

# Freedom to Speak Up: Raising Concerns (Whistleblowing) Policy and Procedure



*'Delivering Excellence in Healthcare through Innovation and Collaboration'*

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## Foreword

You may recall the Freedom to Speak Up review, an independent review into creating an open and honest reporting culture in the NHS, led by Sir Robert Francis QC. His review followed concerns raised at Mid Staffordshire NHS Foundation Trust where unacceptable levels of patient care were exposed alongside a staff culture that stopped staff from raising concerns.

An outcome of the review was that NHS Trusts should appoint Freedom to Speak Up Guardians, someone whose role it is to act as an independent and impartial source of advice to staff, with access to anyone in the organisation, including the CEO, or if necessary outside the organisation, where concerns are identified which affect patient care.

The Guardian ensures that the primary focus is on the safety issue; that the case is handled appropriately, investigated promptly and issues addressed; and that there are no repercussions for the person who raised it.

Sian Axon (Head of Nursing Emergency Preparedness) is the Trust's Freedom to Speak Up Guardian and is committed to providing confidential advice and support to staff in relation to concerns they have about patient safety, risks and/or the way their concern has been handled. Whilst her role is not to carry out investigations into the concerns raised, she will help to facilitate the raising concerns process where needed, signposting, supporting and ensuring Trust policies are followed correctly.

Ms. Lorraine Butcher takes on the role of Non-Executive Director aligned to support and promote the FTSU role providing links into the Trust Board.

Speaking up should be something that everyone does and is encouraged to do. Staff may feel worried about raising concern, this is understandable, staff need not be put off. In accordance with our duty of candour, the Trusts senior leaders and entire board are committed to an open and honest culture. We need to maintain our shared belief across the Trust that raising concerns is a positive action, that staff feel safe to raise concerns, confident that they will be listened to and the concerns will be acted upon.

Mid Cheshire Hospitals NHS Trust is committed to supporting and encouraging all those who raise honestly held concerns about safety.

Sian believes in her role as Freedom to Speak Up Guardian that a shared culture of openness and honesty in which the raising of concerns is welcomed, with this the staff that raise concerns are valued, focusing on learning rather than blame.

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.

Should you have a concern, Sian can be contacted via email at [sian.axon@mcht.nhs.uk](mailto:sian.axon@mcht.nhs.uk) Alternatively you may wish to speak to one of Trust's Employee Support Advisors or email your concerns to [speakup@mcht.nhs.uk](mailto:speakup@mcht.nhs.uk). The National Whistleblowing Helpline also provides free, independent and confidential advice for NHS and Social Care staff on 08000 724 725 or email [enquiries@wbhelpline.org.uk](mailto:enquiries@wbhelpline.org.uk). For further information visit the website <http://wbhelpline.org.uk/>

Sian Axon  
Head of Nursing Emergency Preparedness

## 1. Introduction

At one time or another, each of us has concerns about what is happening at work. This applies whether we are working for the Trust as a permanent or temporary employee or former employee; or working for an agency, for the Trust's 'bank', or for one of the Trust's contractors; or as a volunteer. Usually, these concerns are easily resolved. However, when they are about patient safety, unlawful conduct, financial malpractice, misuse of controlled drugs or dangers to the public or the environment it can be difficult to know what to do.

The NHS Constitution details an expectation that NHS staff will raise concerns. You may be worried about raising such issues or may want to keep the concerns to yourself, perhaps feeling it's none of your business or that it's only a suspicion. You may feel that raising the matter would be disloyal to colleagues, managers or to the Trust. You may decide to say something, but find that you have spoken to the wrong person or raised the issue in the wrong way and are not sure what to do next.

Mid Cheshire Hospitals NHS Foundation Trust has introduced this policy and procedure to enable you to raise your concerns about such matters at an early stage and supporting you if you are worried by something you have seen that you think is unsafe. We are absolutely committed to tackling malpractice or wrong doing. Even if you are incorrect in your belief we would rather that you raised the matter when it is just a concern rather than wait for proof. We recognise the need to develop a culture where staff concerns are genuinely welcomed and fully considered and where feedback is always given. We will seek to develop that culture through training, communication and most importantly, through our behaviour when concerns are raised.

If something is troubling you which you think we should know about or look into, please use this procedure. Options are described in section 2. If, however, you are aggrieved about your personal position, please use the Grievance Policy & Procedure which you can get from your manager or your Human Resources Representative. This Freedom to Speak Up: Raising Concerns (Whistleblowing) Policy and Procedure is primarily for concerns where the interests of others or of the Trust itself are at risk.

If in doubt - ask about it, by approaching your line manager, your departmental head, your consultant, your staff representative or a Human Resources Representative, the Freedom to Speak Up Guardian themselves.

There is, as documented in the NHS Constitution, a legal right for staff to raise concern and the Board and Chief Executive are committed to ensuring that the entire Trust understands and follows the policy. We will support all staff who raise a genuine concern under this policy, and you will not be at risk of losing your job or suffering any form of retribution as a result (see also section 2 below), it does not matter if you are mistaken. Of course, we do not extend this assurance to someone who maliciously raises a matter they know is untrue and in these cases, action may be taken in accordance with the Disciplinary Policy and Procedure. We will not tolerate the harassment or victimisation of anyone raising a genuine concern.

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). If you ask us to protect your identity by keeping your confidence, we will not disclose it without your consent. If the situation arises where we are not able to resolve the concern without revealing your identity, for example because your evidence is needed in court or an internal disciplinary hearing ( it is often not fair to proceed with such hearings if witnesses cannot be questioned by the person against

whom an allegation has been made) 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.

If the situation arises where we are not able to resolve the concern without revealing your identity, for instance because your evidence is needed in court or at an internal disciplinary hearing (it is often not fair to proceed with such hearings if witnesses cannot be questioned by the person against whom an allegation has been made), we will discuss with you how we can proceed. Remember that if you do not tell us who you are, it will be much more difficult for us to investigate thoroughly and give you feedback on the outcome.

While we will consider anonymous reports, this policy is not appropriate for concerns raised anonymously.

We all have a duty of confidentiality to patients. Unauthorised disclosure of personal information about any patient or client will be regarded as a most serious matter which will always warrant disciplinary action. The unauthorised disclosure of information held in confidence concerning staff members will similarly incur disciplinary action. As employees, we also have an implied duty of confidentiality and loyalty to the Trust. Provided that it does not breach patient or staff confidentiality, this duty is not absolute and the Trust would not wish to inhibit normal entitlements to free speech.

This policy and procedure applies to all prospective and current Trust employees and others working for or with the Trust.

Concerns about issues affecting individual employees at work should be raised through the Grievance Policy & Procedure.

Employees who need to talk through personal issues can contact the provider of the Trusts confidential counselling service or Occupational Health. Wellbeing and support forums are also available.

It is the policy of the Trust that no-one will be discriminated against on grounds of age, disability, gender, gender re-assignment, marital status, race (including colour, nationality and ethnic or national origins), religion or belief or sexual orientation. The Trust will provide interpretation services or documentation in other mediums as requested and necessary to ensure natural justice and equality of access.

All staff must be aware that failure to comply with this policy will be dealt with in accordance with the Trust's Disciplinary Policy and Procedure.

## **2. Purpose**

The Trust aims to ensure that managers, employees, former employees, other workers, volunteers, trade unions and employee organisations are aware of their rights and obligations in matters relating to Whistleblowing.

The purpose of this Policy and Procedure is to ensure that when concerns are raised they will be considered consistently, thoroughly, speedily and fairly.

## **3. General Document Principles**

The following principles apply to implementation of the policy and procedure:

### **Making a 'protected disclosure'**

The Public Interest Disclosure Act 1998 protects workers from suffering bad treatment or losing their job because they have made a disclosure. This is sometimes called 'whistleblowing'. If you make a disclosure (i.e., raise a concern or whistleblow) in line with this policy, you will be protected by the Public Interest Disclosure Act. If in doubt, you may seek independent advice from the Whistleblowing Helpline for the NHS and social care. The Trust Board recognises and encourages the contribution that issues raised by staff under this policy and procedure can have in improving services and will ensure that concerns raised are handled honestly, promptly and effectively.

The Trust Board is committed to values of openness and freedom to express views and concerns, as this will enable all staff to contribute to improving services and achieving high standards integrity and probity.

If a member of staff raises a concern under this policy and procedure, they will not be at risk of losing their job, or suffering any form of retribution as a result, it does not matter if s/he is mistaken. Following a full investigation, the Trust will not, however, extend this protection to someone who maliciously raises a matter they know is untrue.

The Trust will not insert 'gagging clauses', which seek to prevent disclosure of information in the public interest, in contracts of employment or compromise agreements.

A member of staff who victimises another member of staff who has raised a concern or attempts to deter a person from raising a concern, will, following investigation, be subject to disciplinary action which may include dismissal.

It is recognised that a person may want to raise a concern in confidence under this policy and procedure for example if there is a genuine fear for their safety. If a situation arises where the issue/concern raised is not able to be resolved without revealing her/his identity (e.g. because evidence is needed in legal proceedings) the Trust will discuss with her/him how support can be provided.

Sometimes concerns are raised anonymously. This makes it more difficult to look into a matter properly, and impossible to give feedback. Staff are, therefore, encouraged to provide their name at the time of raising their concern.

If a concern is raised which relates to another member of staff, that person will be informed, when appropriate, and will be advised about the likely timescale and kept updated.

### **3.1 Accountability**

Everyone should expect to be held accountable for adopting fair, honest and open behaviours and practices when raising or receiving and handling concerns. There should be personal and organisational accountability for:

- poor practice in relation to encouraging the raising of concerns and responding to them;
- the victimisation of workers for making public interest disclosures;
- raising false concerns for personal benefit;
- acting with disrespect or other unreasonable behaviour when raising or responding to concerns;
- inappropriate use of confidentiality clauses.

### **3.2 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). We will provide feedback and updates to your concerns raised.

### **3.3 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.

Triangulation of themes, actions and learning linked to improvement will form part of evidence of relevant organisational learning.

#### **Board oversight**

The board will be given high level information and Themes about all concerns raised by our staff through this policy and what we are doing to address any problems and learning . 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.

### **3.4 Review**

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

## **4. Raising Concerns**

### **4.1 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 also be reported to our local counter-fraud team- there is a joint agreement with the Freedom to Speak Up Guardian and the Local counter- fraud Officer in relation to this.).
- a bullying culture (across a team or organisation rather than individual instances of bullying).

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 would not be used for people with concerns about their employment that affect only them or most cases of individual instances of bullying – that type of concern is better suited to our Grievance Policy & Procedure or Bullying and Harassment Policy and Procedure.

## **4.2 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.

## **4.3 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.

## **4.4 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.

## **4.5 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 matters, or you do not feel able to raise it with them, you can contact one of the following people:

- our Freedom to Speak Up Guardian (or equivalent designated person) - 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;
- our risk management team;
- Staff side representatives;
- Staff Governors/ Governors;
- Employee Support Advisors.

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

- our executive director with responsibility for whistleblowing;
- our non-executive director with responsibility for whistleblowing.

All these people have been trained in receiving concerns and will give you information about where you can go for more support. Contacts details can be found in the Appendix to this policy



All individuals are encouraged in the first instance to raise concerns internally.

## **5. Options for Raising Concerns**

### **5.1 Option 1**

If you have concerns about health service issues, please raise them with your manager or Consultant or Senior Nurse. The Trust expects managers and consultants to:

- take concerns seriously; and
- consider them fully and sympathetically; and
- recognise that raising a concern can be a difficult experience for some staff; and seek advice from health care professionals where appropriate.

If you are worried that you may breach confidentiality simply by raising a concern, you may wish to discuss the matter without 'naming names' initially. If you are not in a formal line management relationship (e.g., you are a consultant) you should discuss concerns with relevant colleagues where appropriate, The Freedom to Speak up Guardian is also someone who you have access to. You may wish to take them up directly with the Medical Director or Chief Executive.

Where your concern can be acted upon, action will be taken promptly and you will be notified quickly of the action taken. The timescale within which action will be taken will be discussed between you and your manager. Where action is not considered appropriate, you will be given a prompt and thorough explanation of the reasons for this, and told what further action is available under local procedures.

### **5.2 Option 2**

If you feel that Option 1 is inappropriate, or that it hasn't worked, please raise the matter with a senior manager in your division, or a senior manager in Human Resources, or a senior manager in Risk Management. The Freedom to Speak up Guardian is available to raise concerns. All these roles will advise you how to proceed, or will move the matter forward on your behalf with the relevant Designated Person listed in Option 3.

Please say if you want to raise the matter in confidence, so that they can make appropriate arrangements. If you wish, the manager you approach can reflect your concerns back to you in writing, with an indication of the action that they propose to take.

### **5.3 Option 3**

Alternatively, you may want to take up specific concerns as set out below. Concerns under our formal procedures may be divided into the five main types, each of which has one or more Designated Persons to receive concerns.

- (a) Concerns about Fraud - Raise with the Director of Finance, in accordance with the Trust's Fraud Policy. Such issues may also be raised with the Trust's Local Counter Fraud Specialists. The Trust's LCFS's contact details are:

Office: 0161 838 8368 or M: 07880 054 551

**[www.reportnhsfraud.nhs.uk](http://www.reportnhsfraud.nhs.uk)**

National Fraud and Corruption Reporting Line: 0800 028 4060

The counter fraud page on the Trust intranet provides further detail of the LFCs.  
<http://lhcs2/areas/trustinfo/fraud/fraud.asp>

- (b) Concerns about patient safety, arising from the physical or mental health of a doctor - Raise with the Chair of the Medical Advisory Committee or the Medical Director.
- (c) Concerns about patient safety stemming from clinical practice - Raise with the Medical Director or Director of Nursing.
- (d) Concerns about safeguarding – Raise with the Director of Nursing
- (e) Concerns about the deliberate misuse of controlled drugs - Raise with the Trust's Accountable Officer, Controlled Drugs (Director of Pharmacy).
- (f) Any other concern - Raise with the Director of Workforce and Organisational Development. If you remain dissatisfied with the action taken, or if a Designated Person is the subject of your concern, you may refer the matter to the Chief Executive.

Whilst the process does not have a right of appeal, If you are still dissatisfied, having exhausted all informal and formal procedures described above, or if the Chief Executive is the subject of your concern, you may raise your concern with the Chairman of the Trust. The Chairman may choose to consult with other suitable persons or bodies about the issue, subject only to the constraints of confidentiality described above. The timescale within which action should be taken will be discussed between you and the Chairman.

## 5.5 Raising your concern with an outside body

The aim of this policy is to ensure that you have a clear internal process under which you can raise your concerns and various options and individuals. You can do this with. However, if you have attempted to raise your concern through Options 1-3 but you do not believe that your concern has been handled in line with the policy, or the concern you have is about those individuals listed. Alternatively, you can raise your concern outside the organisation with:

- a) 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.
- b) Care Quality Commission (CQC) for quality and safety concerns.
- c) NHS England for concerns about:
  - primary medical services (general practice);
  - primary dental services;
  - primary ophthalmic services;
  - local pharmaceutical services.
- d) Health Education England for education and training in the NHS.
- e) NHS Protect for concerns about fraud and corruption.

- f) A legal advisor in the course of obtaining legal advice.
- g) A minister of the crown who has been appointed by any enactment by a minister.

## 6. Actions

### 6.1 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.

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.

The person with whom you raise your concerns will record them as a whistleblowing incident and for matters raised under Option 1 or Option 2, notify the appropriate Designated Person. S/he will also seek to agree with you the next action to be taken and provide you with a written summary of the eventual outcome. Where reasonably practicable this summary will be provided within 20 working days.

If this is not reasonably practicable, the person with whom you raise your concerns will contact you to give a revised timescale. If there is to be a delay beyond 20 days, the final report must be published within 2 months.

While it is not essential, it would be helpful if you could inform the person to whom you speak that you are raising an issue under the Freedom to Speak Up: Raising Concerns (Whistleblowing) Policy.

Those being informed of concerns about patient safety, unlawful conduct, financial malpractice, misuse of controlled drugs or dangers to the public or environment will, in any case, treat such concerns as whistleblowing incidents and deal with them in accordance with this policy and procedure. The investigation of concerns will follow the principles outlined in the Trust's Guidance on Investigations.

### 6.2 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). 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.

### 6.3 Representative and Regulatory Organisations

At all stages of these procedures, you are entitled to consult, seek guidance and support from your professional organisation, trade union or employee association, and from statutory bodies such as the Audit Commission, the Health and Safety Executive, the Healthcare Commission, the National Patient Safety Agency, the Nursing and Midwifery Council, the General Medical Council, the Health Professions Council or Public Concern at Work. Managers should encourage staff to consult with representative bodies, particularly if an issue seems likely to remain unresolved without reference to the Chairman of the Trust.

At all stages of these procedures, you may be accompanied or represented by your professional organisation, or trade union Staff Side representative, or by a work colleague, on the understanding that no confidential matters will be disclosed by the person accompanying you while local procedures are being followed.

### 6.4 Reference to the Media

If you are considering making a disclosure to the media, you should seek further specialist guidance from professional or other representative bodies and normally, from your line and professional managers.

In the light of the principles set out in this document, it is expected that the mechanisms will exist to ensure that staff concerns can be addressed and dealt with without reference to the media.

Designated Persons, Managers, Human Resources and Risk Management are required to keep written records of concerns which meet the definition of whistleblowing. These records should include:

- The date and nature of the concern raised;
- A copy of the written statement where applicable;
- The response;
- Action taken;
- Reasons for action taken;
- Any subsequent developments

Records must be held in a secure filing or computer system and must be treated as confidential and be kept no longer than necessary in accordance with the Data Protection Act 2018.

### 6.5 Advice and support

You can also contact the Whistleblowing Helpline (<http://wbhelpline.org.uk> or 08000 724 725) for the NHS and social care, your professional body or trade union representative.

## 7. Definitions

‘NHS Constitution - sets out the rights of patients. These rights cover how patients access health services, the quality of care they receive, the treatments and programmes available to them, confidentiality, information and the right to complain if things go wrong etc.

‘Whistleblowing’ - A concern about patient safety, unlawful conduct, financial malpractice, misuse of controlled drugs or dangers to the public or the environment raised by a person

other than an employee directly or managerially responsible for the issue or incident. The person raising the concern need not refer to it as whistleblowing for it to be covered by this policy and procedure. If a matter is raised by an employee who is directly or managerially responsible for the issue or incident and they are not satisfied by the outcome, it may then be raised under this policy.

‘The Trust’ - Mid Cheshire Hospitals NHS Foundation Trust.

‘Employee’ - anyone employed by Mid Cheshire Hospitals NHS Foundation Trust.

‘Trade union/employee association’ - nationally recognised NHS negotiating organisation.

‘Other Worker’ - a person providing services at the Trust while employed by another organisation or while undergoing training.

‘Volunteer’ - a person approved to provide services at the Trust on a voluntary basis.

‘Designated Person’ - a person holding an office listed in section 5 of the Freedom to Speak Up (Raising Concerns and Whistleblowing) Policy and Procedure.

## **8. Associated documents**

This procedure should be read in conjunction with the following documents:-

- Grievance Policy & Procedure
- Professional Codes of Conduct;
- Guidance Issued by Professional Bodies (e.g. BMA Guidance 2012);
- Traumatic Incident Protocol;
- Disciplinary Policy and Procedure;
- Disciplinary Policy and Procedure for Hospital Medical and Dental Staff
- Capability Policy and Procedure;
- Governance Handbook, Anti-Fraud Policy;
- Governance Handbook, Anti-Bribery Policy.

## **9. Duties**

### **9.1 Duties within the Organisation**

The Trust Board, Designated Persons, Line Managers, Employees, Other Workers, volunteers, Human Resources, Risk Management and Trade Union Representatives all have a key role in implementation of Freedom to Speak Up (Raising Concerns and Whistleblowing) Policy and Procedure. Specific responsibilities are outlined below:

### **9.2 Responsibility of the Trust Board**

The responsibility for the provision of the Freedom to Speak Up (Raising Concerns and Whistleblowing) Policy and Procedure rests with the Trust Board.

The Trust Board will ensure that:

- The Policy is implemented through the Trust's Line Management structure.

### **9.3 Designated Persons Responsibilities**

Responsibilities include:

- Receiving written or oral reports of concerns;
- Conducting meetings and investigations effectively and in accordance with this policy and procedure;
- Delegating investigations as and when appropriate;
- Ensuring that the policy and procedure is applied consistently and in a way that does not discriminate;
- Providing summary feedback reports to those raising concerns;
- Keeping written records as appropriate and ensuring confidentiality;
- Keeping the appropriate representative from Human Resources fully informed.

### **9.4 Line Management Responsibilities**

Responsibilities include:

- Ensuring that they understand the policy and procedure;
- Receiving written or oral reports of concerns; concerns do not need to be made in writing or titled 'whistleblowing'.
- Alerting the appropriate Designated Person of any concern that meets the definition of whistleblowing;
- Advise the appropriate Human Resources representative;
- Investigating concerns raised under option 1 in section 5;
- Providing summary feedback reports to those raising concerns;
- Ensuring that the policy is applied consistently and in a way which does not discriminate;
- Keeping written records as appropriate and ensuring confidentiality;
- Ensuring that all employees are aware of the Policy and Procedure.

### **9.5 Employee, Other Worker and Volunteer Responsibilities**

Responsibilities include:

- Familiarising themselves with this policy and procedure;
- Raising concerns in accordance with the procedure outlined below;
- Providing information and supporting documentation to allow appropriate investigation.

### **9.6 Human Resources**

Responsibilities include:

- Ensuring that managers are provided with appropriate advice and guidance on this policy and procedure, including training and coaching as required;
- Ensuring that assistance is provided for employees who have difficulty preparing written statements e.g. as a result of disability etc.;
- Providing overall monitoring of whistleblowing matters across the Trust;
- Providing support to designated persons and managers in individual cases as necessary;
- Ensuring that this policy and procedure complies with legislative requirements and good employment practice;

- Advising those raising concerns under option 2 in section 5;
- Alerting the appropriate Designated Person of any concern that meets the definition of whistleblowing;
- Providing the Director of Workforce & OD with an annual report outlining the number and type of concerns raised. The report will include cases dealt with by managers under options 1 and 2 in section 5 or identified by Risk Management through the Incident Reporting Procedure as well as concerns raised directly under option 3. No personal details will be included in the report;
- Informing a Trades Union Representative, nominated by the Staff Side of the Joint Consultation and Negotiation Committee, when a concern is raised under option 3. Subject to confidentiality requirements, discussing the case with the nominated representative;
- Will ensure that an annual report is provided to JCNC.

## 9.7 Risk Management

Responsibilities include:

- Ensuring that incident reports that meet the definition of whistleblowing are identified as such and addressed in accordance with this policy and procedure;
- Advising those raising concerns under option 2 in section 5;
- Alerting the appropriate Designated Person of any concern that meets the definition of whistleblowing.

## 9.8 Trade Union and Staff Side Representatives

Responsibilities include:

Familiarising themselves with this policy and procedure.

- Assisting the employee in preparing a written statement if required, encouraging the employee to provide a clear explanation of the concern with supporting evidence wherever possible;
- Agreeing with their line manager the arrangements for taking a reasonable amount of time off to fulfil the responsibility of employee representative;
- Advising members in accordance with this policy and procedure;
- If nominated to do so by the Staff Side of the Joint Consultation and Negotiation Committee, liaising with the Designated Person about cases raised under option 3. Subject to confidentiality requirements, the role of the nominated representative will be to satisfy themselves that matters are being addressed in line with this policy and to make outline reports to the Joint Consultation and Negotiation Committee.

It is the responsibility of the HR Department to provide initial training and ongoing support in the application of the Policy in individual cases, for all managers. It is the responsibility of the HR Department to ensure that the Policy is continually developed and updated.

## 10. Consultation and Communication with Stakeholders

This policy has been developed by a policy review group of management and staff side and in consultation with Joint Consultation and Negotiation Committee.

## 11. Implementation

This policy will be implemented through dissemination to managers within the Trust. Communication to all staff on the updated policy will be through Team Brief and other internal

communication channels.

## 12. Education and Training

Human Resources will provide coaching on a one-to-one basis as required.

## 13. Monitoring and Review

The policy will be reviewed after 3 years through the Joint Consultation and Negotiation Committee (JCNC). As with other Trust policies, this policy may also be audited through the Internal Audit Department.

Standard/process/issue Required to be Monitored	Monitoring and Audit			
	Process for monitoring e.g. audit	Responsible individual/ group	Frequency of Monitoring	Responsible Committee
Number of concerns raised and themes identified via a quarterly report	Quarterly report	Freedom to Speak Up Guardian	Quarterly	Board
Number of formal Whistleblowing concerns	Monthly	Workforce Business Partner	Monthly as part of casework update	EWAG

## 14. References and Bibliography

### 14.1 The Legal Framework

The prime legislation covering disciplinary matters in employment is the

Employment Rights Act 1996, amended by the Public Interest Disclosure Act 1998.  
Enterprise and Regulatory Reform Act 2013 (ERRA)

This document is has been written in accordance with the policy guide “Speak Up for a Health NHS”, which was commissioned by the NHS Social Partnership Forum and written by the independent whistleblowing charity “Public Concern at Work”.

## 15. Appendices

- A Version Control Document
- B Communication / Training plan
- C Equality Impact and Assessment Tool



## APPENDIX A - Control Sheet

This must be completed and form part of the document appendices each time the document is updated and approved.

<b>VERSION CONTROL SHEET</b>			
<b>Date dd/mm/yy</b>	<b>Version</b>	<b>Author</b>	<b>Reason for changes</b>
Nov 12	2	Sharon Bradshaw	Policy Due for Review
May 13	3	Sharon Bradshaw	Review due to additional guidance
Aug 13	4	Sharon Bradshaw	Review due to additional guidance
Dec 13	4.1	Melissa Oldham	Review due to additional guidance from Local Counter Fraud Service guidance.
1 <sup>st</sup> Apr 14	4.2	Melissa Oldham	Updated contact details for Trust's LCFS's and addition of web address/telephone number for National Fraud and Corruption Reporting Line - Section 2.4.1
May 17	5	Paul Cooper	Review due to national guidance
Jan 18	5.1	Paul Cooper	Name of Freedom to Speak Up Guardian updated
January 2019	5.2	Natalie Wallace	Update to monitoring section to identify reporting process and responsible committee
March 2019	6	Natalie Wallace	Update to policy and Change of Name to include Freedom to Speak Up
Oct 2021	6.1	Lucy Brownlee	Update the Foreword following the change in Freedom to Speak Up Guardian. Updated Monitoring Section re Whistleblowing reporting. General review of policy content.

## APPENDIX B - Training needs analysis

<b>Communication/Training Plan</b>	
<b>Goal/purpose of the communication/training plan</b>	To ensure everyone is aware of the Policy and Procedure
<b>Target groups for the communication/training plan</b>	All staff/Agency Workers/contractors/volunteers
<b>Target numbers</b>	All staff/Agency Workers/contractors/volunteers
<b>Methodology – how will the communication or training be carried out?</b>	<p><i>Communication</i> All staff via Payday Press/intranet</p> <p>New staff via induction</p> <p>Agency Workers via the agency workers induction sheet</p> <p>Briefing document for managers</p> <p>Crossroads events</p>
<b>Communication/training delivery</b>	Communication via intranet / payday press and email to managers
<b>Funding</b>	Not Applicable
<b>Measurement of success. Learning outcomes and/or objectives</b>	Not Applicable
<b>Review effectiveness – learning outputs</b>	Not Applicable
<b>Issue date of Document</b>	August 2019
<b>Start and completion date of communication/training plan</b>	Communication – From issue of document
<b>Support from Learning &amp; Development Services</b>	Not Applicable

## APPENDIX C

### Equality Impact Screening Assessment

#### POLICY/DOCUMENT/SERVICE : Freedom to Speak Up (Raising Concerns and Whistleblowing) Policy and Procedure

A	Does the document, proposal or service affect one group less or more favourably than another on the basis of:	Yes/No	Justification and Data Sources. Include nature of impact. Also record provisions already in place to mitigate impact
1.	Race, ethnic origins or nationality	No	
2.	Sex	No	
3.	Transgender	No	
4.	Pregnancy or maternity	No	
5.	Marriage or civil partnership	No	
6.	Sexual orientation including lesbian, gay and bisexual people	No	
7.	Religion or belief	No	
8.	Age	No	
9.	Disability - learning disabilities, physical disability, sensory impairment and mental health problems	No	Number of options available for raising concerns
10.	Economic/social background	No	
<b>B</b>	<b>Human Rights – are there any issues which may affect human rights</b>		
1.	Right to Life	No	
2.	Freedom from Degrading Treatment	No	
3.	Right to Privacy or Family Life	No	
4.	Other Human Rights (see guidance	No	

A	Does the document, proposal or service affect one group less or more favourably than another on the basis of:	Yes/ No	Justification and Data Sources. Include nature of impact. Also record provisions already in place to mitigate impact
1.	Race, ethnic origins or nationality	No	
2.	Sex	No	
3.	Transgender	No	
	note)		

**NOTES**

**Date:** 9<sup>th</sup> May 2019      **Name:** Natalie Wallace  
**Signature:** *N J Wallace*      **Job Title:** HR Manager