensure that the arrangements in place act to promote trust between staff and the Board in raising concerns and all health and care services must strive for a culture that ensures staff feel able to raise concerns, whoever they are.

#### **(ii) Training and Support**

Staff are being made aware of the channels available to raise concerns, and encouraged to feel able and empowered to raise concerns about harm or wrongdoing.

As investigations need to be carried out impartially, independently, objectively, confidentially and sensitively, this means that staff should have undertaken formal training prior to being involved in the investigation of any concerns raised.

Confidential Contacts are appropriately skilled to support staff to raise concerns and work with the whistleblowing champion to ensure staff are aware of the arrangements and support available. They are also responsible for promoting a culture of trust which values raising concerns as a route to learning and improving.

Confidential Contacts will assist managers to use concerns to influence change and work with leads, to oversee application of the Standards to ensure they are being applied and functioning at all levels of the organisation. NHS Grampian has two confidential contacts at present. The number of confidential contacts will be expanded over the coming months and will draw on colleagues from across the health and social care system.

### **(iii) Processes and Procedures**

Clear governance and accountability arrangements will support staff to follow, monitor and review the whistleblowing procedure. Systems and procedures will ensure all concerns are investigated timeously and appropriately, there is monitoring as to how they were handled and learning and improvement implemented where required.

HR teams will assist managers and confidential contacts to identify any relevant human resource issues. HR functions will not be involved in investigating whistleblowing concerns unless the concern directly relates to staff conduct.

Appropriately skilled senior members of staff, from another directorate, with no conflict, or perceived conflict of interest will carry out investigations into whistleblowing concerns and draft any recommendations - outcomes of investigations will be action focused.

The support for the whistleblowing champion will be hosted within the Clinical Directorate.

### **(iv) Recording and Reporting**

Reports will be compiled and presented to the Board each quarter for all whistleblowing concerns raised, including those raised within the Health and Social Care Partnerships, from primary care providers and contracted services, students, volunteers and agency staff. This will allow identification of areas for specific attention, based on the themes and trends.

Senior management review will also take place quarterly to look for trends and service failings, and include consideration as to whether any policies or procedures need to be reviewed.

The Board will also publish an annual report which sets out performance in handling whistleblowing concerns and build on the quarterly reports.

### **(v) Key responsibilities under the Standards**

Boards must work with organisations that regulate their services or staff, ensuring investigations are as effective and efficient as possible, to inform regulators if investigations identify issues in fitness to practice and ensure whistleblowing concerns are kept separate from disciplinary issues. Boards must also ensure that the Standards form part of all primary care and contracted services contracts and service level agreements and clarify the relevant compliance and reporting requirements.

It is recommended that H&SCPs adopt the same approach to handling concerns raised about local authority services as they do in relation to NHS services.

## **5. Risk Mitigation**

An Engagement and Implementation Framework was developed by the steering and working groups in which risks were identified and mitigations actions agreed.

A key risk identified is that whistleblowing concerns may not be raised if people feel at greater risk of being identified, such as; staff in small teams, 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.

This risk is being mitigated by communication and posters with confidential contacts details being sent to all locations providing services on behalf of NHS Grampian, and by including an easy and confidential way for whistleblowing concerns to be raised.

## **6. Responsible Executive Director and contact for further information**

If you require any further information in advance of the Board meeting please contact:

Responsible Executive Director

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