

# NHS Ayrshire & Arran

<b>Meeting:</b>	<b>Ayrshire and Arran NHS Board</b>
<b>Meeting date:</b>	<b>Monday 31 March 2025</b>
<b>Title:</b>	<b>Whistleblowing Report: Quarter 3, 1 October to 31 December 2024</b>
<b>Responsible Director:</b>	<b>Jennifer Wilson, Nurse Director</b>
<b>Report Author:</b>	<b>Karen Callaghan, Corporate Governance Coordinator</b>

## 1. Purpose

This is presented to the Board for:

- Discussion

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

The National Whistleblowing Standards and Once for Scotland whistleblowing policy (the Standards) were introduced on 1 April 2021. The paper is presented to NHS Board members for assurance and discussion on organisational activity for whistleblowing concerns raised in Quarter 3 (October – December 2024).

### 2.2 Background

The National Whistleblowing Standards (the Standards) set out how the Independent National Whistleblowing Officer (INWO) expects all NHS Boards to manage, record and report whistleblowing concerns. It is a requirement of the Standards that whistleblowing data is reported quarterly to the NHS Board.

The Standards also require that Boards publish an annual report setting out performance in handling whistleblowing concerns. The annual report will summarise and build 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.

In NHS Ayrshire & Arran the agreed governance route for reporting on whistleblowing is to Staff Governance Committee and then to the NHS Board. The NHS Board report will be shared with Integration Joint Boards following the NHS Board meeting.

This report provides information in accordance with the requirements of the Standards. This provides information on our performance for Quarter 3 (October-December 2024).

## **2.3 Assessment**

Appendix 1 provides details of Whistleblowing concerns raised across the organisation by staff and those who provide services on behalf of NHS Ayrshire & Arran. This demonstrates our performance in the national key 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.

The report at Appendix 1 provides performance information on:

- Whistleblowing concerns raised
- Learning, changes or improvements to service or procedures
- Experience of individual raising concern/s
- Level of staff perceptions, awareness and training
- Whistleblowing themes, trends and patterns

### **2.3.1 Quality**

Procedures for raising concerns should provide good-quality outcomes 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 is no financial impact.

### **2.3.4 Risk assessment/management**

If staff do not have 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 & 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**

A local Equality Impact Assessment (EQIA) for the Standards is in place and published on our [public facing web](#). This assesses the impact of the Whistleblowing Standards on staff and those who provide services on behalf of the NHS with protected characteristics.

### **2.3.6 Other impacts**

- **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 in relation to the formulation of this paper. There has been wide communication of the Standards across the organisation.

### **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 23 January 2025
- Staff Governance Committee on 11 February 2025

## **2.4 Recommendation**

For discussion. Board members are asked to discuss the performance report in relation to concerns raised in Quarter 3 (October – December 2024).

## **3. List of appendices**

- Appendix 1 - Whistleblowing performance report for Quarter 3, 1 October to 31 December 2024.



# Whistleblowing Quarter 3 Report

## 1 October – 31 December 2024



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Updated 16/01/2025

# Whistleblowing performance report

## Quarter 3 – 1 October to 31 December 2024

### 1. Introduction

This report provides details of Whistleblowing concerns raised across the organisation by staff and those who provide services on behalf of NHS Ayrshire & Arran. This report demonstrates our performance in the national key 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 in and more importantly, allow us to evidence necessary improvement and learning in response to the trends and themes demonstrated.

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

System-wide learning, changes or improvements to services can be limited by the need to maintain confidentiality of individual whistleblowers. For each concern that is upheld or partially upheld a documented improvement plan is put in place to address any shortcomings or apply the identified learning. The plan is agreed by the Director responsible for commissioning the investigation under the Standards, and monitored through the department’s governance group as agreed with the Commissioning Director.

Progress against plans is monitored by the Corporate Governance Coordinator whilst actions transition from the whistleblowing process to business-as-usual action/improvement plans. The Whistleblowing Oversight Group receive updates on progress on a quarterly basis. In relation to local and system-wide learning, processes are now in place to capture and through the Director commissioning the investigation, will be shared at the appropriate forums

Table 1 shows the status of improvement plans from concerns raised in 2022/23, 2023/24 and 2024/25.

Year and total number of investigations		Investigations		Improvement Plans		Learning Plans	
		Open	Closed	Open	Closed	Open	Closed
2022/23	3	-	3	July 2023	July 2024	-	-
				Dec 2023	Oct 2024	-	-
				June 2024	In progress	-	-
2023/24	1	-	1	April 2024	Dec 2024	-	-
2024/25	3	2	1*	-	-	-	-

Table 1

During Q3 two improvement plans were closed with the agreement of the Commissioning Director one from 2022/23 and one from 2023/24. One plan remains in progress from 2022/23 with a recent update that the actions are either closed or ready to move to Business as Usual (BAU) as changes made can now be monitored on an ongoing basis. Approval for the move to BAU has been sought from the Commissioning Director.

Plans remain open until all actions are complete or moved to business as usual. Improvement plans are monitored through the relevant department's governance group as agreed with the Commissioning Director, with feedback on closure to the Whistleblowing Oversight Group. Progress is monitored by the Corporate Governance Coordinator.

\* It is worth noting there is no improvement plan for the Stage 1 concern closed in Q3 2024/25. At this time there is no data for the Stage 2 concerns received in Q2 and Q3 2024/25 as the investigations are ongoing.

### **3. Experience of individuals raising concern/s (KPI-2)**

Individuals who raise concerns are given the opportunity to feedback on their experience of the Whistleblowing process. Any feedback received is viewed as learning and helps us to make improvements in our processes as appropriate.

An anonymous feedback survey is shared with those involved in the whistleblowing process. This includes the individual who raised the concern and those involved with the investigation.

As no concerns were closed in this quarter there is no feedback to report.

### **4. Level of staff perception, awareness and training (KPI-3)**

We continue to issue communications across the organisation to remind staff about whistleblowing, the Standards and how to raise a whistleblowing concern. This is supported by our Communication Team through Daily Digest and eNews.

The Whistleblowing Policy and process continues to be highlighted to new staff as part of the Corporate Induction Programme and to newly appointed managers and leaders during training sessions.

Monthly reports are produced to monitor completion of the Turas Whistleblowing eLearning modules. As at 31 December 2024, 69.5% of managers and 39% of staff had completed the Turas Whistleblowing e-Learning modules. Communication continues to be shared through Daily Digest and eNews to remind that it is mandatory for line managers and leaders to complete the relevant Turas Whistleblowing modules.

During Speak Up Week, 30 September to 4 October 2024, staff who attended the face to face engagement events were encouraged to complete an anonymous awareness survey. This survey allow us to gauge awareness among staff on how to raising concerns and confidence to do so. The short anonymous survey provides a snapshot of staff awareness.

As part of the survey staff were asked:

- Q1. I know how to raise concerns about practices within NHS Ayrshire & Arran (A&A)

Chart 1 shows the 2024 results in comparison to 2023 responses. In 2024 94% of staff indicated that they knew how to raise concerns, as opposed to 84% in 2023. This is a 10% improvement on the previous year and an indication that awareness has increased. It is not possible to say if this is a result of engagement with staff during this or earlier Speak Up campaigns.

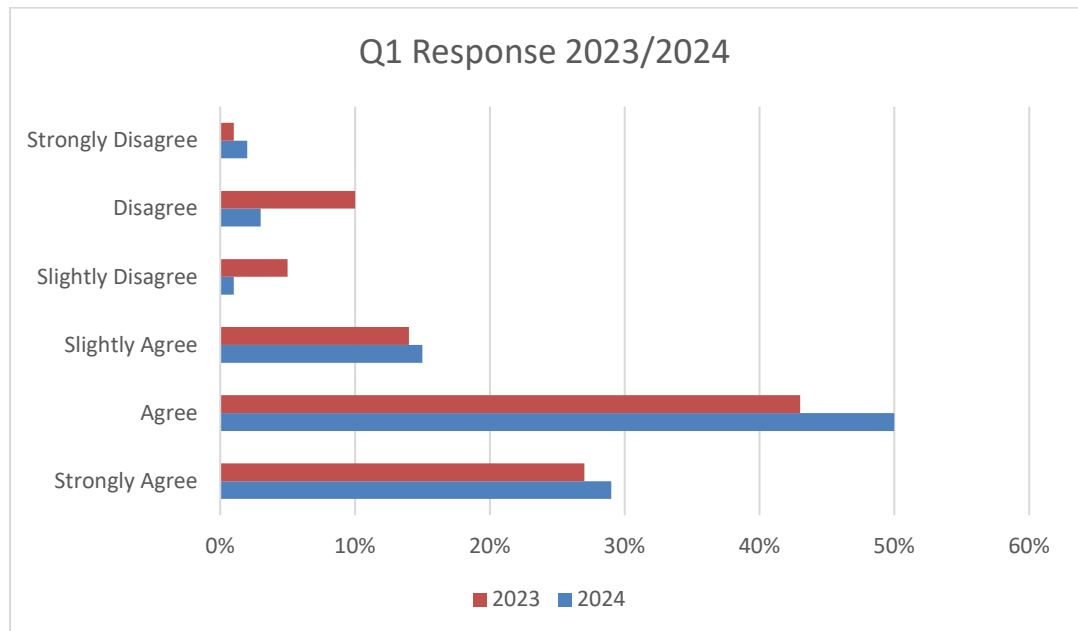


Chart 1

## 5. Whistleblowing concerns received (KPI-4)

Table 2 below shows the **total number of concerns received in quarter 3** through the whistleblowing process and at what stage.

Total concerns received Q3	Appropriate for WB	Stage 1	Stage 2
3	2	1	1

Table 2

The concerns raised as Whistleblowing were carefully reviewed by the Whistleblowing Decision Team who agreed two of the concerns should be taken forward through the Whistleblowing process. One at stage 1 and one at stage 2.

No immediate risk was identified to patient safety in the concerns received in Q3, with no action required.

The concern not taken forward through the Whistleblowing process was directed to HR colleagues for review with the consent of the complainant.

Chart 2 below shows the total number of concerns received in Q3 compared with Q3 in previous years.

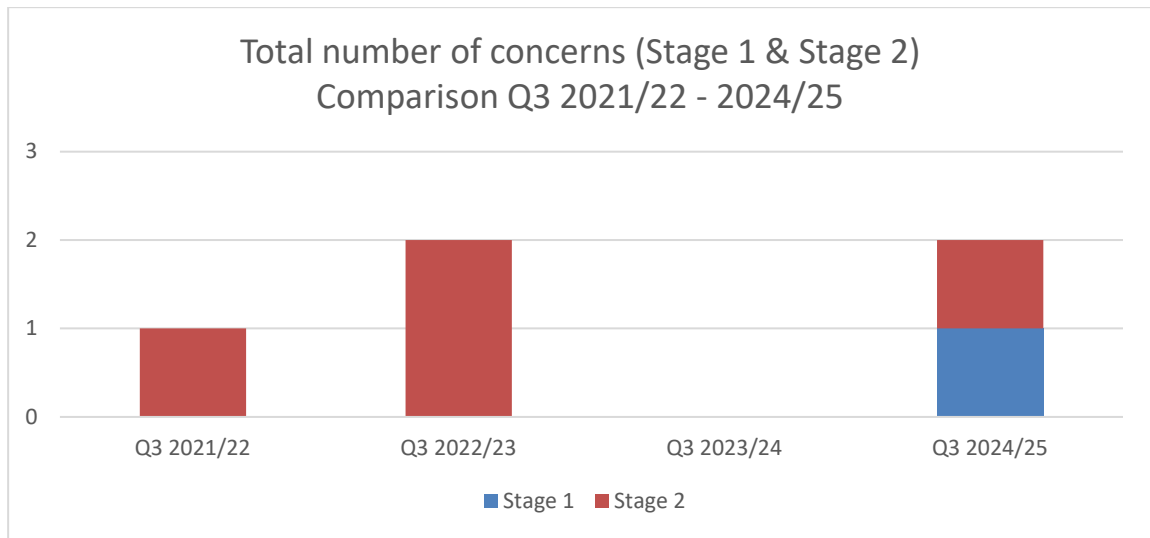


Chart 2

## 6. Concerns closed (KPI-5)

This indicator reports on the numbers of concerns closed at Stage 1 and Stage 2 of the procedure as a percentage of all concerns closed.

Table 3 shows that during Q3 one stage 1 concern had been closed and the investigation of the stage 2 concerns received in Q2 and Q3 are ongoing.

Total concerns received by Quarter in 2024/25			Nos Closed	Nos ongoing	% Closed against received
Q2	Stage 2	1	-	1	0%
Q3	Stage 1	1	1	-	100%
Q3	Stage 2	1	-	1	0%

Table 3

## 7. Concerns outcomes (KPI-6)

This indicator reports on concerns upheld, partially upheld and not upheld at each stage of the whistleblowing procedures as a percentage of all concerns closed in full at each stage.

**7.1 The definition of a stage 1 concern** - Early resolution is for simple and straightforward concerns that involve little or no investigation and can be handled by providing an explanation or taking limited action, within 5 working days.

Stage 1 concern received in Q3, following investigation was not upheld. However it is worth noting that a meeting was arranged to discuss the complainant's concerns, which resulted in a positive discussion and concerns being resolved.

**7.2 The definition of a stage 2 concern** - are concerns which tend to be serious or complex and need a detailed examination before the organisation can provide a response within 20 working days.

Stage 2 concern received in Q2 and Q3, investigations are ongoing therefore there is no data to report.



## 8. Average Response times (KPI-7)

This section reports on the average time in working days for a full response at each stage of the whistleblowing procedure.

- 8.1 **Stage 1:** During this quarter the one stage 1 concern received was investigated and closed at Stage 1 of the process. As shown in Table 4 the investigation period from receipt to closure was 13 working days.
- 8.2 **Stage 2:** No stage 2 concerns were closed in Q3. The Q2 stage 2 investigation is ongoing.

Average response time in working days			
Stage 1 (5 days)		Q2	Q3
	Average time in working days for responses	-	13
Stage 2 (20 days)		Q2	Q3
	Average time in working days for responses	0	0

Table4

## 9. Timeliness of handling whistleblowing concerns (KPIs- 8, 9 and 10)

- 9.1 Number and percentage of concerns closed in full within set timescales (KPI-8)

Table 5 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	1
Percentage of Stage 1 concerns that were closed	0%
Percentage of Stage 1 concerns closed within the 5 working days target	0%
Stage 2 Concerns	
Total number of Stage 2 concerns received	1
Percentage of Stage 2 concerns that were closed	0%
Percentage of Stage 2 concerns closed within the 20 working days target	0%

Table 5

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.

## 9.2 Concerns where an extension was authorised (KPI-9 and 10)

Under the terms of the Standards, for both stage 1 and stage 2 concerns there is the ability in some instances, for example staff absence or difficulty arranging meetings, to extend the timeframe in which a response is provided. The person raising the concerns must be advised that additional time is required, when they can expect a response, and for stage 2 concerns must be provided with an update on the progress of any investigation every 20 working days.

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

Table 6

Extensions to all concerns received this quarter were authorised by the Commissioning Director for the investigation. In all instances the whistleblowers are advised of the need to extend the timescale and continue to be kept up to date with the progress of the investigations throughout the process. Due to the complexity of the concerns raised it is expected they will be extended again beyond the 20 working day, timescale.

## 10. Whistleblowing themes, trends and patterns

This section provides information on themes from whistleblowing concerns raised and will aid identification of any improvement priorities, and to progress learning in a targeted manner.

### 10.1 Breakdown by Themes

The stage 1 and stage 2 concerns received in quarter 3 aligned with several categories as shown in Table 7.

Themes 2024	Q1	Q2	Q3
Patient Care	-	1	1
Patient Safety	-	1	1
Poor Practice	-	1	1
Unsafe working conditions	-	1	1
Fraud	-	0	0
Changing or falsifying information about performance	-	0	0
Breaking legal obligations	-	0	0
Abusing Authority	-	0	1

Table 7

### 10.2 Breakdown of concerns by service

Stage 1 concern received in Q3 related to Ayrshire Central Hospital (ACH), North Ayrshire Health and Social Care Partnership (NA HSCP).

Stage 2 concern received in this quarter related to University Hospital Crosshouse (UHC).

## 11. Independent National Whistleblowing Officer (INWO)

### 11.1 Referrals to the INWO

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 this current time, there have been no referrals to the INWO.

### 11.2 INWO Stage 3 investigation reports

Under the Standards, whistleblowers can contact the INWO if they are unhappy with how their whistleblowing concerns have been investigated and responded to by health boards. The INWO investigates each case independently and reports on the findings, outcomes and learnings. These reports are then shared with Boards via the INWO monthly Bulletin and published on the [INWO website](#). Locally these reports are reviewed to benchmark our processes and to identify any areas for learning or improvement to local process to ensure best practice.

The Quarter 3 INWO bulletin published two stage 3 reports which stated that:

- investigation did not adequately consider all the issues raised,
- there was inadequate information gathering at the initial stages of the investigation, and
- the language of the stage 2 response could have been more appropriate.

In NHS Ayrshire & Arran we:

- Draft a Terms of Reference (ToR) for each investigation to ensure all appropriate issues raised are reviewed.
- Agreement of ToR sought from Whistleblower and Commissioning Director.
- ToR set out the scope of the investigation and the content and function of the final report.
- Draft investigation reports are reviewed by the Commissioning Director.

Stage 2 outcome responses are:

- Drafted based on the information within the report.
- Reviewed by the investigator and Commissioning director prior to issue to whistleblower.
- Whistleblower is offered a meeting with the investigator to discuss the outcome of the investigation in advance of receiving the outcome letter.

## 12. Speak Up week

Speak Up Week is a national annual engagement event which was launched by the INWO in 2022. Speak Up week 2024 took place from 30 September to 4 October 2024, with a theme of “Enabling Speaking Up” with NHS Chief Executives and Directors being encouraged to pledge their support.

NHS Ayrshire & Arran supported National Speak Up week through a programme of

events. The Confidential Contacts, Speak Up Advocates, Whistleblowing Champion and Whistleblowing Coordinator attending various locations across Acute and Health and Social Care Partnership sites with the whistleblowing roadshow “stall”, enabling face to face engagement with staff on a drop in basis. In addition the programme of events included Whistleblowing overview drop in session via MS Teams in the run up to Speak Up Week in September and Whistleblowing Ask Me Anything sessions via MS Teams during Speak Up week. We issued daily communications through the organisation electronic eNews and Daily Digest providing detail of what was happening locally and nationally. Sharing links to the INWO events and encouraging staff to join these.

There was an increase in staff engagement at the face to face drop in events this year, with 200 staff visiting from across the organisation, this is an increase of 25% on the previous year.