

NHS Ayrshire & Arran



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| Meeting: | Ayrshire and Arran NHS Board |
| Meeting date: | Monday 1 February 2021 |
| Title: | National Whistleblowing Standards: Proposal for implementation model from 1 April 2021 |
| Responsible Director: | Dr Sukhomoy Das, Non-Executive Director – Whistleblowing Champion Professor Hazel Borland, Nurse Director and Deputy Chief Executive |
| Report Author: | Laura Parker, Business Manager, Nurse Directorate |

1. Purpose

This is presented to the Board for:

- Decision

This paper relates to:

- Government policy/directive

This aligns to the following NHSScotland quality ambition(s):

- Safe
- Effective
- Person Centred

2. Report summary

2.1 Situation

Work is currently underway in NHS Ayrshire & Arran to prepare for the launch of the [National Whistleblowing Standards](#), which come into effect across NHS Scotland on 1 April 2021.

This paper seeks Board approval in relation to the proposed governance structure and implementation model; including the Confidential Contacts and Speak Up Advocates which is proposed and recommended by the Whistleblowing Oversight Group and was supported by the Corporate Management Team on 1 December 2020.

2.2 Background

2.2.1 In October 2018, the Cabinet Secretary for Health and Sport announced her intention to appoint dedicated non-executive Whistleblowing Champions to each Board in NHS Scotland. The role of the Whistleblowing Champions is to further promote a culture of openness and transparency in NHS Scotland, and

to seek and provide assurance that their respective Health Boards are complying with the Whistleblowing Standards. Following a national recruitment process, Dr Sukhomoy Das was appointed to the NHS Ayrshire and Arran Board in February 2020.

2.2.2 In early 2020, the [Public Services Reform \(the Scottish Public Services Ombudsman\) \(Healthcare Whistleblowing\) Order 2020](#) was published and introduced significant changes to the way in which the NHS in Scotland handles whistleblowing concerns. The order also gave Scottish Public Services Ombudsman the role of Independent National Whistleblowing Officer (INWO).

2.2.3 On 17 January 2020, the Independent National Whistleblowing Officer (INWO) shared the draft [National Whistleblowing Standards](#) with Boards across NHS Scotland. Due to Covid-19, the go live date previously planned for Summer 2020 was delayed and was recently confirmed as 1st April 2021.

2.3 Assessment

2.3.1 In Ayrshire and Arran, a Whistleblowing Steering Group was established in July 2020 to plan for the implementation of the standards, chaired by the Nurse Director as Executive Lead. The group developed a work plan and associated communications plan which set out actions and timescales related to awareness raising, culture and engagement, training and development, data and information, governance, external services and processes. This group was renamed the Whistleblowing Oversight group in December 2020, to reflect its ongoing role and purpose in terms of overseeing the implementation and application of the standards. Dr Sukhomoy Das joined the group as a substantive member at this time (please see Terms of Reference at **Appendix 1**).

2.3.2 At their meeting on 2 October 2020, The (now) Whistleblowing Oversight Group agreed that an implementation group would be established to deliver the various strands of the implementation; in particular the roll out of training, establishing appropriate governance structures and reporting mechanisms and ensuring that the necessary arrangements are in place for our Integration Joint Boards (IJBs), external services, contractors, volunteers, higher education partners and agency staff. A Terms of Reference including the proposed membership of the group is included as **Appendix 2**. The first meeting of the group took place on 23 November 2020 when members considered an outline implementation plan and developed this into clear and timebound actions.

2.3.3 An implementation governance structure has been established to ensure robust governance and reporting arrangements while we work towards implementing the Standards. As per the respective Terms of Reference, the Whistleblowing Implementation Group will report regularly to the Oversight Group, which will in turn report into Corporate Management Team, with reports to Area Clinical Forum and Area Partnership Forum as appropriate, to keep them sighted on developments at appropriate junctures (**see Appendix 3**).

2.3.4 A discussion paper was presented to the Corporate Management Team on 1 December 2020, setting out possible options for a suitable 'Speak up' Model in Ayrshire and Arran. The group considered a variety of options and concluded that the best model for Ayrshire and Arran would be for a cohort of Speak Up Advocates to be recruited in addition to a small cohort of Confidential Contacts, to broaden the reach of

this resource, ensuring easy and equitable access to staff groups across the organisation. The proposed Speak Up model is presented to the Board at **Appendix 4** for approval.

- 2.3.5** A proposed governance structure going forward from 1 April 2021 for our Whistleblowing processes was supported by the Corporate Management Team on 1 December and agreed by the Whistleblowing Oversight Group at their meeting on 16 December. It is presented to the Board today for their approval at **Appendix 5**.

As per the requirements of the Standards, it is proposed that quarterly Whistleblowing reports will be presented to the NHS Board via the Staff Governance Committee by our Whistleblowing Champion (supported by the Nurse Director as Executive Lead). Updates to Area Partnership Forum, Area Clinical Forum and Corporate Management Team will be provided as appropriate to ensure they are sighted on operational matters.

2.3.6 Quality/patient care

NHS Ayrshire and Arran aims to promote a culture of psychological safety where all our staff feel safe to speak up about any issues or concerns. The implementation of the Whistleblowing Standards in Ayrshire & Arran and our associated Speak Up Model will be in keeping with this ambition and will aim to instil absolute confidence in the fairness of the procedures through which staff concerns are raised.

The approach to handling concerns ensures that learning and improvement is progressed for all upheld concerns. Learning from patient care concerns raised by staff presents the opportunity to change practice and improve patient experience and outcomes.

2.3.7 Workforce

In 2019, Corporate Management Team approved the funding of a 37.5 Band 5 Corporate Governance/Whistleblowing Co-ordinator post which would support implementation of the standards and ongoing co-ordination of Whistleblowing processes. Further to delays due to COVID, job description development and evaluation, this post is due to commence in January 2021.

In terms of the establishment of a Cohort of Speak Up Advocates, applicants will require to undertake these duties in addition to their substantive roles and there will be no remuneration associated with these roles. However, departments will require to offer time back to staff members who require to attend meetings out with their normal working hours.

There are no further workforce impacts at this time.

2.3.8 Financial

In 2019, Corporate Management Team approved the funding of a 37.5 Band 5 Corporate Governance/Whistleblowing Co-ordinator post which would support the implementation of the standards and ongoing co-ordination of Whistleblowing processes. Further to delays due to COVID, job description development and evaluation, this post is due to commence in January 2021.

In terms of the establishment of a Cohort of Speak Up Advocates, applicants will require to undertake these duties in addition to their substantive roles and there will be no remuneration associated with these roles. However, departments will require to

offer time back to staff members who require to attend meetings out with their normal working hours.

There are no further financial impacts at this time.

2.3.9 Risk assessment/management

If staff do not have absolute confidence in the fairness of the procedures through which their concerns are raised, or do not feel assured that concerns raised will be acted upon, there is a risk that they will not raise valid concerns about quality, safety or malpractice. The opportunity to investigate and address these concerns will have been lost, with potentially adverse impact on quality, safety and effectiveness of services.

There is also a wider risk to organisational integrity and reputation, if staff do not believe they will be listened to and do not feel senior leaders in NHS Ayrshire and Arran are fulfilling the NHS Ayrshire and Arran Values of 'Caring, Safe and Respectful' and promoting a culture of Psychological Safety.

2.3.10 Equality and diversity, including health inequalities

The National Whistleblowing Standards will come into effect in all NHS Boards across Scotland on 1 April 2021. To this end, an Equality Impact Assessment has been completed Nationally by the Independent National Whistleblowing Officer (INWO).

NHS Ayrshire & Arran are also carrying out a local Equality Impact Assessment as part of the implementation.

2.3.6 Other impacts

- Best value
 - Governance and accountability
 - Performance management
 - The delivery of an effective process for whistleblowing concerns will support the Board's commitment to safe, effective and person-centred care.
- Compliance with Corporate Objectives
 - Create compassionate partnerships between patients, their families and those delivering health and care services which respect individual needs and values; and result in the people using our services having a positive experience of care to get the outcome they expect.
- Local outcomes improvement plans, community planning etc
 - Effective handling of concerns supports the delivery of the Healthcare Quality Strategy.

2.3.7 Communication, involvement, engagement and consultation

The National Whistleblowing Standards will come into effect in all NHS Boards across Scotland on 1 April 2021. The WBOG and WBIG have been liaising closely with the INWO in the application of these standards.

2.3.8 Route to the meeting

This has been previously considered by the following groups as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report.

- Whistleblowing Oversight Group – 6 November 2020
- Corporate Management Team – 1 December 2020
- Whistleblowing Oversight Group – 16 December 2020

2.4 Recommendation

This paper is for Decision. Board members are asked to:

1. note the work underway to implement the National Whistleblowing Standards in NHS Ayrshire and Arran
2. approve the proposed governance structure for Whistleblowing
3. approve the proposed 'Speak up' model and approach to appointing to these roles.

3. List of appendices

- Appendix No 1: Whistleblowing Oversight Group, Terms of Reference
- Appendix No 2: Whistleblowing Implementation Group, Terms of Reference
- Appendix No 3: Governance Structure – Implementation of Whistleblowing Standards
- Appendix No 4: Proposed Speak Up Model
- Appendix No 5: Proposed Governance Structure for Whistleblowing

Whistleblowing Oversight Group (WBOG)

Terms of Reference

Introduction

In early 2020 the [Public Services Reform \(the Scottish Public Services Ombudsman\) \(Healthcare Whistleblowing\) Order 2020](#) was published and introduced significant changes to the way in which the NHS in Scotland handles whistleblowing concerns. The order also gave Scottish Public Services Ombudsman the role of Independent National Whistleblowing Officer (INWO).

On 17 January 2020, the Independent National Whistleblowing Officer (INWO) shared the draft [National Whistleblowing Standards](#) with Boards across NHS Scotland, and in October 2020, the 'go live' date for the standards coming into effect across NHS Scotland was confirmed as 1st April 2021.

In July 2020, a Whistleblowing Steering Group (now the Whistleblowing Oversight Group) was established to oversee and co-ordinate implementation of the standards in NHS Ayrshire and Arran.

Remit

The WBOG will have responsibility for the following on behalf of the organisation:

1. To oversee the formulation of an action plan that will see the successful implementation of the National Whistleblowing Standards in NHS Ayrshire and Arran, including a robust training programme for all staff and managers and a local workforce model of confidential contact/whistleblowing advocates.
2. To develop a communications and engagement plan that considers the best way to communicate with all staff groups in order to promote a culture of psychological safety where staff are confident to speak up about concerns, and to raise awareness of the new standards and how to access same.
3. To establish an implementation group that will operationalise the work plan and communications plan.
4. To review and propose membership of the implementation group to ensure appropriate representation and support is in place to deliver what is required.
5. To receive regular updates on the progress against the work plan and communications plan and to provide leadership and direction to the implementation group as required.
6. To support, oversee and enable the quarterly reporting requirement to Board via the Staff Governance Committee
7. To ensure CMT, APF and ACF are kept update on progress regularly
8. To ensure regular liaison with the INWO to ensure that the local approach is in line with the national direction.

Membership

The group membership will comprise:

- Nurse Director/Executive Lead for Whistleblowing (Chair)
- Non-Executive Whistleblowing Champion Director
- HR Director
- Assistant HR Director - People Services
- Employee Director

- Chair of Area Clinical Forum
- Communications Assistant
- Head of Corporate Governance
- Business Manager – Nurse Directorate
- Head of Medical Photography
- Chair of Whistleblowing Implementation Group

The Chair may add or co-opt other members to the group as indicated.

The Nurse Director/Executive Lead for Whistleblowing will Chair the meeting. In the event of planned absence, the Chair will nominate a Chair for the meeting. Should there be an unexpected absence by the Chair, the substantive members present will agree the Chair for that meeting to allow business to be progressed.

Quorum and Decision Making

To ensure business is progressed timeously, members are expected to prioritise attendance at this meeting. For quorum to be achieved, a minimum of 6 members must be in attendance, including representation from HR and the Nurse Directorate.

Agreement and decisions are expected to be reached by consensus.

Frequency of Meetings

The WBOG will meet monthly; however meetings may be convened more frequently by the Chair if indicated.

Authority

The group may delegate work to the implementation group and has the authority to review membership of this group to ensure that the appropriate representation is in place to deliver what is required.

Conduct of Meetings

The current work plan will be circulated in advance of the meeting and will form the basis of the discussion. Where there is a need for a formal agenda, the agenda will be agreed with the Chair of the group and papers will be circulated in advance of the meeting.

The work plan will constitute a record of the meeting and will be circulated, normally within five working days, to the group.

Administration of Meetings

The Nurse Directorate Business Manager will arrange for the appropriate administration of the group.

Reporting

Reporting of whistleblowing activity is quarterly to the NHS Board via the Staff Governance Committee.

The WBOG will receive reports from the Whistleblowing Implementation Group (WBIG).

Whistleblowing Implementation Group (WBIG)

Terms of Reference

Introduction

In early 2020 the [Public Services Reform \(the Scottish Public Services Ombudsman\) \(Healthcare Whistleblowing\) Order 2020](#) was published and introduced significant changes to the way in which the NHS in Scotland handles whistleblowing concerns. The order also gave Scottish Public Services Ombudsman the role of Independent National Whistleblowing Officer (INWO).

On 17 January 2020, the Independent National Whistleblowing Officer (INWO) shared the draft [National Whistleblowing Standards](#) with Boards across NHS Scotland, and in October 2020, the 'go live' date for the standards coming into effect across NHS Scotland was confirmed as 1st April 2021.

In July 2020, a Whistleblowing Oversight Group (WBOG) was established to oversee and co-ordinate the implementation of the standards in NHS Ayrshire and Arran.

At their meeting on 2nd October 2020, the WBOG agreed that a Whistleblowing Implementation Group (WBIG) would be established to deliver the various strands of the project.

Remit

The WBIG will have responsibility for the following on behalf of the organisation:

1. To develop a robust implementation plan that underpins the Whistleblowing Work Plan and to successfully deliver the implementation of the National Whistleblowing Standards in NHS Ayrshire and Arran, including but not limited to the following:
 - To deliver a robust training programme for all staff and managers across the organisation
 - To ensure the necessary arrangements are in place with the following external services/partners, in line with the National Whistleblowing Standards:
 - IJBs
 - External Contractors
 - Primary Care Contractors
 - Higher Education Partners
 - Services with whom we have Service Level Agreements and Memorandums of Understandings
 - Volunteers
 - Agency Workers and Locums
 - Members undertaking Vocational Learning/Work Experience
 - To establish reporting mechanisms with the aforementioned external services/partners to ensure timely reporting in line with the requirement for a quarterly Whistleblowing report to the NHS Board.

2. To commission sub-groups as appropriate to take forward the specific actions as outlined above
3. To act as an advisory group to the WBOG and support them with the delivery of their work plan as required, for example:
 - Contribute to the delivery of a communications and engagement plan that considers how best to engage with all staff groups in order to promote a culture of psychological safety where staff are confident to speak up about concerns, and to raise awareness of the new standards and how to access same.
 - Contribute to the establishment of a local workforce model of confidential contacts/whistleblowing advocates who will be appropriately trained and skilled to provide advice and support to staff members who may wish to raise a possible whistleblowing concern
 - Contribute to the recruitment of a cohort of staff who are appropriately skilled and trained to undertake the role of investigators for Whistleblowing concerns
4. To provide regular updates on the progress against the implementation plan and communications plan to the WBOG.

Membership

The group will comprise of representatives from the following directorates/services:

Associate Nurse Director for Acute Services (Chair and representative for Acute Services)
South, East and North Health and Social Care Partnerships
Corporate Support Services (Including representative for National/Local Contracts)
HR – Training
HR – Agency/Locums
HR - Vocational Learning/Work Experience
Transformation and Sustainability - Representative for SLAs and MOUs
Volunteers
Higher Education – Nursing and AHPs
Higher Education – Medical
Communications
Primary Care
Risk Management - Datix system
Head of Corporate Governance
Business Manager – Nurse Directorate (on behalf of Nurse Director/Executive Lead for Whistleblowing)
Whistleblowing Co-ordinator - Project support and meeting administration) (not yet in post)
Finance
Public Health
Pharmacy
Staff Side
Equality and Diversity

The Chair may add or co-opt members to the group as indicated.

In the event of planned absence, the Chair will nominate a Chair for the meeting. Should there be an unexpected absence by the Chair, the substantive members present will agree the Chair for that meeting to allow business to be progressed.

Quorum and Decision Making

To ensure business is progressed timeously, members are expected to prioritise attendance at this meeting. For quorum to be achieved, a representative from each of the directorates/services must be in attendance, or must nominate a deputy to represent them in this capacity.

Agreement and decisions are expected to be reached by consensus.

Frequency of Meetings

The WBIG will meet fortnightly; however meetings may be convened more frequently by the Chair if indicated, or if indicated by the WBOG.

Authority

The group may delegate work to task and finish/short life working groups as required, but must retain clear oversight of this work and monitor progress.

Conduct of Meetings

The current work plan/implementation plan will be circulated in advance of the meeting and will form the basis of the discussion. Where there is a need for a formal agenda, the agenda will be agreed with the Chair of the group and papers will be circulated in advance of the meeting.

The implementation plan will constitute a record of the meeting and will be circulated, normally within five working days, to the group.

Where a formal note is required, this will be circulated, normally within five working days to the group.

Administration of Meetings

The Whistleblowing Co-ordinator will arrange for the appropriate administration of the group. (Note, the Whistleblowing Co-ordinator is not yet in post. In the meantime, the Nurse Directorate Business Manager will ensure the appropriate administration of the group)

Reporting

Escalation of any issues will be to the Whistleblowing Oversight Group.

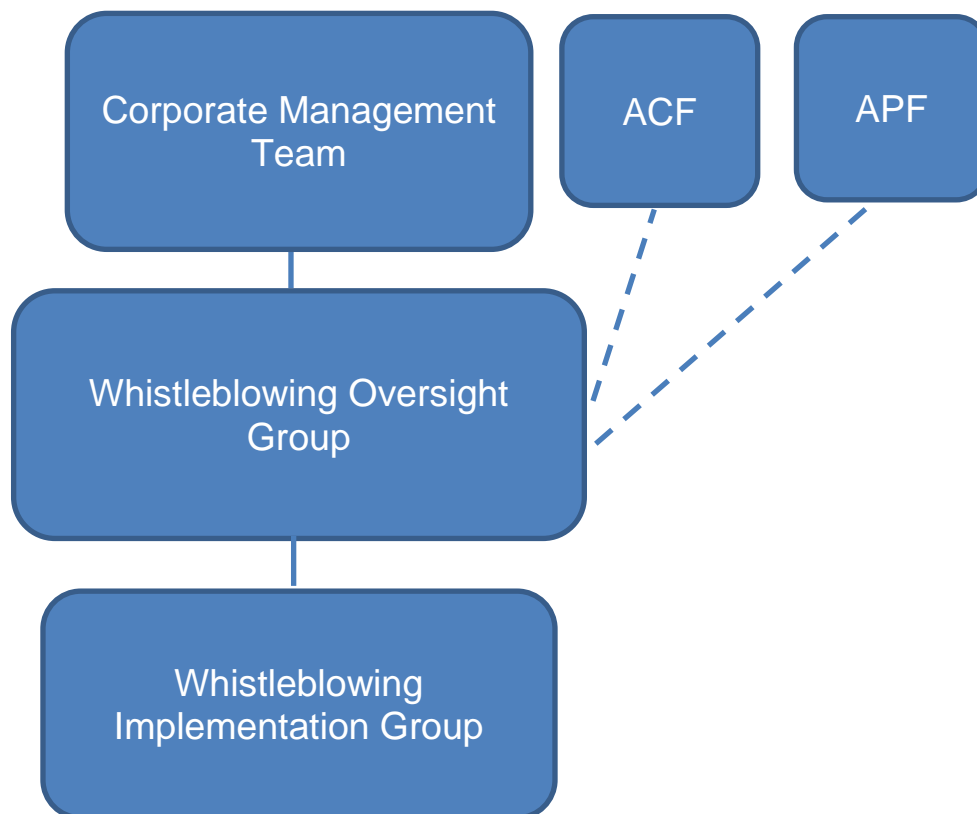
NHS Ayrshire and Arran – Whistleblowing Governance Architecture

Implementation of the National Whistleblowing Standards

It is proposed that the following governance structure is established to ensure robust governance and reporting arrangements **during the implementation stage.**

Regular reporting will be established from the Implementation Group to the Oversight Group, with a monthly update report submitted to CMT from the Oversight Group.

APF and ACF will also be kept updated of developments at appropriate junctures.





Speak Up Model Proposal

1 Purpose

- 1.1 The purpose of this paper is to present the NHS Board with a proposed 'Speak Up' model for NHS Ayrshire and Arran to promote a culture of psychological safety where all staff are confident to bring forward any concerns, and that is in keeping with the requirements of the new National Whistleblowing Standards which come into effect on 1st April 2021.
- 1.2 The Board are asked to approve the proposed model and support the approach to recruiting to these roles as set out in the paper.

2 Key Risks

- 2.1 If staff do not have absolute confidence in the fairness of the procedures through which their concerns are raised, or do not feel assured that concerns raised will be acted upon, there is a risk that they will not raise valid concerns about quality, safety or malpractice, which may include but are not limited to issues related to patient safety, poor practice, unsafe working conditions, fraud, changing or falsifying performance information, breaking any legal obligation or abusing authority. The opportunity to investigate and address these concerns will have been lost, with potentially adverse impact on quality, safety and effectiveness of services.
- 2.2 There is also a wider risk to organisational integrity and reputation, if staff do not believe they will be listened to and do not feel senior leaders in NHS Ayrshire and Arran are fulfilling the NHS Ayrshire and Arran Values of 'Caring, Safe and Respectful' and promoting a culture of Psychological Safety.

3 Assessment

3.1 Confidential Contact and Speak Up Advocate Roles:

The Standards state that:

"All organisations that deliver services for NHS Scotland must ensure that they provide staff with at least one point of contact who is independent of normal management structures (for the purposes of this role) and who has the capacity and capability to be an initial point of contact for staff from across the organisation (or their part of the organisation) who want to raise concerns.....The confidential contact must support staff by providing a safe space to discuss the concern, and assist the staff member in raising their concern with an appropriate manager.

The Confidential Contact must also:

- *Work with the whistleblowing champion to ensure that all staff are aware of the arrangements for raising concerns within their organisation;*

- *Promote a culture of trust which values the raising of concerns as a route to learning and improvement*
- *Through direct contact with frontline staff, ensure they are aware of and have access to the support services available to them when they raise concerns*
- *Assist managers in using concerns as opportunities for learning and improvement*
- *Work with the chief executive and those they have identified to oversee application of the Standards, to ensure the Standards are functioning at all levels in the organisation*

Confidential contacts must have the appropriate skills to carry out a role that requires significant interpersonal skills and the capacity to work with all staff..... This role is best suited to someone with experience of direct service provision rather than an HR representative.

NHS Boards may choose to broaden the reach of their confidential contacts, by recruiting whistleblowing mentors, or similar roles. These staff members would work with the confidential contact to broaden access to raising concerns, and assist with raising awareness across the organisation. It is up to each NHS board to develop such roles that meet the needs of their own structure and organisational requirements.”

3.2 The Corporate Management Team at their meeting on 01 December 2020, considered a number of options brought to them by the Whistleblowing Oversight Group as detailed below; and these are now presented to Board with a recommended option for approval at section 4.

3.2.1 Option 1

Recruitment of one or more Confidential Contact who would fulfil the requirements of the role as set out in the standards and in keeping with the NHS Ayrshire and Arran ambition to promote a culture of psychological safety.

The Confidential Contact/s would be senior members of staff who would have the appropriate skills to carry out this role.

3.2.2 Option 2

Recruitment of one or more Confidential Contact/s as set out in option 1.

In addition to this, internal recruitment of a cohort of Speak Up Advocates who would work alongside the confidential contact/s to broaden access to raising concerns, ensuring that we can provide access to a contact out with the service/directorate of the member of staff raising a concern, and assist with raising awareness across the organisation.

The Advocate role would mainly involve signposting but could include going beyond this when appropriate to make an initial link with the relevant manager, and if necessary provide some support by attending a meeting along with the staff member. The Advocate would not however perform the role of a staff representative or speak on the staff member's behalf.

Advocates could escalate issues to the Confidential Contact/s if necessary.

3.2.3 Option 3

NHS Ayrshire and Arran will retain their existing Confidential Contacts, namely Medical Director, HR Director, Nurse Director and Director of Finance, who are appropriately skilled and trained to undertake this role (additional training would be provided in terms of the new National Whistleblowing Standards and Once for Scotland Policy).

The Confidential Contacts would fulfil the requirements of the role as set out in option 1.

3.2.4 Option 4

NHS Ayrshire and Arran will retain the existing Confidential Contacts, namely Medical Director, HR Director, Nurse Director and Director of Finance, who are appropriately skilled and trained to undertake this role (additional training would be provided in line with the requirements of the standards).

The Confidential Contacts would fulfil the requirements of the role as set out in option 1.

In addition to this, a cohort of Advocates will be recruited to support the confidential contacts, as set out in option 2.

3.3 Whistleblowing Champion Role:

Our Speak Up Model also needs to take into account the role of the Non-Executive Whistleblowing Champion. According to the Standards *“the Whistleblowing Champion role is predominantly an assurance role which helps NHS Boards comply with their responsibilities in relation to whistleblowing”*.

In particular they are asked to seek assurance that :

- Staff are actively encouraged and supported to report any concerns about patient safety or malpractice they may have (as described in section 2.1);
- Boards have systems in place that are used and monitored appropriately to ensure that all reported concerns are investigated in a timely and appropriate way;
- The staff member (the whistleblower), and any other staff member implicated in the reported concern, is supported and updated on progress throughout the process;
- The outcome is fed back to the member of staff who raised the concern, and any resultant recommended actions are progressed by the Board;
- Any detriment or potential detriment to the whistleblower is properly addressed

At this time it is not considered appropriate that the whistleblowing champion takes on the role of confidential contact, as their non-executive role requires them to be separate and distinct from the operational processes of implementing the Standards. It would not be possible for the whistleblowing champion to provide the Board with assurance whilst being part of the operational processes.

4.0 Recommendation

- 4.1 The Corporate Management Team considered that the proposed model in option 2 would be the most appropriate for Ayrshire and Arran; namely to have a cohort of Confidential Contacts who are appropriately skilled and experienced to undertake this role, and recruit a cohort of 'Speak Up Advocates' who will support and broaden the reach of the Confidential Contacts and provide ease and equity of access for staff groups across the organisation.

Option 2 is the proposed Speak Up Model recommended by the Whistleblowing Oversight Group for approval by the NHS Board.

5.0 Further action underway to support implementation:

- 5.1 Further consideration is being given to the identification of suitable individuals who will undertake the Confidential Contact role. The Whistleblowing Oversight Group felt that our Staff should be asked who they think would be best placed to undertake this role, as a trusted individual who would be approachable to staff who wish to raise concerns. Work is currently underway to canvass the views of the wider staff group, via Area Clinical Forum, Area Partnership Forum and the Whistleblowing Implementation Group.
- 5.2 Clear role descriptors are being developed for the Speak Up Advocates and an open recruitment and selection campaign will be undertaken across the organisation to seek personal statements/expressions of interest from staff members with the desired skillset. The roles will be undertaken in addition to existing roles and staff members must be supported by managers to be released from duties to undertake their Speak Up Advocate roles and given time back when their advocate duties require to be undertaken out with normal working hours.
- 5.3 Training is being developed nationally via the INWO office and work is underway through the Whistleblowing Implementation Group to develop a framework for delivering training to all staff and managers when the national training modules and materials are available. This training will be complemented by further local training if deemed appropriate to promote Ayrshire and Arran's approach to psychological safety. As part of this training programme, specific training will also be provided for Speak Up Advocates. Training will be provided to the Confidential Contact/s on the new Whistleblowing Policy when this is available.
- 5.4 An awareness raising campaign about the new Standards has already begun with messages going out via Daily Digest and/or our weekly eNews.

The recruitment of the Speak Up Advocates will be followed by a more formal communication programme during February and March 2021 in anticipation of the Standards going live on 01 April 2021.

Guidance/signposting material will be developed in conjunction with the training as required, dependent on what is provided nationally. This will clearly set out all the mechanisms by which staff can raise concerns and pull together examples of

matters that could be raised (initially) with a confidential contact or advocate. The key messages underpinning the campaign will be:

- Ayrshire and Arran's current ambition to promote a culture of psychological safety where all staff feel safe to speak up about any issues
- We (the Confidential Contacts/ Speak Up Advocates) will listen to you and help you identify where best to take your concern; this may include making clear what the existing mechanisms/routes are;
- If you are not confident to pursue it yourself we will come to the meeting with you;
- We can be flexible in where and when we meet you (to maximise accessibility and confidentiality).

5.5 A suitable network and/or forum will be established to ensure that the Speak Up Advocates and Confidential contact/s receive support as peer groups, and Speak Up Advocates receive appropriate support and supervision via the Confidential Contact/s.

NHS Ayrshire and Arran

Proposed Whistleblowing Governance Architecture from 1 April 2021

Following implementation of the new Standards in April 2021 there is a requirement to commence quarterly reporting to the NHS Board.

The following governance structure is proposed to the NHS Board for approval at the meeting on 2 February 2021

Each quarterly report to the NHS Board will need to take into account at least 20 working days after each quarter end. For example - 20 working days after 30 June (which is Q1 end date) is 28 July; this means that the first NHS Board quarterly whistleblowing report will be presented to the August 2021 NHS Board meeting.

It is proposed to NHS Board that:

- As for other delegated governance elements of NHS Board business; the quarterly reports will be presented by the Non-Executive Director Whistleblowing Champion, in partnership with the Nurse Director/Executive Lead for Whistleblowing.
- The governance route to the NHS Board will be via the Staff Governance Committee.
- The Whistleblowing Oversight Group remains in place to maintain oversight of the whistleblowing policy and processes; and support and enable the reporting required to the Staff Governance Committee and onto the NHS Board.

