

NHS Ayrshire & Arran

Meeting:	Ayrshire and Arran NHS Board
Meeting date:	Monday 12 August 2024
Title:	Whistleblowing Annual Report 2023-2024
Responsible Director:	Jennifer Wilson, Nurse Director
Report Author:	Karen Callaghan, Corporate Governance Coordinator

1. Purpose

This is presented to the NHS Board for:

- Decision

This paper relates to:

- Scottish Government policy

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

- Safe
- Effective
- Person Centred

2. Report summary

2.1 Situation

The NHS Board is asked to receive and discuss this report on organisational activity in relation to whistleblowing for 2023-2024.

2.2 Background

Each NHS Board is required to provide an annual report to provide assurance that the Board has discharged its role as set out in The National Whistleblowing Standards.

Once approved by the NHS Board, the report is submitted to the Independent National Whistleblowing Officer (INWO).

2.3 Assessment

The report summarises and builds on the quarterly reports produced by the board, including performance against the requirements of the Standards, Key Performance Indicators (KPIs), the issues that have been raised and the actions that have been or will be taken to improve services as a result of concerns. The report provides a

range of information to provide assurance to Governance Committee and Board members on our implementation and compliance with the Standards.

Key Messages

- An 'At a glance' infographic provides a summary of key findings for 2023/24 at the beginning of the report.
- Several areas of improvement identified and implemented following whistleblowing investigations.
- A short anonymous survey was used to provide a snap shot of staff awareness on how to raise concerns. The outcome being that 70% of staff are confident on how to do so.
- To date 66% of managers have accessed and completed the Turas Learn modules.
- Following a benchmarking exercise against other territorial Boards 2022/23 annual reports, it is reassuring to note the number of stage 1 and 2 concerns received by Boards of a comparable size to NHS Ayrshire & Arran are low, this provided assurance the NHS Ayrshire and Arran are not an outlier.
- Speak Up Week afforded the opportunity to further promote the whistleblowing process, the new Confidential Contacts, Speak Up Advocates and the training available.
- Our plans for 2024-2025 and exploring new ways to gain feedback and improve communication across all staff groups.

2.3.1 Quality/patient care

An open and transparent whistleblowing process ensures good-quality outcomes for cases raised through a thorough but proportionate investigation. The approach to handling whistleblowing concerns ensures that learning and improvement is progressed for upheld whistleblowing concerns and are shared across all relevant services.

2.3.2 Workforce

The Standards support our ambition for an open and honest organisational culture where staff have the confidence to speak up and all voices are heard. This is focused through our organisational Values of 'Caring, Safe and Respectful' and promoting a culture of psychological safety.

2.3.3 Financial

There are no financial implications as a result of this annual report.

2.3.4 Risk assessment/management

Failure to have in place an open and honest whistleblowing process that delivers the requirements of The National Whistleblowing Standards could have an impact as valid concerns about quality, safety or malpractice may not be raised. The opportunity to investigate and address these concerns will have been lost, with potentially adverse impact on quality, safety and effectiveness of services in NHS Ayrshire & Arran. 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 & Arran are fulfilling the organisation's Values of 'Caring, Safe and Respectful' and promoting a culture of Psychological Safety.

2.3.5 Equality and diversity, including health inequalities

This is an annual report on organisational activity in relation to whistleblowing and an impact assessment is not required for the report. A local Equality Impact Assessment (EQIA) which assesses the impact of the Standards on staff and those who provide services is available on our [public facing webpage](#).

2.3.6 Other impacts

This will support the requirements of the National Whistleblowing Standards.

- **Best value:** Governance and accountability and Performance management. The delivery of an effective process for whistleblowing concerns will support the Board's commitment to safe, effective and person-centred care. Effective handling of concerns supports the delivery of the Healthcare Quality Strategy .
- **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.

2.3.7 Communication, involvement, engagement and consultation

There is no requirement for formal engagement with external stakeholders to produce this annual report.

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 on 11 July 2024
- Staff Governance Committee on 01 August 2024.

2.4 Recommendation

Decision. NHS Board Members are asked to approve this Annual Report on organisational activity in relation to whistleblowing complaints April 2023 – March 2024 and confirm they are assured by the performance reported and future plans to review and improve our processes in accordance with the Standards.

3. List of appendices

Appendix 1 – NHS Ayrshire & Arran Whistleblowing Annual Report 2023-2024.



Whistleblowing Annual Report 2023-2024



Author: Karen Callaghan
Corporate Governance & Whistleblowing Coordinator
Updated 03/07/2024

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Introduction

This is the third NHS Ayrshire & Arran annual report which has been produced in line with the National Whistleblowing Standards (the Standards). It has been another interesting and busy year as we continue to learn from each concern that is raised and taken forward to investigation.

Since the go-live date of the Standards on 1 April 2021, an agreed process has been in place in NHS Ayrshire & Arran (NHSAA) to gather Whistleblowing information raised across all NHS Services to which the Standards apply. Within NHSAA, anyone who provides a service for NHSAA can raise a concern about the delivery of a health service using the same reporting mechanism which is in place for those staff employed by NHSAA. This includes former employees, agency workers (and others on short or insecure contracts such as locums and bank staff), contractors (including third-sector service providers), trainees and students, volunteers, non-executive directors, and anyone working alongside NHS staff, such as our colleagues in health and social care partnerships.

Whistleblowing is an ethical and moral thing to do, and NHSAA is supportive of any member of staff who raise concerns through this process. The decision to whistleblow is rarely taken lightly, and we in NHSAA are committed to offering a compassionate and objective whistleblowing service. Whistleblowing is an important form of feedback and provides the opportunity to receive direct and candid accounts of staff concerns. This in turn offers a key opportunity to learn and strive for improvement. Whistleblowing can also help the organisation in identifying risks and mitigating against any risks identified. We recognise that whilst risks can be to the service users, they can also be to the service providers/the organisation itself.

This annual report provides details of whistleblowing concerns raised across the organisation by staff and those who provide services on behalf of NHSAA. This will demonstrate our performance in the key performance indicators as required by the INWO and includes key areas of whistleblowing handling, as well as highlighting outcomes and providing more detail on whistleblowing themes. Over time, this approach will illustrate trends and more importantly, allow us to evidence necessary improvement and learning in response to the trends and themes demonstrated.



Jennifer Wilson, Nurse Director
Executive Lead for Whistleblowing

1. Background

All NHS organisations and providers in Scotland are required to follow the National Whistleblowing Principles and Standards. The Principles and Standards explain what is expected of NHS organisations and contractors about their handling of whistleblowing concerns. [The National Whistleblowing Standards](#) set out how the Independent National Whistleblowing Officer (INWO) expects all NHS service providers to handle concerns that are raised with them and which meet the definition of a 'whistleblowing concern'.

As part of the 'Once for Scotland' Workforce Policies Programme, [the Whistleblowing Policy](#) directs NHS Scotland Boards to The Whistleblowing Standards (The Standards).

Under The Standards all NHS Scotland Boards are required to publish their Annual Whistleblowing Report, which must also be shared with the INWO.

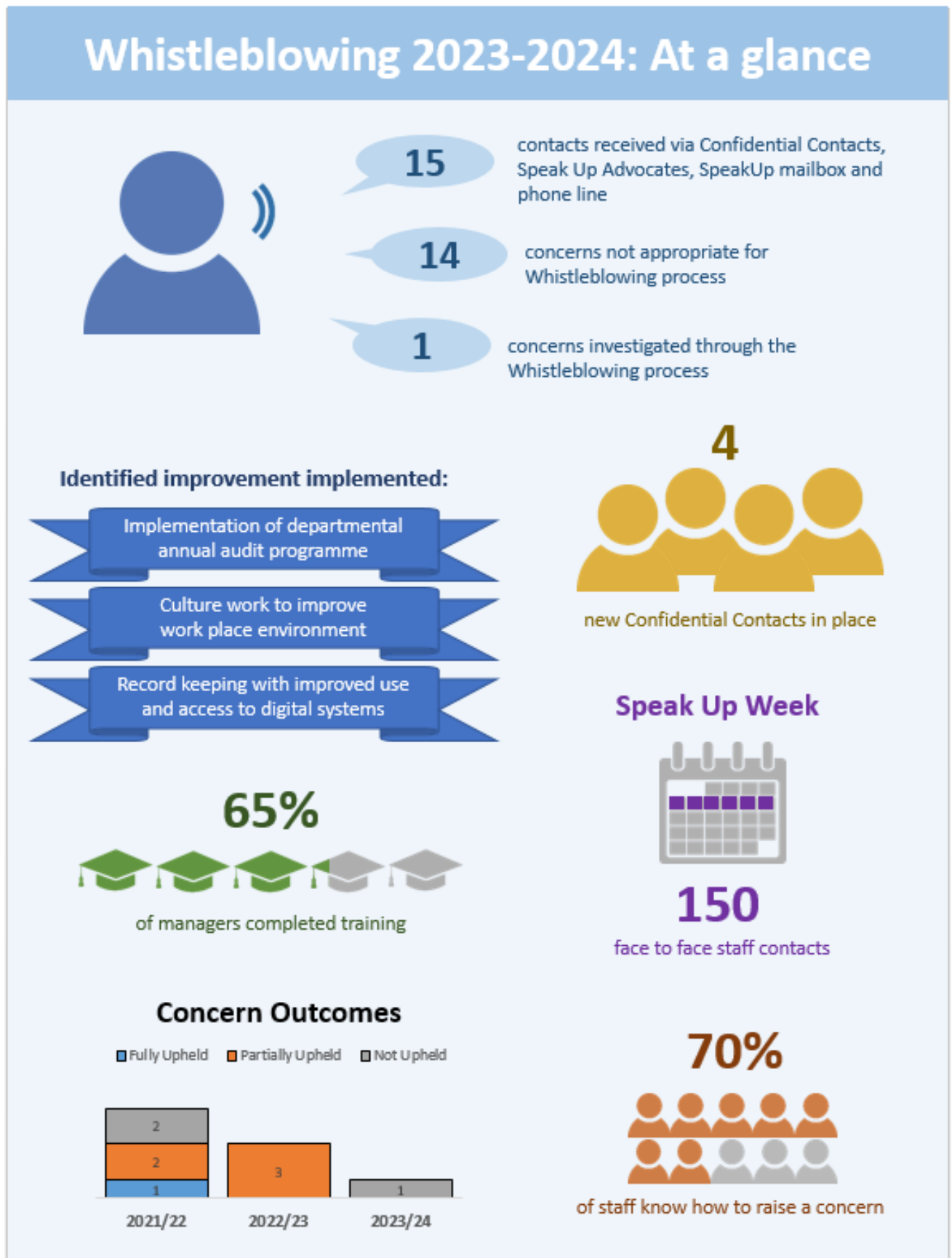
In order to deliver successful implementation of the Standards across the organisation and our partners, our Nurse Director, as Executive Lead, initially formed a Whistleblowing Steering Group (WBSG) to develop an implementation programme. This group included appropriate Directors, the Board's Non-Executive Whistleblowing Champion, the Employee Director and Area Clinical Forum Chair to ensure wide representation. As the work progressed this group developed into the Whistleblowing Oversight Group supported by an Implementation Group to deliver the detailed implementation programme. This implementation group involved sector leads, Nurse Director and Corporate Governance team representatives.

NHS Ayrshire & Arran successfully implemented The Standards, with the majority of actions completed by the publication date of 1 April 2021, signed off as complete at the end of June 2021. The Implementation Plan included a detailed Communication and Training plan to support the roll out of The Standards across the organisation.

As part of this implementation NHS Ayrshire & Arran developed the current Speak Up model of Confidential Contacts and Speak Up Advocates. This includes a dedicated Speak Up Helpline telephone number and dedicated email contact. Access to the helpline and mailbox is limited to ensure that confidentiality is maintained for those who require assistance or wish to raise a concern.

Following implementation it was agreed to retain the Whistleblowing Oversight Group (WBOG), when the implementation team stood down. The WBOG continue to meet quarterly to provide oversight of our processes and systems and to ensure compliance with The Standards is maintained, recognising that this is a learning process. The WBOG includes the Executive Lead for Whistleblowing and our Whistleblowing Champion, the Employee Director and representation from HR and Corporate Governance. Required quarterly and annual performance reports are provided to our Staff Governance Committee and NHS Board meetings to provide assurance that the organisation is delivering the requirements of the Standards.

2. At a glance



3. Learning, changes or improvements to service or procedures (KPI-1)

3.1 NHS Ayrshire & Arran is committed to learning and improving from whistleblowing complaints. For each complaint that is upheld or partially upheld a documented improvement plan is put in place to address any learning. The improvement plan is agreed by the Director responsible for commissioning the investigation under the standards with progress monitored through the appropriate governance route. We recognise that system-wide learning, changes or improvements to services can be limited by the need to maintain confidentiality of individual whistleblowers.

Although the concern received in 2023/24 was not upheld learning actions were identified and an improvement plan was put in place to address the actions.

Table 1 below shows the numbers and status of improvement and learning plans from 2021 - 2024.

Year	Number of Improvement Plans		Number of Learning Plans	
	In Progress	Closed	In Progress	Closed
2021-2022	-	4	-	1
2022-2023	2	1	-	-
2023-2024	1	-	-	-

Table 1

It is worth noting that two of the improvement/action plans from 2022/23 remain open. Progress continues to be monitored through Directorate Governance routes until such times as the Investigation Commissioner is satisfied that all actions have either been completed or have moved into a business as usual process. Feedback on closure is provided to the Whistleblowing Oversight Group.

3.2 Identified Improvements

To date recommendations from investigations closed in 2023/24 have resulted in:

- Improvement to local staff induction and training support
- Work place environments i.e. increased work space and introduction of agile working.
- Review of departmental annual leave processes
- Implementation of departmental annual audit programme
- Record keeping with improved use and access to digital systems
- Improved communication within teams
- Departmental training programme for managers
- Protected learning time for staff
- Review of departmental risk assessments
- Culture work to improve work place environment

- Review of staff skill mix
- Review of staff workload
- Introduction of Wellbeing sessions for staff
- Improved staff knowledge on use of HR policies to support staff

3.3 System Wide Learning

- Ensure Lead Investigators have the capacity to undertake and complete investigations in a timely manner.
- Ensure Lead Investigators are aware of their responsibility to inform the Corporate Governance Coordinator of any leave planned or otherwise that will impact on the progress of the investigation.
- Consideration to be given to buddying experienced Lead Investigators with less experienced.
- Consideration to be given to the content of the stage 2 outcome letter with regard the level of explanation and information provided. Responses to include information on how the investigation was undertaken, the outcome, recommendations and explanation when concerns are not upheld.

4. Experience of individuals raising concern/s (KPI-2)

All those who raise concerns are given the opportunity to provide feedback, through an anonymous survey, on their experience of using the Whistleblowing procedure in order that we can learn and make any improvements in our processes as appropriate. As at the 31 March 2024 no feedback has been received from those involved in the process where the investigations were closed during 2023/24.

Feedback will be gathered from all those involved in the whistleblowing process. This will aid the improvement of the process and identify areas of improvement and learning.

5. Level of staff perception and awareness and training (KPI-3)

5.1 Staff perception and awareness

NHS Ayrshire & Arran have continued to raise awareness of the Standards with staff in 2023/24. It is difficult to quantify staff perceptions, however there has been a wide-ranging communication exercise across the organisation. This has included:

5.2 Speak Up Week - October 2023:

- Speak Up Week provided an opportunity to engage staff about the benefits of speaking up and the difference it can make within the NHS in Scotland. It was also an opportunity to raise awareness about local arrangements for speaking up and to promote the role of our Confidential Contacts and Speak Up Advocates. The overall theme being the benefits of speaking up.

- Information on Speak Up Week was disseminated to staff prior to the event as a Stop Press communication which was included in the eNews and Daily Digest. It was also emailed directly to all managers and staff. The Stop Press included details of where staff could access information online and in person at six location across the organisation, this included Acute and Health and Social Care Partnership sites.
- Approximately 150 staff visited the face to face sessions which were supported by the Confidential Contacts, Speak Up Advocates and Whistleblowing Champion. Staff were provided information on how to raise a concern and who they could speak with. Information shared included information about the new Confidential Contacts, the Speak Up Advocates and the Whistleblowing process. The response from staff in relation to raising concern was generally positive and staff welcomed the information about Confidential Contact and the Speak Up Advocates and were reassured that any contact would be confidential.
- An Ask me Anything Session was held on MS Team, led by Jennifer Wilson, Nurse Director and Whistleblowing Lead who was supported by Sukhomoy Das, Board Non-Executive Whistleblowing Champion and Ewing Hope, Employee Director. The session went well and those who attended were engaged in the conversation and asked appropriate questions.
- The Confidential Contacts and Speak Up Advocates highlighted the importance of Speaking up to their colleagues within their department.
- A short anonymous survey was used to provide a snap shot of staff awareness on how to raise concerns. The outcome being that 70% of staff are confident on how to do so. This is an increase of 13% on the previous year as shown in chart 1.

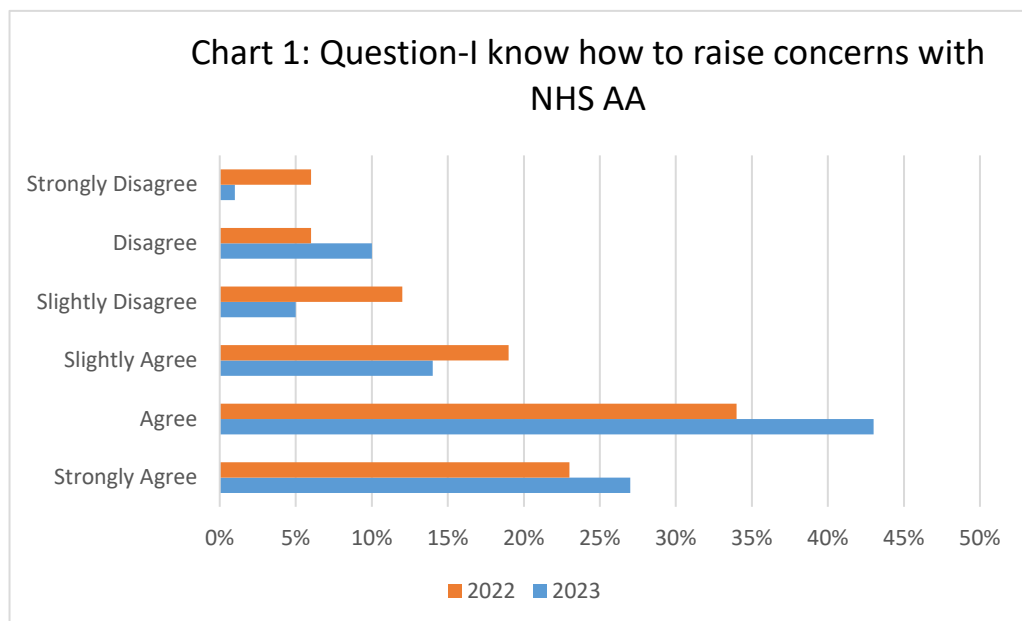


Chart 1

5.3 Other methods:

- Communications via Daily Digest and e-News promoting raising concerns in NHS Ayrshire & Arran and guidance on how to raise a concern.

- Raising awareness by attending team meetings, development session and recruitment events.
- Internal and external web pages for Whistleblowing are available and updated. Internally on the organisation's [Athena intranet](#) with a one-click access button enabling easy access for users and a Whistleblowing web page on the [NHSAA external website](#). The pages provide a wide range of information on the requirements of The Standards including guidance for users. The external page ensures access for all those who can raise a concern through the Standards.
- A Sway communication was shared across the organisation via Daily Digest, eNews and by email to the 800+ line managers, to introduce and raise awareness of the new Confidential Contacts.

5.4 Training

Training is available through NES Turas Learn for anyone who provides services on behalf of the NHS in Scotland, including students, contractors and volunteers. This provides learning on the National Whistleblowing Standards and the role of the Independent National Whistleblowing Officer (INWO).

We will continue to monitor uptake, effectiveness and appropriateness of training and will review and refine, as required. Through our communications on whistleblowing and how staff can raise concerns in general, we continue to promote the TURAS learning modules. To date 66% of managers have accessed and completed the Turas Learn modules. A further 25% of managers have accessed but not yet completed. The organisation is continuing to encourage users to complete the appropriate modules through regular communications. Line Managers are required to complete the appropriate modules as mandatory learning.

This will continue to be developed and communicated through our Organisation and Human Resource Development team including through leadership programmes.

The Corporate Induction programme for new staff joining the organisation contains a dedicated section on whistleblowing and raising concerns as does the Manager Development Support programme.

All planned Organisational Development sessions focus on culture and are designed to promote our desired culture of openness and psychological safety which includes reference to the Whistleblowing standards.

6. Whistleblowing concerns received (KPI-4)

6.1 Total concerns received 2021 – 2024

Chart 2 below demonstrates the total number of concerns raised since the implementation of the National Whistleblowing Standards in 2021. In total 29 concerns have been received through the Whistleblowing route. This is an increase in numbers when compared with numbers of whistleblowing concerns raised prior to publication of The Standards. This may be reflective of the work which has been undertaken to promote The Standards with staff feeling more confident in both the process of raising concerns and the support provided by the Standards and the INWO.

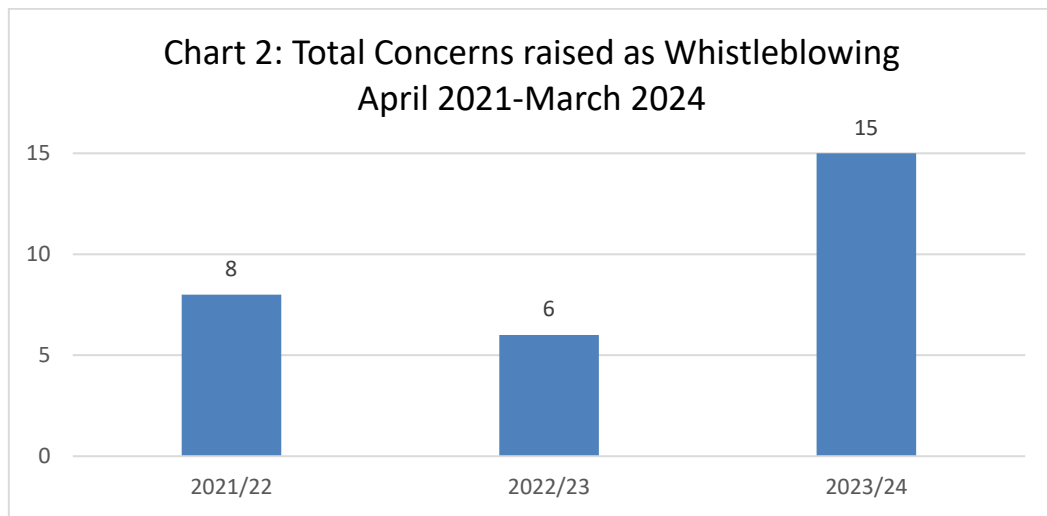


Chart 2

6.2 Concerns 2023/2024

Chart 3 below, shows the breakdown of concerns received in 2023-24. As of the 31 March 2024, NHS Ayrshire & Arran had received a total of 15 concerns, 14 were not appropriate for the whistleblowing process. Feedback was provided to those whose concerns were not taken forward as whistleblowing. They were directed to the most appropriate route and/or policy under which to pursue their concerns supported by the Confidential Contacts as appropriate. These were managed through the Boards HR policies, Fraud Liaison team and Health & Social Care Partnership for progress.

The one concern appropriate for whistleblowing was taken forward for full investigation at Stage 2 of the process.

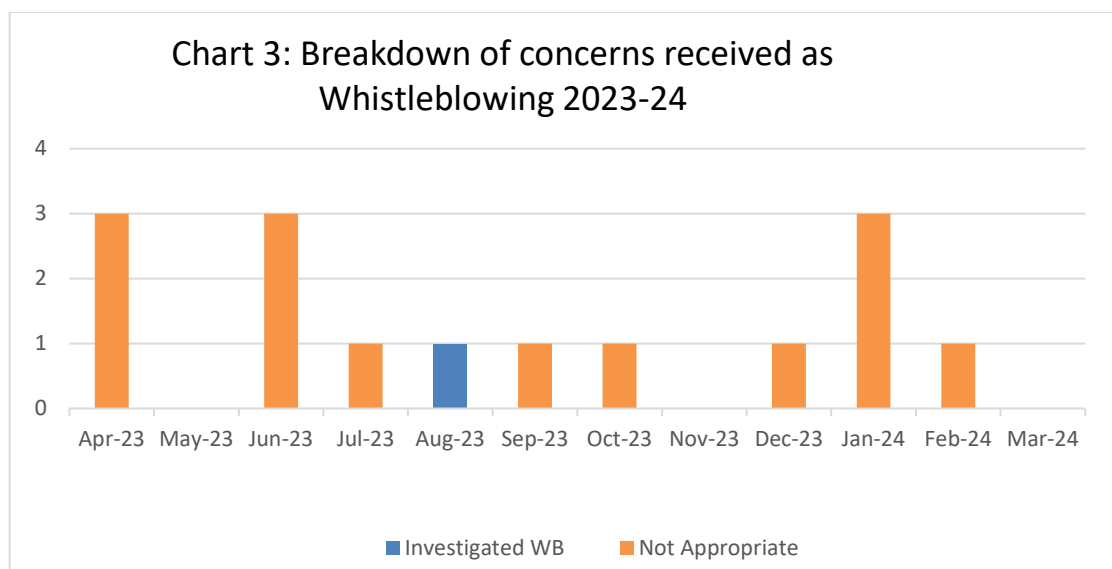


Chart 3

6.3 Benchmarking

As the number of Whistleblowing concerns received in NHS Ayrshire & Arran remain low we carried out a benchmarking exercise against other territorial Boards' annual reports

for 2022-2023 to review how we compared. Chart 4 below shows the number of concerns reviewed as whistleblowing at stage 1 and stage 2. It is reassuring to note the number of stage 1 & stage 2 concerns received by Boards of a comparable size to NHS Ayrshire & Arran are low, this provides assurance that NHS Ayrshire & Arran is not an outlier.

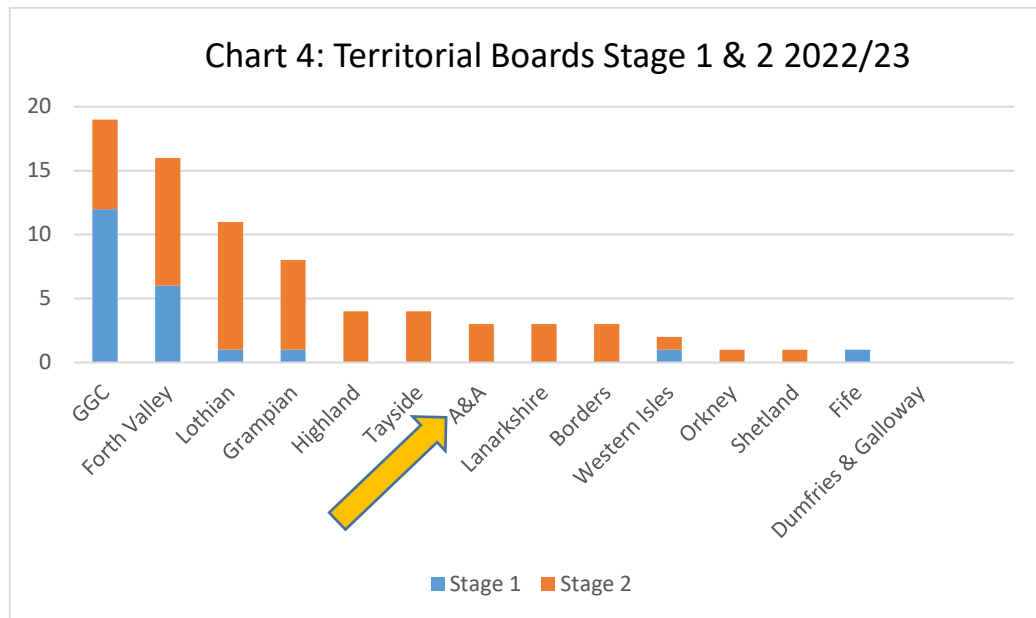


Chart 4

7. Concerns closed (KPI-5)

7.1 Concerns closed at Stage 1 and Stage 2

Concerns closed at Stage 1 and Stage 2	
Stage 1 Concerns	
Total number of Stage 1 concerns received	0
Percentage of Stage 1 concerns that were closed	N/A
Stage 2 Concerns	
Total number of Stage 2 concerns received	1
Percentage of Stage 2 concerns that were closed	100%

Table 1

7.2 Stage 1: as at 31 March 2023, no stage 1 concerns has been received. This is similar to last year and although the reason for this is not fully understood this may indicate that concerns are being dealt with under business as usual processes or that they are more complex and require to be raised directly under the stage 2 process.

7.3 Stage 2: as at the 31 March 2024, one stage 2 concern has been received and closed.

8. Concerns outcomes (KPI-6)

This section provides detail on concerns upheld, partially upheld and not upheld at each stage of the whistleblowing procedures.

8.1 Concern outcomes 2023/2024: Table 2 details the outcome of the concern closed as at the 31 March 2024, all concerns are closed.

Total Number Concerns 2023/24	Not Upheld		Partially Upheld		Fully Upheld		Total
Stage 1	-	-	-	-	-	-	-
Stage 2	1	1	100%	-	-	-	1

Table 2

8.2 Concern outcomes 2022/23: the three concerns which were ongoing and being investigated at 31 March 2023 were subsequently closed at stage 2 in 2023/24. All three concerns were recorded as being partially upheld. This means that following investigation and review of evidence some of the concerns raised in these whistleblowing case were upheld and some were not.

8.3 Concern outcomes 2021- 2024: Chart 5 shows the outcome of all concerns investigated through the Whistleblowing process from 1 April 2021 to 31 March 2024.

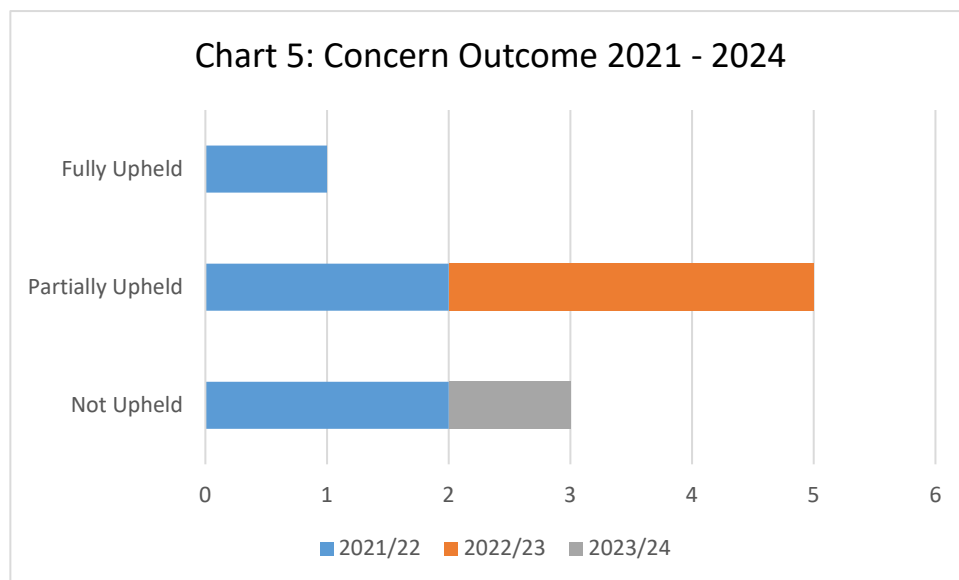


Chart 5

9. Average Response times (KPI-7)

- 9.1 Stage 1: as at 31 March 2024, no stage 1 concerns received.
- 9.2 Stage 2: as at 31 March 2024, one concern investigated and closed at stage 2 of the process. As shown in Table 3 the investigation period from receipt to closure was 183 days, this was due to the complex nature of the case.

Average response time in working days					
Stage 1 (5 days)		Q1	Q2	Q3	Q4
	Average time in working days for responses	-	-	-	-
	No of cases closed at stage 1 within timescale as %	-	-	-	-
	No of stage 1 cases extended	-	-	-	-
Stage 2 (20 days)		Q1	Q2	Q3	Q4
	Average time in working days for responses	-	183	-	-
	No of cases closed at stage 2 within timescale as %	-	0%	-	-
	No of stage 2 cases extended	-	1 (100%)	-	-

Table 3

- 9.3 Chart 6 shows the average days to a full response for stage 2 concerns for 2023/24 compared to previous years. Due to the complexity and the low number of concerns the average days to response remains high. It is worth noting two of investigations undertaken in 2022/23 were impacted by the unexpected absence of the investigators.

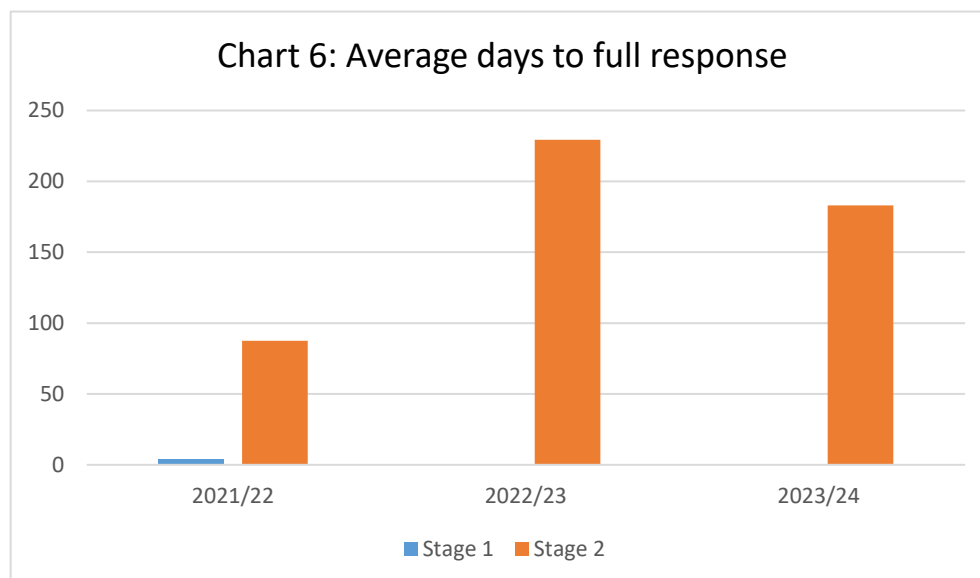


Chart 6

10. Timescales (KPI-8, 9 and 10)

10.1 Concerns closed within the set timescales: Table 4 shows the number and percentage of concerns at Stage 1 and Stage 2 closed within the set timescales of 5 and 20 working days.

Concerns closed with 5 & 20 working days	
Stage 1 Concerns	
Total number of Stage 1 concerns received	0
Percentage of Stage 1 concerns that were closed	N/A
Percentage of Stage 1 concerns closed within the 5 working days target	N/A
Stage 2 Concerns	
Total number of Stage 2 concerns received	1
Percentage of Stage 2 concerns that were closed	100%
Percentage of Stage 2 concerns closed within the 20 working days target	0%

Table 4

The INWO expects that there will be a thorough investigation of stage 2 concerns, and as a result they recognise that the 20 working day timeline may not always be achieved, especially given the often complex nature of concerns and the requirement for support and confidentiality. The timescale is provided to ensure that organisations take prompt action, and that there is an ongoing focus on investigating and addressing the concern.

NHS Ayrshire & Arran aims to respond to Stage 2 concerns within 20 working days but will ensure that the time needed for a thorough investigation is given with additional time requested to extend the investigation period as appropriate.

10.2 Extension to timescale: Table 5 below shows the number of concerns where an extension has been authorised at Stage 1 and Stage 2 in 2023/24.

Concern	Number received	Extension Authorised	As % of all concerns
Stage 1	-	-	-
Stage 2	1	1	100%

Table 5

10.3 Chart 7 below shows the number of concerns where an extension has been authorised at stage 2 of the process in 2023/24 compared to previous years.

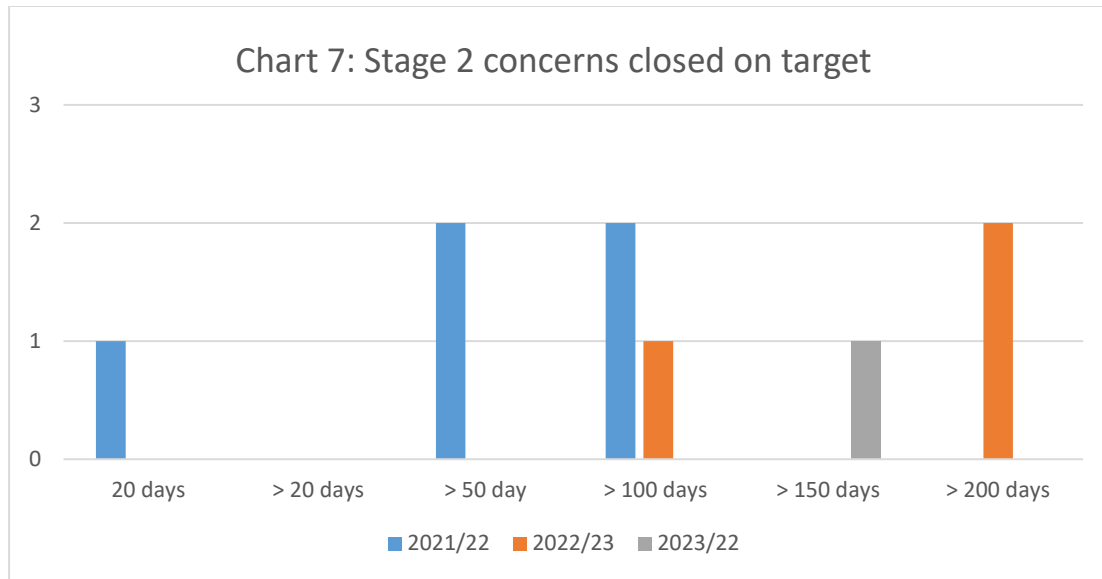


Chart 7

10.4 Due to the complexity of the stage 2 concerns received it is taking more than 20 working days to conclude investigations and for the outcome of the investigation to be communicated to the Whistleblower. The Whistleblower is kept fully informed throughout the whistleblowing investigation, this includes when there is a requirement to extend the time scale.

Appendix 1 provides a summary Year End Report for 2023/24 for KPI-4 to KPI-10.

11. Whistleblowing themes, trends and patterns

Analysis of the concerns raised by key themes is provided below. Where possible comparisons have been made against the Whistleblowing cases received April 2021 to 31 March 2024. This information will aid identification of any improvement priorities, and to progress learning in a targeted manner.

Theme	2021/22	2022/23	2023/24
	Q1-Q4	Q1-Q4	Q1-Q4
Patient Care	4	2	1
Patient Safety	4	2	1
Poor Practice	3	2	0
Unsafe working conditions	0	1	1
Fraud	1	0	0
Changing or falsifying information about performance	0	1	0
Breaking legal obligations	0	1	0
Abusing Authority	0	1	0

Table 6

* more than one theme may be applicable to a single Whistleblowing concern

12. Concerns raised by Service

Chart 8 below shows the breakdown of concerns by service for 2023/24 and previous years.

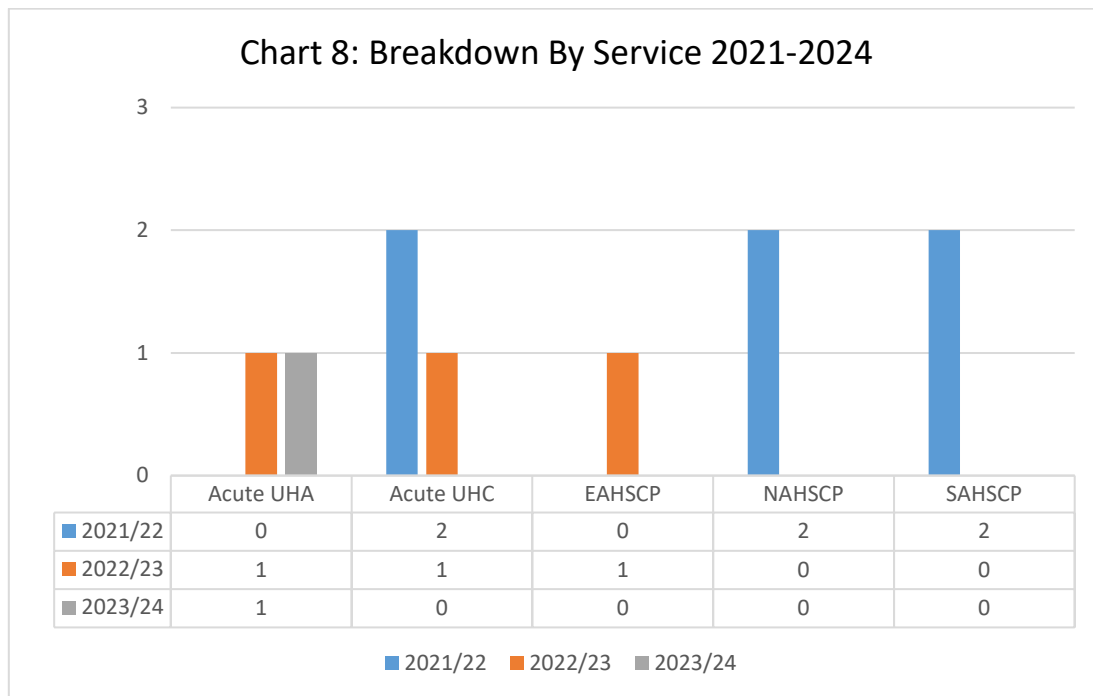


Chart 8

13. Primary Care and contracted services

13.1 Primary care contractors

Primary Care contractors (GP practices, dental practices, optometry practices and community pharmacies) are also covered by the Standards.

All practices and community pharmacies are aware of the National Whistleblowing Standards for the NHS in Scotland and the requirements for local policies and information on the reporting process.

Primary care contractors are aware of how to access NHSAA Speak up Service for guidance through the process.

Primary Care contractors have a dedicated confidential contact within NHSAA who will help with raising concerns. Each contractor group are required to report in line with the same key performance information as NHSAA. In instances where no concerns have been raised within wider primary care or other contracted services there is no need to provide a quarterly return to the Board, but annual reports must still be submitted, setting out the concerns that have been raised.

There were no concerns recorded during 2023/24.

Primary Care Contractor (PCC)	Current PCC Cohort	No of concerns received	
		Stage 1	Stage 2
GP Practices	53	0	0
Dental Practices	64	0	0
Optometry Practices	49	0	0
Community Pharmacy	99	0	0

Table 7

13.2 Other Contracted Services

The Procurement team have collated information from local suppliers, who are not contracted through the National Procurement Framework and this information has informed a Contract Register providing a list of all local contracts that the Board have in place. This will ensure a process for reporting Whistleblowing concerns in accordance with the requirements of The Standards.

An update to National Procurement provisions was incorporated into NHS AA's standard terms & conditions to ensure suppliers provide the protections contained within the Standards to their own employees.

There were no concerns recorded during 2023/24.

NHS National Procurement Services are responsible for those contracts covered by the National Procurement Framework. A National process is in place which supports the requirements of the Standards for reporting and recording.

14. Anonymous Concerns

Concerns cannot be raised anonymously under the Standards, nor can they be considered by the INWO. However, good practice is to follow the whistleblowing principles and investigate the concern in line with the Standards, as far as practicable. NHS Ayrshire & Arran has decided that anonymous concerns will be recorded for management information purposes. The definition of an anonymous concern is 'a concern which has been shared with the organisation in such a way that nobody knows who provided the information'. All anonymous concerns will be considered and investigated by the organisation as appropriate. In 2023/24 no anonymous concerns were received.

15. Independent National Whistleblowing Officer

A clear indicator of the satisfaction of those who raise concerns can be derived from the number of concerns that are escalated to the Independent National Whistleblowing Officer (INWO).

At the end of the third year we were advised that we had been referred to the INWO. A whistleblower complained to the INWO regarding the Stage 2 outcome response letter provided. The INWO were advised a feedback meeting was arranged with the whistleblower and the investigators and it was agreed that a follow up Stage 2 outcome letter with more detail to explain the outcome would be provided. The letter was also shared with the INWO at their request.

16. Whistleblowing and Speaking Up

The NHS Ayrshire & Arran Speak Up model supports the organisations culture of psychological safety where all staff are encouraged to be confident to bring forward any concerns. The Speak Up model provides access to Confidential Contacts and a cohort of Speak Up Advocates who work alongside the Confidential Contacts to broaden access for those with concerns, ensuring that we can provide access to a contact and support for those raising concerns across the organisation at all levels.

Following the review of the Board's arrangements for Confidential Contacts the recruitment of new Confidential Contacts took place during the summer of 2023. There were four successful candidates who took up the role of Confidential Contact in August 2023. A Sway communication was shared across the organisation via Daily Digest, eNews and by email to the 800+ line managers, to introduce and raise awareness of the new Confidential Contacts.

Of the concerns received during the reporting year these have been received via the Confidential Contacts, Speak Up Advocates, the SpeakUp mailbox or the Speak Up phone number.

17. Our plans for 2024/2025

- To continue to learn, review and identify improvements for change in our process. We will review feedback from users of the process, best practice from colleagues in other boards and the Independent National Whistleblowing Officer (INWO).
- We will continue to link with the INWO to seek guidance.
- We will continue to promote the Standards and how to raise concerns safely within the organisation and a systematised approach to sharing learning.
- We will work with investigators and Directors, to review learning from the process and share as appropriate across the organisation.
- We will continue to engage with our Confidential Contacts and Speak Up Advocates to address any barriers identified by staff about raising concerns.
- We will provide communications on a quarterly basis using the mediums of Daily Digest and eNews and our 7-minute briefing format.
- We will continue to develop and support our Confidential Contacts and Speak Up Advocates in their roles, for example, through local and national training and engagement, peer group meetings, links to our whistleblowing champion.
- We will consider ways to gain feedback on awareness across the organisation.
- We will consider alternative ways to communicate with staff in areas where access to computers is not routine.
- We will consider ways in which learning or improvements as a result of a concern can be highlighted or shared further with staff.

- We will build on the experience of last year's Speak Up Week by increasing the number of engagement sessions, taking the opportunity to raise awareness about local arrangements for speaking up and to promote the role of our Speak Up Advocates and Confidential Contacts.

18. Conclusion

Speak Up Week afforded us the opportunity to further promote the whistleblowing process, the new Confidential Contacts, the Speak Up Advocates and the training available. The face to face sessions and the MS Teams Ask me Anything sessions were invaluable in linking with staff at all levels within the organisation, we plan to build on this success as we develop a programme for the next Speak Up week in October 2024.

In line with the National Whistleblowing Standards, we reiterate our commitments to dealing responsibly, openly and professionally regarding any whistleblowing concern. Continuing to encourage all those involved to raise any concerns as early as possible. It is hoped that continued improvements in process, continued communications and using feedback from colleagues will enable NHSAA to develop its culture so that all those who might have a concern feel able to Speak Up freely without fear of any adverse impact against them. It is recognised, as noted in Our Plans above, that this is a continuous improvement process and the learning gained from the first year will inform improvements as we go forward.

The organisations Whistleblowing Oversight Group (WBOG) will continue to meet to provide oversight of our processes and systems, recognising that this is a learning process and performance reports will continue to be provided to our Staff Governance Committee and Board meetings to provide assurance that the organisation is delivering the requirements of the Standards.

Appendix 1

YEAR END REPORTING - INWO				
Reporting year		01/04/23 - 31/03/24		
KPI	Category (link to Guidance)	Description	Total	Percentage
4	Received	Total number of concerns received	1	
5	Closed	Total number of concerns closed	1	
5	Stage 1	Number of concerns closed at Stage 1	0	0%
5	Stage 2	Number of concerns closed at Stage 2	1	100%
6	Stage 1 Outcomes	Number of concerns upheld at Stage 1	0	0%
6	Stage 1 Outcomes	Number of concerns partially upheld at Stage 1	0	
6	Stage 1 Outcomes	Number of concerns not upheld at Stage 1	0	0%
6	Stage 2 Outcomes	Number of concerns upheld at Stage 2	0	0%
6	Stage 2 Outcomes	Number of concerns partially upheld at Stage 2	0	
6	Stage 2 Outcomes	Number of concerns not upheld at Stage 2	1	100%
7	Stage 1 Avg Working Days	Average working days for concerns at Stage 1	0	
7	Stage 2 Ave Working Days	Average working days for concerns at Stage 2	183	
8	Stage 1 Timescales	Number of concerns at Stage 1 closed within 5 working days	0	0%
8	Stage 2 Timescales	Number of concerns at Stage 2 closed within 20 working days	0	0%
9	Stage 1 Extensions	Number of concerns at Stage 1 with authorised extension	0	0%
10	Stage 2 Extensions	Number of concerns at Stage 2 with authorised extension	1	100%