NHS Greater Glasgow & Clyde	**Paper No. 20/33**
Meeting:	**Interim Board**
Date of Meeting:	**16th June 2020**
Purpose of Paper:	**For Noting**
Classification:	**Board Official**
Sponsoring Director:	**Prof John Brown CBE** **Chair of NHSGGC**

Paper Title

Speak Up and Whistleblowing Review

Recommendation

The Board is asked to note the actions being taken to review the current Speak Up and Whistleblowing practice within NHSGGC.

Purpose of Paper

To update the Board as to the current state of the Speak Up and Whistleblowing process within NHSGGC and to keep them up to date with the implementation of the New Whistleblowing Standards.

Key Issues to be Considered

- The delay of the implementation of the new Whistleblowing Standards;
- How the board can gain assurance that whistleblowing (and the wider ability of staff to speak up) is being maintained.

Any Patient Safety / Patient Experience Issues

The ability of all staff to speak up when they believe things are going wrong is essential to patient safety with approximately half of all issues that are escalated to whistleblowing relating directly to patient safety. The recommendations that come from these cases are often key to the ability for the organisation to continuously improve patient safety.

Any Financial Implications from this Paper

There are no additional costs to completing this work.

Any Staffing Implications from this Paper

There will be a small amount of additional work to gather information as part of this review.

Any Equality Implications from this Paper

While there are no known equality implications the review will approach with an awareness that previous large-scale reviews in other NHS organisations have shown that discrimination has occurred within the whistleblowing process.

Any Health Inequalities Implications from this Paper

There are no known implications in this area.

Has a Risk Assessment been carried out for this issue? If yes, please detail the outcome.

No.

Highlight the Corporate Plan priorities to which your paper relates

The effective management of whistleblowing is a key part of maintaining patient safety.

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Speak Up and Whistleblowing Review 26/05/20

1. Introduction

The new whistleblowing standards were due to come into force in July 2020. This was to put in place a legal framework and clear set of rules regarding the management and reporting of whistleblowing, including Step 3 whistleblowing being investigated by the Scottish Public Sector Ombudsman (SPSO). The implementation of these have been delayed indefinitely, although expected to come into force in the future.

Until this happens whistleblowing continues to be managed by the organisation's own processes.

2. Objectives of Review

To identify any actions required to ensure the ongoing effectiveness of the existing NHSGGC Whistleblowing system. The review will also consider the impact of the new standards on any issues identified.

3. Key areas of review

a) Staff awareness
b) Investigation and reporting
c) Trends and themes the data shows
d) Implementation of the recommendations
e) Sharing learnings
f) Feedback to whistleblowers and managers
g) Validation of Findings
h) Experience and treatment of all involved

4. Staff Awareness

No member of staff expects to become a whistleblower and over the course of a career very few will. The confidentiality of the process also means that there is minimal ability for peer learning of the process. The review will therefore look at how the staff are kept informed of the process and where possible assess the effectiveness of this communication.

5. Investigation and reporting

The review will assess how effectively whistleblowing issues are investigated and processed. This will primarily be a review of the technical process taken and will include looking into how confidentiality is maintained for whistleblowers.

6. Trends and themes the data shows

A review of the available data around the numbers of whistleblowing cases will be conducted. This will include benchmarking against other organisations where data is available.

7. Implementation of the recommendations

The implementation of findings is an essential part of the whistleblowing process, with over 80% of whistleblowing issues within NHSGGC resulting in recommendations. The review will

investigate how recommendations have been acted upon over the past 3 years. It will also look into how this has been reported back to the Staff Governance Committee and the board.

8. Sharing Learnings

Even if recommendations have been implemented those recommendations may be applicable to other areas. The review will look to see how this has been achieved.

9. Feedback to Whistleblowers and managers

Being involved in a whistleblowing issue can be extremely stressful for both the individual whistleblower and the manager concerned. How this is fed back to individuals involved can minimise this stress. The review will look into how this happens.

10. Validation of Findings

The review will look into what is being done to ensure that the investigations are coming to the correct decisions.

11. Experience and treatment of all involved

The whistleblowing safety valve is essential for any organisation trying to learn from its mistakes. It has been shown however that whistleblowing can cause significant stresses and impact on both whistleblowers and mangers. This has resulted in the current employment legislation protecting whistleblowers. It is also a key part of the new standards when they come in. The review will seek feedback from whistleblowers, managers involved in whistleblowing and investigators of their experience of whistleblowing within NHSGGC. Due to the confidential nature of whistleblowing, those asked for feedback will have the option not to respond or provide anonymous written feedback. The reviewer will not be aware of who the individuals are in these cases.

12. Team involved

The review will be conducted by the new Whistleblowing Champion, Charles Vincent, supported by Elaine Vanhegan and her team.

13. Timescale

The review process will examine each of the key areas for review (see Para 3) and the reporting of these examinations is expected to give the Board the assurance it requires. This programme of examinations will be conducted over the next six to nine months with regular updates being brought to the Board via the Staff Governance Committee's meetings scheduled for 2020/21. A high-level plan describing the timescales of the individual examinations and when they will be reported to the Staff Governance Committee and the Board will be submitted to the Staff Governance Committee in due course.