The Queen Elizabeth Hospital NHS
King's Lynn
NHS Foundation Trust

# RAISING CONCERNS AT WORK

# THE 'WHISTLEBLOWING' POLICY and PROCEDURE

| Unique Reference / Version | | | | |
|---|---|---|---|---|
| **Primary Intranet Location** | **Policy Name** | **Version Number** | **Next Review Month** | **Next Review Year** |
| Human Resources | 'Whistleblowing' Policy and Procedure | V.4.0 | December | 2018 |

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| **Current Author** | Gill Rejzl |
| **Author's Job Title** | Trust Secretary |
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| **Ratifying Committee** | Workforce Committee |
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| **Review Date** | December 2018 |
| **Owner** | Georgina Goodman |
| **Owner's Job Title** | Head of Workforce |

It is the responsibility of the staff member accessing this document to ensure that they are always reading the most up to date version - this will always be the version on the intranet.

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| **Related Policies** | Grievance Policy<br>Mutual Respect Policy<br>Safeguarding Children Policy and Procedures<br>Incident Reporting and Management Policy and Procedures<br>Anti-Fraud and Bribery Policy |

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| **Stakeholders** | HR & OD Group<br>Recognised Trade Unions<br>Joint Staff Consultative Committee<br>All members of staff (including interim and agency / locum)<br>Volunteers<br>Students on placement at the Trust |

| Version | Date | Author(s) | Author's Job Title(s) | Changes |
|---|---|---|---|---|
| V1.0 | February 2011 | Ian Vince | Deputy Director of Human Resources | Initial development |
| V2.0 | September 2013 | Adam Kirton | Associate HR Business Partner | Update of existing policy into new format in line with changes in practice, national guidance and legislation |
| V3.0 | March 2015 | Gerry Dryden | Director of HR & OD | Policy updated to reflect changes in executive responsibilities |
| V4.0 | August 2015 | Gill Rejzl | Trust Secretary | Update to communicate new Whistleblowing Helpline arrangements and additional provision for whistleblowing to an independent organisation. |
| V5.0 | September 2016 | Gill Rejzl | Trust Secretary | Alignment with NHS Improvement's 'Freedom to speak up: raising concerns (whistleblowing) policy for the NHS, April 2016' |

| **Short Description** |
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| To advise on the Trust's provisions for the raising of serious concerns relating to risks, professional misconduct or financial malpractice that might affect patients, colleagues, or the Trust itself. |

| **Key Words** |
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| concern, whistleblowing, helpline, corruption, fraud, bribery |

# 'WHISTLEBLOWING' POLICY and PROCEDURE

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# 'WHISTLEBLOWING' POLICY and PROCEDURE

## 1 INTRODUCTION

Whistleblowing is the common term applied to a situation where an employee raises concerns about safety, malpractice or wrongdoing at work. In the context of the NHS, the term refers to NHS staff raising concerns about issues which may affect patients, the public, other staff or the organisation. The NHS Constitution was updated in March 2012 to include an expectation that NHS staff will raise concerns as early as possible and a pledge that NHS employers will support all staff in raising concerns, responding to and where necessary, investigating the concerns raised.

The Queen Elizabeth Hospital, King's Lynn NHSFT ('the Trust') is committed to achieving the highest possible standards of service. In order to achieve this standard we encourage staff to use this Whistleblowing Policy to report concerns about malpractice or illegal acts or omissions by people working at the Trust at an early stage.

This policy has been written to take into account the Public Interest Disclosure Act 1998, which protects staff from suffering ill-treatment or losing their job because they have made a disclosure.

The Trust is committed to encouraging a culture of openness and dialogue endorsed by positive working relationships. The Trust is keen to promote an environment, which enables everyone working for the Trust to feel able to raise concerns in a responsible way without fear of victimisation or censorship.

The Trust's Whistleblowing Policy has been aligned to NHS Improvement's 'Freedom to speak up: raising concerns (whistleblowing) policy for the NHS, April 2016'. This can be located on the Trust's Intranet, Policies and Guidance, Human Resources section.

## 2 DEFINITION

### What is 'whistleblowing'?

'Whistleblowing' can be defined as raising a concern about a risk, malpractice or wrongdoing~~wrongdoing~~ within an organisation. ~~The concern must be a genuine concern about a crime, criminal offence, miscarriage of justice, danger to health and safety or the environment – and the cover up of any of these. (NHS Whistleblowing Helpline)~~ Examples might include (but are not 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 also be reported to our local counter-fraud team [insert contact details])
- a bullying culture (across a team or organisation rather than individual instances of bullying).

## 3 CONTEXT

A whistleblowing concern ~~is about a risk, malpractice or wrongdoing that affects others. It~~

could be something which adversely affects patients, the public, other staff or the organisation itself. This is distinct from a grievance which is, by contrast, a dispute about an employee's own employment position and has no additional public interest dimension. A whistleblowing concern is where an individual raises information as a witness, whereas a grievance is where the individual is a complainant.

Staff wishing to make a complaint about their employment or how they have been treated, should use the Trust's:

- Grievance Policy; or
- Mutual Respect Policy

Complaints from service users, relatives or representatives would not be classed as whistleblowing. These would need to be raised using the service's complaints procedure.

This Whistleblowing Policy has been developed in line with:

- **Public Interest Disclosure Act 1998** – gives legal protection to employees against being dismissed or penalised by their employers for publicly disclosing serious concerns falling in certain specified categories. It also gives protection to employees against suffering a detriment, bullying or harassment from another employee for publicly disclosing serious concerns falling within certain specified categories.

- **The Committee on Standards in Public Life guidance** – which recommends that a whistleblowing policy should make the following points clear:

  - The organisation takes malpractice seriously, giving examples of the type of concerns to be raised, so distinguishing a whistleblowing concern from a grievance,
  - Staff have the option to raise concerns outside of line management,
  - Staff are enabled to access confidential advice from an independent
  - body,
  - The organisation will, when requested, respect the confidentiality of a member of staff raising a concern,
  - When and how concerns may properly be raised outside the organisation (e.g. with a regulator), and
  - It is a disciplinary matter both to victimise a bona fide whistleblower and for someone to maliciously make a false allegation.

- **Speak up for a Healthy NHS** – the 2010 publication from Public Concern at Work

- **Speak Out Safely** - the Nursing Times' campaign. The Trust's Board has made a commitment to the principles articulated through this campaign and encourages any staff member who has a genuine patient safety concern to raise it within the organisation at the earliest opportunity. The Trust's 'Speak out Safely' pledge is set out on the Intranet

- **'Working Together to Safeguard Children**: A guide of inter-agency working to safeguard and promote the welfare of children'

- **The NHS Constitution** – which sets out both rights and responsibilities for patients and staff:

  "You should aim to raise any genuine concern you have about a risk, malpractice or

wrongdoing at work (such as a risk to patient safety, fraud or breaches of patient confidentiality), which may affect patients, the public, other staff or the organisation itself at the earliest reasonable opportunity."

- NHS Improvement's 'Freedom to speak up: raising concerns (whistleblowing) policy for the NHS, April 2016'

- **The Trust's Values** –

The Public Interest Disclosure Act (PIDA)1998 (as amended by the Enterprise and Regulatory Reform Act 2013) provides a clear signal that it is safe and acceptable for all staff to raise any specific concerns they may have that they reasonably believe are in the public interest (often known as 'whistleblowing'). By providing strong protection for those who raise concerns, the legislation helps ensure that employers address the message and not the messenger. It is a safety net for the Trust, those who work for it and users of its services. The fundamental principle behind the legislation is to improve governance and accountability within organisations.

The Trust aims to promote the positive aspects of whistleblowing and in doing so, move away from any negative perception of the word.

Further information on the PIDA can be found at:

www.pcaw.co.uk/law/uklegislation.htm

## 4 PURPOSE and SCOPE

The purpose of the 'Whistleblowing Policy and Procedure' is to set out for all those who work for the Trust, guidance on how to raise concerns within the Trust, and how to seek advice externally if ultimately they feel compelled to do so.

This policy applies to all Trust staff members, contractors, suppliers, other third parties and external bodies, trainees and agency staff regardless of whether the subject(s) of the allegation are internal or external to the organisation. Although volunteers are not covered by PIDA, the protection extended by this policy will also apply to volunteers.

The Trust views the contribution made to its services by all those who work for it as an essential element of caring for patients and therefore values issues raised by staff, particularly relating to situations where there is the possibility of harm, danger or a breach of safety to patients in a clinical or research capacity.

Managers at the trust will always take concerns seriously and give them due and sympathetic consideration. There may be occasions when they will wish to seek specialist advice from other health care professionals.

The Trust's view is that individual staff in the NHS have a right and a duty to raise any matters of concern they may have about health service issues related to the delivery of care, research or services to a patient/s within the trust, or any other matter that can be said to be in the public interest.

In this Policy / Procedure the term 'staff' is used to refer to all those who work for the Trust (including volunteers, interim [agency/locums] staff and students on placement).

## 5 RESPONSIBILITIES

### 5.1 Director responsible for Human Resources & Organisational Development

The Director responsible for Human Resources and Organisational Development (HR & OD) is chiefly responsible for having concerns raised under this policy reviewed effectively and has overall responsibility for the Whistleblowing Policy and the effective working of the Whistleblowing Helpline.

### 5.2 Whistleblowing Helpline (01553 613949 – or ext. 3949, internally)

The Whistleblowing Helpline has been established as an additional source of support and information for staff wishing to raise concerns. The Whistleblowing Helpline is managed by a designated Whistleblowing Officer and deputy and a secure and confidential voicemail service is checked for messages regularly during office hours.

Staff may speak to the designated Whistleblowing Officer / deputy or may be invited to leave a message on a confidential voicemail service. No-one other than the designated Whistleblowing Officer/deputy will access your voicemail. Staff may ask for a call back, if they would prefer to explain their concern in person.

### 5.3 Line Managers

Managers must ensure that all staff are easily able to contribute suggestions and raise concerns about care and delivery of services, and that any concerns raised are dealt with thoroughly and fairly.

In the first instance (Informal stage - Level 1 procedure), staff wishing to discuss concerns should feel able to approach their immediate line manager, or the most immediate manager available to them. The manager is then responsible for taking action to address the issue, and contacting the member of staff raising the initial concern with the outcome of the intervention. If they are unable to resolve the issue directly, they can contact the Whistleblowing Helpline for assistance.

Managers must also contribute to the Trust ensuring that staff who raise concerns are not subject to reprisals.

### 5.4 Local Counter Fraud Specialist / NHS Protect

In circumstances where fraud, bribery and/or corruption are suspected, staff 'blowing the whistle' may consider discussing their concerns with the Trust's Local Counter Fraud Specialist (LCFS) via the Trust's Switchboard. The LCFS can investigate instances of fraud, bribery or

corruption without needing to implement the formal procedures set out in this Policy / Procedure.

Staff can also report fraud, bribery or corruption via NHS Protect on 0800 028 4060 or the NHS Protect online reporting system at www.reportnhsfraud.nhs.uk

### 5.5 Trade Union Representatives

The Trust recognises the right of accredited trade union representatives to raise issues both within, and outside, the Trust on behalf of their trade union in the legitimate interests of their members. This may involve local representatives contacting the media or other external bodies to express a view on behalf of the trade union. Nothing in this policy should be seen as affecting this right. In the spirit of good employee relations, the Trust expects trade union representatives to act in good faith on information they reasonably believe to be true, and to seek to have any issues addressed within the Trust in the first instance.

### 5.6 Divisional Directors, Clinical Directors, Associate Chief Nurses and Deputy Directors

See Formal Stage 2 procedure.

### 5.7 Chief Executive

See Formal Stage 2 and / or 3 procedure.

### 5.8 The Chair of the Trust Board

If at any stage the individual considers that their concern is not being addressed fully they may forward their concerns in writing directly to the Chief Executive or to the Trust Chair.

### 5.9 Investigating Officer

It is the responsibility of the Investigating Officer, where appointed, to carry out any investigation in accordance with this policy.

The Investigating Officer will also be responsible for keeping the Line Manager or 'contacted officer' and Human Resources lead informed as to the progress of the investigation and of any delays.

### 5.10 The Freedom to Speak up Guardian

The Freedom to Speak up Guardian 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.

## 6 HOW TO RAISE A CONCERN

If staff are unsure about raising a concern at any stage, they can get independent advice from their trade union representative, from the Whistleblowing Helpline or from the Freedom to Speak up Guardian.

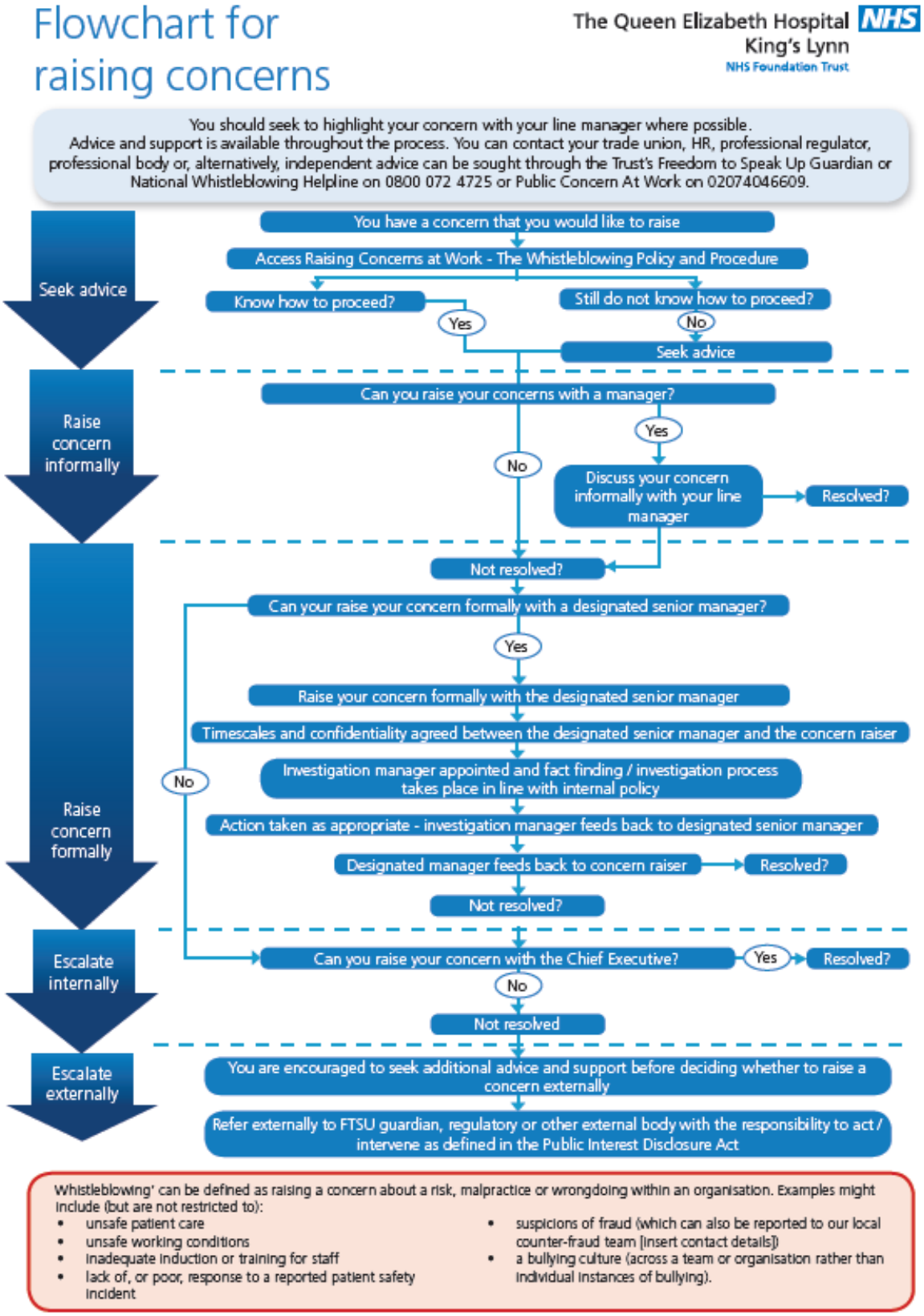
Staff should remember that they do not need to have firm evidence before raising a concern. However, the Trust asks that staff explain as fully as they can the information or circumstances that gave rise to the concern.

Staff have a right and a duty to raise any issue which they consider to be damaging to the interests of patients, and to suggest any improvement. At the same time, staff may also have a responsibility to raise the concern with their professional body. Nothing in this policy should be seen as replacing the duty of a registered professional to raise matters of professional practice with a professional registering body where this is appropriate.

Staff will be supported by senior officers, so that they can express their views within the Trust, provided that:

- They have a reasonable belief that the disclosure is in the public interest
- The member of staff reasonably believes that the information given and any allegations contained in it are substantially true
- Allegations are not made for the purposes of personal gain
- Staff use the proper channels which are outlined in this policy

## HOW TO RAISE A CONCERN – FLOWCHART



## 7 LOCAL PROCEDURE FOR DEALING WITH STAFF CONCERNS

There are a number of different stages that an individual can follow when raising a concern in order for this to be investigated and any appropriate action taken.

**Informal stage - Level 1**

It must always be the aim for staff members' verbal concerns to be resolved through contact between the individual and his or her line manager. The Line Manager will be required to complete appendix D. Staff may wish to approach their trade union or professional organisation who can raise specific concerns on behalf of their members. Where a concern can be acted upon, action must be taken promptly and the individual notified quickly of the action taken.

If a manager decides that no action is warranted, they must discuss this with their respective manager/director prior to the decision being notified to the individual who has raised the concern. Where action is not considered appropriate, then the individual must be given a prompt and thorough explanation of the reasons for this. They must also be advised that they can raise this issue under the formal procedure, detailed below.

Individuals who raise a concern should receive feedback in writing as quickly as possible, taking into account the seriousness of the concern but in any event, within ten working days. If an associated investigation is complex and requires additional time for completion, the individual who has raised the concern will be notified, with an expected date of completion.

Staff must, of course, if they witness or suspect there is immediate risk, report their concerns to the appropriate person or authority without delay (refer to Incident Reporting and Management Policy and Procedure). This might include reporting via the switchboard to 'bronze' or 'silver' command, out of hours.

**Formal stage - Level 2**

This stage should be invoked if an individual is dissatisfied with the outcome after following the Informal stage – level 1 procedure or for whatever reason, feels unable to report matters to their line manager (e.g. if their line manager is at the centre of the concern).

In these circumstances, staff must report concerns in writing, see appendix C, to either their Divisional Director, Clinical Director, Associate Chief Nurse or Deputy Director who will be required to complete appendix D.

The concerns will be acknowledged by letter, normally within 2 working days, investigated and a written response to the reporting staff member's home address given normally within 15 working days.

The issue must however be dealt with immediately if it has urgent patient care or other such serious implications. It may be that such concerns are reported verbally. This might include reporting via the switchboard to 'bronze' or 'silver' command, out of hours.

If an associated investigation is complex and requires additional time for completion, the individual who has raised the concern will be notified, with an expected date of completion.

If the Divisional Director, Clinical Director, Associate Chief Nurse or Deputy Director decides action is not appropriate, a written explanation will be provided to the individual within the given timeframe.

**Formal stage - Level 3**

If a concern cannot be resolved at Stage 1 or 2, then the individual is entitled to raise their concern directly with and Executive Director and/or the Chief Executive. This should ideally take the form of a written concern, see appendix C, which will normally be acknowledged by letter within 5 working days and a written response to the reporting staff member's home address provided within 20 working days. If an associated investigation is complex and requires additional time for completion, the individual who has raised the concern will be notified, with an expected date of completion. Appendix D will need to be completed by the Executive Director and/or the Chief Executive. If the concern is raised verbally, then a record of the key details will be made and shared with the individual raising the concern. The written response must contain details of what actions are to be taken together with a timetable or if no action is recommended, the reasons why.

The Trust will give as much feedback as it properly can, however it does have legal obligations of confidentiality to its patients and other staff, so it may not be able freely to provide full feedback, e.g., on the outcome of any disciplinary action.

If at any stage the individual considers the issue is not being addressed fully they may forward their concerns in writing directly to the Chief Executive or to the Trust Chair. Any anonymous concerns raised will be considered and may be investigated, but if the Trust does not know who has raised a specific concern, it will be more difficult to look into the matter, protect the individual and provide appropriate feedback. If an anonymous concern is raised and found to be malicious or untrue then disciplinary action may be taken against the reporting staff member, if identified.

**Whistleblowing Helpline**

If staff feel unable to raise a concern with management for whatever reason, they can raise the matter through the secure and dedicated Whistleblowing Helpline on 01553 613949 – or ext. 3949, internally.

Staff may speak to the designated Whistleblowing Officer / deputy or may be invited to leave a message on a confidential voicemail service. No-one other than the designated Whistleblowing Officer/deputy will access the voicemail. Staff may ask for a call back if preferred, to explain the concern in person.

The dedicated Whistleblowing Officer has special responsibility and training in dealing with whistleblowing concerns. If staff want to raise the matter in confidence, they should say so at the outset so that appropriate arrangements can be made.

Concerns raised via the Whistleblowing helpline will be risk-rated and this will determine the suggested approach and timescale for dealing with the issue.

**Freedom to Speak up Guardian**

Staff may speak to the Freedom to Speak up Guardian about concerns at any time. The Freedom to Speak up Guardian will 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.

**Confidentiality**

It is recommended that concerns are raised openly, i.e. that individuals raising concerns give their name. This makes it easier for the concern to be investigated and is the best way for the individual to be protected under the Act. It is recognised that there may be circumstances when the individual raising a concern would like to keep his/her identity confidential. In such instances, the individual must say so at the outset. The individual must realise however that there may be practical or legal limits to this confidentiality where the concern cannot be resolved without identity being revealed. Others may also guess who has raised the concern.

Whilst the Trust is committed to encouraging openness, staff are expected to respect this commitment by observing the appropriate procedures for raising concerns.

In particular, all staff have a duty of confidentiality to patients and any unauthorised disclosure of personal information identifiable to a specific patient could be regarded as a breach of duty and as such might result in disciplinary action being taken. This applies even where an individual believes that he or she is acting in the best interests of a patient or client, by disclosing personal information. It is strongly advised that individuals seek advice from their professional organisation before taking any such action.

Consideration must be given to the stage at which the subject of any disclosure(s) made against them is informed of the investigation. An appropriate risk assessment must be conducted by the Trust to ascertain if it is appropriate and/or necessary to advise them of the allegations and, if so, at what stage.

**When a concern is raised**

It is important that staff feel that they are able to raise concerns either with their line manager, relevant director or direct with the Chief Executive or his/her designated deputy and to feel confident that their position will not be jeopardised and that harassment or bullying will not take place as a result of their actions. Disciplinary action will not be taken against the reporting staff member as a direct result of raising a concern. The Trust regards the ability to raise issues of concern as very important, and is therefore anxious that staff feel able to do so.

Where an individual formally invokes the policy and raises a concern with their manager or at a higher level, the manager who is dealing with the issue should establish:

- If the individual is anxious about reprisals;
- When the concern first arose and, where relevant, what is prompting the decision to speak up now;
- Whether the information is first hand or hearsay;
- Where the approach is to a designated officer, whether the individual has raised the concern with their line manager and (a), if not, why and (b) if so, with what effect;
- Whether confidentiality is sought;
- If there is anything else relevant the individual wants to mention

These issues are indicative of the approach that may be taken and should not be seen as a definitive list.

Once individuals have reported a concern at any stage of the process, it will be assessed (including the potential level of risk to the patient, employee or the Trust itself) and appropriate action considered. This may involve an informal review, an internal inquiry or a more formal investigation. An Investigating Officer may be appointed. The reporting staff member will be notified concerning how long any investigation is expected to take. This timeframe may be amended if the issue is found to be very complex. Reporting staff will be told who is handling the matter.

The Trust will not tolerate any detriment, reprisals, bullying, harassment or victimisation against any individual because he or she has raised a concern under this policy, and will treat any such instance as a disciplinary matter which may lead to dismissal of the perpetrators or sanctions against those acting as agents of the Trust.

Employees making deliberately false or malicious allegations will be subject to disciplinary action in accordance with the Trust's Disciplinary Procedure.

**Monitoring and recording**

A central log of all formal concerns raised, together with investigation progress updates and outcomes will be maintained by the Human Resources Department. This will allow for the effective acknowledgement, monitoring and progress of reported disclosures.

This log will be available to the Trust's Audit Committee and will be reported to the Trust Board on a monthly basis.

## 8 REPORTING CONCERNS OUTSIDE THE ORGANISATION

**Public Concern at Work**

While it is hoped that this policy gives staff the reassurance they need to raise concerns internally, the Trust recognises that a member of staff who has exhausted the informal and formal procedure, but still remains concerned, may wish to raise it externally.

Staff can contact Public Concern at Work (tel. 020 7404 6609) or via the NHS/Social Care Whistle-blower hot line (tel. 08000 724 725) or by email via **helpline@pcaw.co.uk**

**Referral to a Regulatory Body**

Individuals who have raised their concern internally but who feel it has not been addressed properly, or feel unable to raise concerns at any level in the organisation may consider the need to raise their concern outside the Trust.

In order for the concern to be investigated and for individual protection under current legislation, the concern must be raised with a recognised healthcare organisation that has the authority to investigate the issue. This could be the regulator of health and social care services (for example the Care Quality Commission) or a regulator of health professionals (for example, the General Medical Council or Nursing and Midwifery Council).

Before reporting concerns to a regulatory organisation, it is recommended that advice is sought. The Trust Chief Executive/Chair should also be informed of intended actions.

**Fraud, Corruption and Bribery**

All allegations of suspected fraud, bribery and corruption must be reported to either the Director of Finance, the Trust's nominated Local Counter Fraud Specialist (LCFS), or by calling the NHS Fraud and Corruption Reporting Line. All reports will be assessed and, where necessary, investigated in accordance with the Trust's Anti-Fraud and Bribery Policy.

In addition, where allegations involve an Executive Director or Non-Executive Director (NED) the information can also be reported to the Audit Committee Chair.

The contact details for reporting fraud, corruption and bribery are as follows:

- Director of Finance on: 01553 613732
- Local Counter Fraud Specialist (LCFS) on: 07528 970222
- NHS Fraud and Corruption Reporting Line on: 08000 724 725.

**Reference to Members of Parliament and the Media**

A staff member who has exhausted the informal and formal procedures above, may wish to consult their Member of Parliament in confidence. He or she may also contemplate the possibility of disclosing their concern to the media. It would be helpful if he or she were to inform, ideally before disclosure, either the Communications Manager or the Chief Executive so that the Trust is able to deal with subsequent press enquiries.

Disciplinary action will not be taken as a direct result of raising a concern, provided the concern is raised in accordance with the Public Interest Disclosure Act 1998 and the person raising the concern reasonably believes that to raise the concern is in the public interest.

It is however, the underlying aim of this procedure that staff will find it unnecessary to resort to such actions, as concerns will be addressed effectively, within the Trust.

**The Public Interest Disclosure Act 1998**

In addition to the local procedures, the Public Interest Disclosure Act 1998 provides specific rights for those who disclose information to a third party about an alleged wrongdoing. The wrongdoing must fall into one of a specific number of categories and be raised following a laid down procedure.

If an individual has a concern, and wishes to consider seeking protection under the Public Interest Disclosure Act when raising it, they should seek advice from their trade union or an independent advisor to ensure that they are protected.

**Independent Advice and Support**

If individuals are unsure whether to use this procedure or want confidential independent advice at any stage, they should contact:

- Their trade union or professional association: or
- The independent charity Public Concern at Work on 020 7404 6609 or helpline@pcaw.co.uk. Their legal advisors will give free confidential advice at any stage about how to raise a serious concern at work.

## 9 FURTHER INFORMATION

Further information regarding this policy can be obtained within the Trust from the Human Resources team. See also Appendix B.

## 10 EQUALITY STATEMENT

A Stage 1 (Screening) – Equality Impact Assessment has been undertaken, and no negative impact on any group was indicated (see Appendix A)

## 11 DISSEMINATION OF DOCUMENT

Following approval by the Joint Staff Consultative Committee, this policy will be submitted to the Workforce Committee for ratification. This policy will be uploaded onto the Trust's intranet site under Human Resources. Policy notification will be through an email to all staff members within the Trust.

## 12 MONITORING COMPLIANCE

The Trust Board will monitor the application of and compliance with the Whistleblowing Policy through its monthly review of reported concerns and their handling.

**APPENDIX A - EQUALITY IMPACT ASSESSMENT**

**Equality Impact Assessment Tool**
*(To be completed and attached to any policy document when submitted to the appropriate committee for ratification.)*

STAGE 1 - SCREENING

| **Name & Job Title of Assessor: Gill Rejzl (Trust Secretary)** | | | **Date of Initial Screening: August 2015** |
|---|---|---|---|
| **Policy or Function to be assessed: 'Whistleblowing' Policy** | | | |
| | | **Yes/No** | **Comments** |
| **1.** | **Does the policy, function, service or project affect one group more or less favourably than another on the basis of:** | | |
| | • Race & Ethnic background | No | |
| | • Gender including transgender | No | |
| | • Disability:- This will include consideration in terms of impact to persons with learning disabilities, autism or on individuals who may have a cognitive impairment or lack capacity to make decisions about their care | No | |
| | • Religion or belief | No | |
| | • Sexual orientation | No | |
| | • Age | No | |
| | | | |
| **2.** | **Does the public have a perception/concern regarding the potential for discrimination?** | No | There is no known reason for the public to have any concerns with this policy |

**If the answer to any of the questions above is yes, please complete a full Stage 2 Equality Impact Assessment.**

Signature of Assessor: G Rejzl, Trust Secretary  Date: September 2015

Signature of Line Manager:  Date:

## APPENDIX B –SOURCES OF ADVICE

This list is not exhaustive, but staff may wish to contact one of the following if considering raising a concern about the standard of care or any aspect of Trust activities. This is very strongly advised if a member of staff is contemplating contacting the media.

- Public Concern at Work. Tel 0207 404 6609.

  This is a whistleblowing charity with a legal advice centre designated as such by the Bar Council. Through its helpline, its lawyers can provide confidential advice, free of charge, to people concerned about wrongdoing at work, but who are not sure whether, or how, to raise the concern. Information that is disclosed to it in the course of seeking advice is protected under the Public Interest Disclosure Act. It can advise on other regulatory bodies such as the Health and Safety Executive etc.

- A recognised trade union *e.g.* UNISON, UNITE, RCN, BMA *etc.*

- Professional bodies *e.g.* GMC, NMC, GPhC etc.

  The NMC has issued guidance in the form of a booklet entitled 'Raising and Escalating Concerns'. This covers the role of the nurse or midwife in raising concerns, how to raise a concern, and the legislation in place to protect the concerned party. Copies of the guidance and further information such as a flow chart of the stages in the process can be obtained via the NMC website.

- NHS/Social Care Whistleblowing Hotline. Tel 08000 724 725.

  This is a service for all staff and employers in the NHS and social care sector that offers legally compliant, unbiased support and guidance to ensure you can act in accordance with your values.

- The NHS Protect Fraud Reporting Line. Tel 0800 028 4060.

- The Trust's Local Counter Fraud Specialist on 07528 970222

- The Freedom to Speak up Guardian - **TBC**

  .

**APPENDIX C**

## Model letter for staff who raise Level 2 or Level 3 concerns internally

**STRICTLY CONFIDENTIAL - RAISING CONCERNS DISCLOSRE FORM**

This form is to be completed by individuals who want to raise a formal concern under the Trust's Whistleblowing Policy. Please send when complete to a Divisional Director, Clinical Director, Associate Chief Nurses, Deputy Directors or Executive Director in an envelope marked Private and Confidential.

***SECTION 1 – Details of the person raising the concern***

If you wish to remain anonymous, please go straight to section 2. However please note that whilst such concerns will be given due consideration, as set out in the Trust's Whistleblowing policy more action is likely and possible if your identity is known when you report something. It will be much more difficult for the Trust to look into the matter or to protect your position or to give you feedback if you remain anonymous.

Name ……..

Home Address …….  Work Address ……

……  ……

……  ……

……  ……..

Home contact number…….....

Work contact number ……

To which address do you wish any correspondence to be sent?

Home address / Work address (please delete as appropriate)

Date disclosure form submitted ……

***SECTION 2 – Details of the disclosure***

What is your concern about? (please tick)

☐ Patient/service user care ☐ Patient/service user safety

☐ Criminal offence/legal obligation ☐ Professional/clinical practice or competence

☐ Conduct (including malpractice, unethical conduct

Other (please state) ……..

Who is involved? Please list witnesses and anyone carrying out the act causing your concern, and the date(s), time and place(s) the act occurred:

…….

…….

…….

Please describe what happened/what you think will happen. Please provide as much detail as you can. (Use additional sheets of paper if required)

……..

…….

…….

…….

***SECTION 3 – Personal involvement/personal interest***

Please declare any personal interest you may have in this matter (i.e. does the outcome of this matter have the potential to affect you personally in any way?)

……

……
.
Have you personally been involved in this matter previously?

Yes ☐ No ☐

If yes, please outline your involvement:

……

***SECTION 4 – Expressed preferences***

Do you wish your identity to be kept confidential (bearing in mind that, depending on the nature of the investigation or disclosure, it may become necessary to disclose your identity)?

Yes ☐ No ☐

**NB. A copy of this completed form must be forwarded to the designated Whistleblowing Officer**

# APPENDIX D - Record of Whistleblowing Concerns (Concerns Arising from the Workplace)

**To be completed by 'contacted officer' i.e. Divisional Directors, Clinical Directors, Associate Chief Nurses and Deputy Directors (Stage 2) / Executive Directors (Stage 3)**

**Please use this form for all concerns raised. Completed forms with any attachments should be sent as quickly as possible to an Executive Director / Chief Executive / Trust Chair and a copy retained in the ward/department.**

**Section 1 - Time, Date and Method of Communicating Concern**

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|---|
| |

**Section 2 - Details of Informant**

NB: This section may be left blank if the Informant wishes absolute confidentiality

| | |
|---|---|
| **Name and address:** | |
| **Contact telephone number:** | Work:<br>Home: |
| **Informant's views on confidentiality:** | |

**Section 3 - Details of Concern**

| |
|---|
| **Directorate/Department** |
| **Nature of concern**: Fraud / Clinical Issues / Environmental / Bribery / Other (specify) |
| **Brief details of concern:** |
| **Action Informant would like to see taken:** |
| **Outline of action promised:** |

**Section 4 - Action taken**

| |
|---|
| **Outline of action taken:** (please date and time events and continue on an additional sheet if necessary) |
| **Feedback to Informant:**<br><br>**Summary:**<br><br>**Date:** |

Signed: …….. Date: ……

**NB. A copy of this completed form must be forwarded to the designated Whistleblowing Officer**