

Report to:	Public Board of Directors	Agenda item:	9
Date of Meeting:	31 October 2018		

Title of Report:	Freedom to Speak Up Report
Status:	To note
Board Sponsor:	Claire Radley, Director of People
Author:	Jo Hodson, Trust Freedom to Speak Up Guardian
Appendices	Appendix 1: Raising Concerns: Freedom to Speak Up Progress Update Appendix 2: Role Profile Appendix 3: Draft Freedom to Speak Up: Raising Concerns Policy Appendix 4: Draft Freedom to Speak Up Vision and Strategy Appendix 5: Freedom to Speak Up Trust Self-Evaluation

1. Executive Summary of the Report

This report outlines the processes the Trust has in place to encourage the raising of concerns by staff as part of the on-going commitment to maintain the quality of services for staff, visitors, relatives and patients is upheld through a culture of learning and improvement; and that the experience of staff is improved year on year as measured through the staff survey.

This report will provide assurance on the governance of raising concerns with the Trust. It highlights progress nationally and within the Trust in relation to the Freedom to Speak Up (FTSU) agenda.

This report also includes the refreshed Freedom to Speak Up: Raising Concerns Policy which is currently out for consultation. This is presented for information at this stage, with the final version to be approved via the Trust's Strategic Workforce Committee in November/December.

Finally, a Draft Freedom to Speak Up Vision and Strategy and Freedom to Speak Up Self-Evaluation is presented for Board Approval. NHS Improvement released guidance earlier in 2018 requiring all Trust's to have undertaken this self-review. The RUH self-review has been led by the Director of People as FTSU Lead Executive, and has had input from various sources across the Trust.

2. Recommendations (Note, Approve, Discuss)

The Board of Directors is asked to:

- Note the FTSU update and to support the work of the Guardian and Champions.;
- Note the draft policy;
- Note the FTSU self-evaluation; and
- Approve the Freedom to Speak Up Vision and Strategy and the Self-

Evaluation.

3. Legal / Regulatory Implications

The following legal / regulatory requirements must be met through the work of the Trust for the purpose of Whistleblowing:

- NHS contract (2016/17) requirement to nominate a Freedom to Speak Up Guardian.
- National NHS Freedom to Speak Up raising concerns (whistleblowing) policy (2016)
- NHS Constitution: The Francis report emphasises the role of the NHS Constitution in helping to create a more open and transparent reporting culture in the NHS which focuses on driving up the quality and safety of patient care.
- Public Interest Disclosure Act 1998: The Act covers all workers including temporary agency staff, individuals on training courses and self-employed staff who are working for and supervised by the NHS.
- Enterprise and Regulatory Reform Act 2013: The Act introduces a number of key changes to the Public Interest Disclosure Act targeted at strengthening protections for whistleblowers.
- The Bribery Act 2010: This guidance is targeted at helping employers ensure their local policies and procedures are in line with the legislation and, most importantly, are tied into whistleblowing arrangements.
- Health Service Circular 1999/198 "The Public Interest Disclosure Act 1998: Whistleblowing in the NHS": The Health Service circular requires every NHS trust to have robust policies and procedures in place which enable staff to raise concerns in compliance with the Public Interest Disclosure Act and remains in force.
- PAS 1998 Whistleblowing Arrangements Code of Practice

4. Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc)

The implementation of effective practices ensuring that staff are able to raise concerns and are protected when they do will ensure that the Trust guards against legal claims against it. Failure to develop and implement the requirements of the legal and regulatory framework requirements may lead to reputational and finance losses.

5. Resources Implications (Financial / staffing)

Financial backfill for the Guardian post, training and conference expenses is borne by the HR budget.

6.	Equality and Diversity
The Raising Concerns Policy complies with the requirements for Quality Impact Assessment(s)	
7.	References to previous reports
None	
8.	Freedom of Information
The report is public	

Appendix 1

Raising Concerns: Freedom to Speak Up

Progress Update

1. Purpose

- 1.1 This report outlines the processes the Trust has in place to encourage the raising of concerns by staff as part of the on-going commitment to ensuring that the quality of services for staff, visitors relatives and patients is upheld, through a culture of learning and improvement; and that the experience of staff is improved year on year as measured through the staff survey.
- 1.2 This report provides assurance on the governance of raising concerns within the Trust.

2. Background

- 2.1 The Freedom to Speak Up Review was conducted in 2014, and the report which resulted in 2015 by Sir Robert Francis has led to fundamental changes in the way that concerns are raised by staff and considered by organisations. The aim of the Francis Report (2015) was to provide advice and recommendations to ensure that NHS staff feel safe to raise concerns, confident that they will be listened to and that concerns will be acted upon.
- 2.2 The Freedom to Speak Up report recommended that staff that have raised concerns and have suffered detriment as a result, should be supported to find alternative employment within the NHS. In March 2017 the Department of Health published its consultation on the draft Employment Rights Act 1996 (NHS Recruitment - Protected Disclosure) Regulations, which will prohibit an NHS employer from discriminating against an applicant because the applicant has made a protected disclosure. NHS Improvement is working closely with The National Guardian Office (NGO), NHS Employers, CQC and NHS England to ensure that collaborative working is paramount within the structure of the scheme. NHS Improvement is leading on the implementation of the scheme for secondary care.
- 2.3 Speaking Up does form an important part of the Care Quality Commission's (CQC) assessment of the Well-Led domain and the guidance that CQC will be using has been created in partnership with the NGO, NHS Improvement and the FTSUG network. Reviewing 'What inspectors may ask Freedom to Speak Up Guardians', the Freedom to Speak Up Guardian is confident that the Trust can demonstrate that it meets the criteria of 'Well Led'.

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2.4 The Royal United Hospitals, Bath, NHS Foundation Trust has undertaken a number of actions to address the requirements within the Francis Report in order to develop a culture of openness in which staff feel able to raise concerns.

3. Actions we have taken

Some of the actions that have been taken and those being undertaken follow the audit process by KPMG.

3.1 Freedom to Speak Up Guardian in post (since September 2016: Jo Hodson) using the National ‘Freedom to Speak Up Guardians – Purpose and key principles of the role’ guidance (May 2016), and eight divisional Freedom to Speak Up Guardians, with an agreed role profile (Appendix 2).

- The Trust FTSU Guardian provides reports to the Trust Board.
- The Trust FTSU Guardian has held 1-2-1 meetings with the CEO, Director of Nursing and Midwifery, Director of HR, and the lead-NED for FTSU, in relation to cases as well as general updates.
- Close working between the FTSU Guardian, divisional FTSU guardians and HR to implement Sir Robert Francis’s recommendations.
- RUH FTSU guardian attends National conferences.
- RUH FTSU Guardian attends quarterly regional network meetings which are held around the South West region.
- Regular monthly meetings with the Chief Executive are scheduled regardless of whether there are any active / formal cases.

3.2 The use of a video, with messages on Raising Concerns from the Director of Nursing and Medical Director, is used during Induction and is also available via the Raising Concerns webpage. This will be amended and updated when new Director of Nursing appointed together with new Medical Director.



http://webserver/staff_resources/raising_concerns/index.asp

3.3 Revision and updating of the Whistleblowing Policy (now known as ‘Raising Concerns Policy’): http://webserver/staff_resources/governance/policies/hr.asp

- The Trust has a Raising Concerns Policy in place, which is currently being reviewed and updated. The current draft is included in this paper as Appendix 3. This policy provides several avenues for staff to raise concerns and includes the roles of the line manager; Executive Director(s), NED and Chairman; Chief Executive; as well as external to the Trust sources of support such as NHS Protect and the Audit Commission.

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- The Trust Policy is based on the national policy written by NHS Improvement and also includes guidance from the FTSU hub via NHS Employers. It makes explicit that the Trust will not tolerate bullying or any other types of victimisation, against any member of staff who has raised a concern.
- The policy is available to all staff via the intranet and is recorded as both 'Raising Concerns' and 'Whistleblowing' to ensure that staff can access the guidance it regardless of the terminology adopted.

3.4 The Trust offers number of informal and formal processes which enable staff to raise concerns openly, confidentially and anonymously including:

- Development of a dedicated Raising Concerns webpage with all of the FTSU guardian's profiles and contact information, available to all staff. This is being updated together with posters with newly appointed Divisional Guardians as there have been changes over the past year.
http://webserver/staff_resources/raising_concerns/index.asp
- A dedicated FTSU email address ruh-tr.freedomtospeak@nhs.net for staff to contact Freedom to Speak Up Guardian in a confidential manner.
- The Freedom to Speak Up Guardian has been visiting departments and wards, this started by doing "Treat Round", this has increased visibility and knowledge to staff of the Freedom to Speak Up Guardian. This has now moved forward with repeat visits to meet with staff when a concern may have been raised.

4. Raising Awareness and Support for Staff

4.1. The Trust is committed to improving the health and wellbeing of our colleagues, and the FTSU agenda, the FTSUG has met with those working in the Employment Assistance Programme to ensure that we are working together to support staff with resilience and stress management.

4.2 Use of posters across the trust and in all departments providing details of how to contact the Guardians

- promotion of the Raising Concerns Policy via HR staff and operational managers
- FTSU Guardian has also provided a briefing session to the HR department to further develop links
- The Trust offers a range of support to all staff including those who raise or have concerns raised about them. This includes, mediation, a workplace counselling service including stress management and signposting to where they can seek additional independent advice and support.

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5. Reviewing progress and Impact

5.1 Management of FTSU Cases

The success of the FTSU Guardian role is that all staff are aware of the role and how to access it, as well as getting a confidential and professional service should a member of staff need to raise a concern.

The National Guardians office has produced guidance on what information should be logged for FTSU cases. This information is currently being collected by the FTSU guardian on a database to enable reports to be delivered when required.

Employees can raise their concerns either in person, by phone or in writing explaining the information and circumstances that gave rise to the concern. The FTSU guardian is able to speak to the HR Deputy Director for advice and guidance on any cases once she has sought the agreement of the employee.

The process for raising FTSU concerns is detailed in the Raising Concerns policy.

5.2 Cases

Since collecting data in January 2017 there have been 39 concerns raised. It needs to be noted that some of these concerns have involved multiple people when the Freedom to Speak Up Guardian has gone into a department to have listening sessions and then worked with those present and the management to resolve issues. It is to be noted that colleagues have neither raised concerns anonymously and to date have not indicated that they are suffering detriment as a result of speaking up.

The Freedom to Speak Up Guardian reports quarterly to the National Guardians office with number of cases and themes of concerns that have been raised in the Trust.

Since last reporting to the Board of Directors in November 2017 there have been 27 cases raised

Patient safety	Cultural	Bullying & Harassment/Behaviours	System and Processes
7	7	11	2

In majority of cases, the Freedom to Speak Up Guardian has sought input from the Deputy Director of People, following agreement of the client. There has been one case that involved the Freedom to Speak Up Guardian working with the senior management of the department, the concern raised was that of a poor culture within a working environment. The latest feedback is that the last meeting between senior management and the department was positive and the help of the Freedom to Speak Up Guardian has been put on hold.

5.3 Staff Survey

On an annual basis the Trust takes part in the National Staff Survey. Each year there is a review of the results which is provided to the Trust Board http://www.ruh.nhs.uk/about/trustboard/2017_03/index.asp?menu_id=7. There are a number of results that are relevant to the FTSU and Raising Concerns agenda.

At the Trust and in response to the 2016 results there are four key work areas identified. These include:

- **Equality and Diversity:** to tackle discrimination and improve opportunities for all staff in career progression/promotion
- **Reporting:** to be improved across a number of areas including clinical incidents; errors, near misses and incidents of violence so that the Trust can respond to staff's needs and make interventions to further build confidence and use of the systems for recording, feedback and learning.
- **Patient care and experience:** staff feel that they are not satisfied with the quality of care that they are able to deliver and there is scope to support staff and help to evidence how their role makes a difference to patients.
- **Violence, harassment and bullying:** the staff experience remains unchanged since the previous year, and improvements in staff confidence and skills in these areas is required.

The Staff Survey working Group meets monthly to chart progress at both the Divisional level through Divisional plans and at a corporate wide level through identified initiatives. Staff Survey progress reports are provided to Trust Board via the Strategic Workforce Committee, which is chaired by the Director of People.

6. Future plans for 2018-19

6.1 To continue to embed the role ensuring that staff are feeling able to raise concerns. More promotional work is planned including:

- Updating the Trust intranet, to ensure staff are aware of who the Freedom to Speak Up Guardians are in the Trust. Making sure staff are able to access resources on raising concerns including links to NHS Employers, staff side organisations and the National Guardian's Office (via CQC).
- To continue to meet directly with Staff groups and hold listening events if staff groups require
- For Divisional Freedom to Speak Up Guardian to be more visible in their areas allowing staff to access them more readily.
- Review job description and role of current Freedom to Speak Up Guardian to ensure it meets the needs of the Trust

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- 6.2 The Trust FTSU Guardian will continue to meet with all the Divisional Guardians on a quarterly basis.
- 6.5 A review of the database and an analysis of demographics, including against the provisions of the Equalities Act 2010, as well as identification of themes for wider learning.
- 6.6 To maintain a local and regional profile by attending events and sharing good practice with the team of Guardians.

7. Conclusions

The role of the Freedom to Speak Up Guardian is a key element of the Whistleblowing and Raising Concerns work of the Trust. A good relationship between the team of Guardians and the lead Guardian has been established and regular meeting continue to happen where peer support is offered. There is close working relationships with the HR team too and in particular there is very good support from both the Deputy Director and Director of People.

The programme of work for the following year is focused on continuing the raise the profile of the Guardian(s) to ensure that all staff are aware of the opportunities to raise their concerns. This builds on established whistleblowing awareness across the workforce.

Appendix 2 Role Profile

Role profile - Divisional / Directorate Freedom to Speak Up Guardian

The Directorate / Division Freedom to Speak Up Guardian will:

- Work with their divisional / directorate team to help create an open culture which is based on listening and learning and not blaming.
- Empower and encourage staff to speak up safely, ensuring that they understand how they can raise concerns and for managers about how they respond to concerns and supporting the member of staff appropriately.
- Ensure that staff with disabilities and those from black and other minority ethnic backgrounds are encouraged to speak out and are not disadvantaged by doing so.
- Act in an independent and impartial capacity, listening to staff and supporting them to raise concerns they may have by using the available structures and policies, both within the organisation and outside.
- Ensure members of staff who speak up are treated fairly through the investigation, inquiry and or review and that there is effective and open communication during this time.
- Ensure that information about those who speak up is kept confidential at all times, subject to requirements around safeguarding and illegality.
- Meet quarterly with the divisional / directorate manager to feedback themes from the concerns raised and to share positive and negative experiences and outcomes.
- Participate in the trust network for the guardians, sharing and helping to develop excellent practice in supporting members of staff who speak up.

The Directorate / Division Freedom to Speak Up Guardian should have these characteristics:

- Understand the trust, its values and key priorities and challenges.
- Have a track record of supporting and listening to staff and in demonstrating the values of the trust and the NHS constitution in their daily working lives.
- Be able to facilitate a conversation between members of staff and their managers.
- Have a good understanding of how to raise concerns and the barriers that can exist for those who speak up.
- Be an approachable, trusted, non-judgemental individual, who is comfortable with talking with staff from all disciplines and all grades and can build a rapport which demonstrates compassion and understanding.
- Have an understanding of mediation and managing confidential matters; this includes an understanding of managing and keeping confidential records of cases.
- Be responsive and resilient.

Divisional & Directorate FTSU Guardian - role profile (draft v1)

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FREEDOM TO SPEAK UP: Raising Concerns Policy

Including PREVENT
(Safeguarding from extremist and terrorist exploitation)

Reference Number:	107
Author & Title:	Jo Hodson – Freedom to Speak Up Guardian Xavier Bell – Board of Directors’ Secretary
Responsible Director:	Director of People
Review Date:	31 October 2021
Ratified by:	Claire Radley – Director of People
Date Ratified:	
Version:	4.0

Related Policies and Guidelines	<ul style="list-style-type: none"> • Incident Reporting & Management • Code of Expectations • Declarations of Interest Policy • Local Counter Fraud Specialist Protocol • Managing Conduct • Grievance Policy and Procedure • Tackling Harassment & Bullying • Trust Media Policy • PREVENT Strategy
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	<ul style="list-style-type: none">• Research, Misconduct and Fraud Policy
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Amendment History

Issue	Status	Date	Reason for Change	Authorised
1.0	Final	06/12/11	New Policy	Director of HR
2.0	Final	25/11/13	Simplified reporting process	Director of HR
3.0	Final	Nov 2016	3 year review and update	Director of HR
4.0	Final	XXX	Post internal audit update	Director of People

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Policy Summary

The Trust has a commitment to foster a culture of openness, honesty and safety to enable staff to feel confident about raising concerns and that appropriate action will be taken. The Trust positively encourages any member of staff who has a particular concern about malpractice at work, patient safety or any other unacceptable way of working, to raise this with managers or specialist staff. If an individual has serious concerns about any aspect of the responsibilities of the Trust they are entitled to raise them. Individuals must reasonably believe that such a disclosure is made in the public interest when raising issues.

These could include:

- **Patient care and patient safety**
- **Health and safety issues** e.g. that the health or safety of any person has been, is being or is likely to be endangered or unsafe working conditions
- **Inadequate induction or training for colleagues**
- **Lack of, or poor response to a reported patient safety incident**
- **Financial matters** including fraud , bribery or corruption
- **Unlawful conduct** – e.g. that a criminal offence has been committed, is being committed or is likely to be committed
- **Breaches of the NHS Code of Governance**
(<https://www.gov.uk/government/publications/nhs-foundation-trusts-code-of-governance>)
- **Breaches of legal obligations** e.g. that a person has failed, is failing or is likely to fail to comply with a legal obligation which s/he is subject to
- **Damage to the environment** - e.g. that the environment has been, is being or is likely to be damaged
- **A bullying culture** including abuse of position

For further examples, please see this [Health Education England video](#).

Healthcare professionals may also have a professional duty to report a concern. **If in doubt, please raise it.**

This policy is not for people with concerns about their employment that affect only them. That type of concern should be raised under the Trust's Grievance Policy and Procedure, which is available on the Trust intranet.

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Key Principles

- All employees of the Trust, trainees, students, agency staff, staff of other parts of the NHS working at the Trust, self-employed NHS professionals, contractors and volunteers (including Governors) have the right to use, and are expected to use this policy.
- This policy can be used to raise any issue or issues of concern in the public interest relating to the Royal United Hospitals Bath NHS Foundation Trust, including but not limited to issues relating to processes, procedures, practice, or staff or management behaviour.
- This policy includes the recommendations of the independent (Freedom to Speak Up) review by Sir Robert Francis QC into whistleblowing in the NHS. This policy (produced by NHS Improvement and NHS England) is being adopted by all NHS organisations in England to help normalise the raising of all concerns for the benefit of all patients.
- The key principles of Freedom to Speak Up are:
 - Ensure a culture of safety and raising concerns and free from bullying;
 - Ensure a culture with visible leadership, valuing staff and reflective practice;
 - Any concerns will be raised, reported, investigated and that where relevant, mediation and dispute resolution will be provided;
 - All staff should receive training and support regarding how to raise concerns;
 - The Trust will be transparent and held accountable to providing a fair, honest and open behaviours and practices and be open to having external reviews for raising concerns if required.
- Any individual raising a genuine concern under this policy will not be at risk of losing their job at the RUH, or suffering from any form of reprisal as a result. No individual shall be discriminated against or victimised for raising concerns which they reasonably believe to be in the public interest under this policy either at the time or subsequently.
- The Public Interest Disclosure Act (1998) (PIDA) is in place to protect any individual who should be seen to be raising a concern or making a disclosure in the public interest. The act of raising a concern itself does not justify a legal claim by an employee; note that there can be no PIDA claim unless the employer has victimised the employee because they made a protected disclosure.
- Victimisation of a person who raises concerns which they reasonably believe to be in the public interest is a disciplinary matter and will be fully investigated in line with the Trust's Managing Conduct Policy.

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- Should the concern relate to another organisation the manager hearing the concern will raise it with the appropriate Executive Director, who will contact the appropriate Executive Director in the NHS organisation concerned.
- Both the individual raising concerns and those who are potentially the focus of a concern will be treated with fairness and openness.

Definition of Terms Used

Protected disclosure - individuals making a disclosure in the public interest via internal procedures or externally to the appropriate prescribed person, will be entitled to redress under the Public Interest Disclosure Act 1998 in the event that they are subjected to a detriment or are dismissed provided they:

- reasonably believe that the matter falls within one of the types of disclosure referred to above and that the disclosure is in the public interest;
- reasonably believe that the information, and any allegation it contains, are substantially true; and
- reasonably believe that the matter falls within the description of matters for which the person is prescribed.

Duties and Responsibilities

Our assurance to you

4.1. Role of The Board

The Board of the Royal United Hospital Bath NHS Foundation Trust is committed to this policy. If an individual raises a genuine concern in the public interest, under this policy they will not be at risk of losing their job at the RUH or suffering any form of retribution as a result. The Board will not tolerate anyone attempting to stop them, harass, bully or victimise them or otherwise take action against them in any way. Providing the individual is acting in the reasonable belief that it is in the public interest to disclose their concerns it does not matter if they are mistaken, although if evidence is found that any person has maliciously made a false allegation, in the knowledge that it is untrue then this will be investigated in line with the Trust's Managing Conduct Policy.

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4.2. Lead Executive

The Director of People is the Executive Director with overall responsibility for the review, ratification and application of this policy, including reporting to Strategic Workforce Committee and the Board of Directors. The Board of Directors' Secretary supports the Lead Executive in this role.

Claire Radley, Director of People (claire.radley@nhs.net)

4.3. Freedom to Speak Up Guardians

The Freedom to Speak Up Guardian (FTSU) and Divisional Guardians were appointed following the Recommendations by Sir Robert Francis's review in the NHS. The Divisional Guardians were nominated in to position, the trust guardian was appointed following an interview process.

There is a guardian for each Division (further details are set out on the intranet). The Trust FTSU Guardian supports the Divisional Guardians; they are all able to offer independent support and advice. They are all supported by Dr Henrietta Hughes and the National Guardian's Office. Information for accessing any of the FTSU Guardians is on the intranet.

4.4. Role of the Trust Freedom to Speak Up Guardian

Freedom to Speak Up Guardian (ruh-tr.freedomtospeakup@nhs.net or if an emergency on bleep 7062)

The Freedom to Speak Up Guardian will support the Freedom to Speak Up Divisional Guardians in conjunction with the Executive Lead to ensure that concerns are dealt with appropriately. They will safeguard the interests of the individual, ensuring that there are no repercussions for them either immediately or in the long term and that they have access to personal support as required. They will help to develop a culture where speaking up is recognised and valued through having direct access to the Chief Executive and Executive Lead. They will maintain a position of impartiality and independence at all times. They will work with The Board of Directors' Secretary and the Human Resources Department to prepare and provide reports to the Strategic Workforce Committee and the Board of Directors which identify key themes raised by staff (without identifying individuals), identify key concerns and potential action and learning that is required. They will contribute to any training (including national events) that supports the policy. They will ensure staff from minority groups, are encouraged to speak out and are not disadvantaged for doing so.

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4.5. Role of the Freedom to Speak Up Divisional Guardian

[INSERT LIST OF DIVISIONAL GUARDIANS]

The Freedom to Speak Up Divisional Guardians will act as a point of contact for individuals within their division who wish to raise a concern that they feel unable to raise with their manager. They will support and reassure those that raise concerns whilst responding quickly and taking the issue seriously. They will maintain confidentiality with the individual raising the concern at all times if that is what they wish unless there are legal requirements/ reasons for the information to be communicated further.

4.6. Role of Line Managers

All managers within the Trust are required to familiarise themselves with this policy and ensure their staff are aware of its contents. Managers are also required to follow the established protocol when any concern is raised directly with them and should encourage a culture of openness and transparency within their departments.

4.7. Role of Employees

All employees are expected to familiarise themselves with this policy and the protocol for raising concerns. Employees are expected to report concerns through the appropriate channels whenever they have a serious concern. Employees are encouraged to report openly rather than anonymously so that they can be contacted if more information is required and so that actions can be fed back to them. However all individuals do have the right to report anonymously if preferred.

If the situation arises where the concern cannot be resolved without revealing the employees identity then whether and how to proceed will be discussed with that employee. It may not be possible to maintain confidentiality if the manager or person to whom the concerns are expressed considers that there is an immediate risk to patient safety and that the matter must be addressed immediately. In such circumstances the employee raising the concern will be informed of this course of action and a support plan would be mutually agreed.

All employees are responsible for ensuring compliance with this policy.

Procedure

5.1. Key points of contact

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- The Trust Freedom to Speak Up Guardian (who can be contacted via the dedicated email address ruh-tr.freedomtospeakup@nhs.net or if an emergency on bleep 7062). This is an important role identified in the Freedom to Speak Up Review whose remit is to act as an independent and impartial source of advice to staff at any stage of raising a concern, with access to anyone in the organisation, including the Chief Executive, or if necessary, outside the organisation. There are also Freedom to Speak Up Divisional Guardians whose contact details are available on the staff intranet.
- The Non-Executive Directors with responsibility for whistleblowing:
 Joanna Hole, Senior Independent Director – j.hole@nhs.net
 Nigel Sullivan, Non-Executive Director – nigel.sullivan@nhs.net
 All of these people have been trained in receiving concerns and will provide information about where additional support can be obtained.
- If for any reason employees do not feel comfortable raising a concern internally, they can raise concerns with external bodies as listed below under “Independent Advice”.

5.2. What’s the difference between a grievance and a Freedom to Speak Up concern?

A Freedom to Speak Up concern is one raised in the public interest. Generally speaking, this type of concern is about a risk, malpractice or wrongdoing that affects others. It could be something which adversely affects patients, the public, other staff or the organisation itself. A grievance, on the other hand, is a personal complaint about an individual’s own employment situation: for example, a staff member may feel aggrieved if they think a management decision has affected them unfairly or that they are not being treated properly, and should therefore consult the Trust Grievance Policy. A freedom to speak up concern is where an individual raises information as a witness whereas a grievance is where the individual is a complainant.

For example:

If a staff member feels that they have been bullied or harassed by a colleague, contrary to the Trust’s Tackling Harassment & Bullying Policy then they would bring a complaint under the Trust’s Grievance Policy. This would be a personal complaint rather than one that is raised in the public interest.

On the other hand, if an individual identified a patient safety issue that was being ignored or not dealt with, they could raise this as a concern. This would usually be with their manager in the first instance and/or via the Trust Datix

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system, but if the issue was ignored then it could be raised with others in line with this policy, including external regulators. This is an example of a concerns raised in the public interest.

5.3. Independent Advice

The Trust tries to reconcile concerns internally but if it is felt that a satisfactory result has not occurred or if an individual would prefer to have independent advice at any stage, they may contact:

- Their Trade Union. The Trade Union may be able to offer advice and guidance, and employees are entitled to be accompanied by a Trade Union representative to any/all meetings regarding raising concerns.
- The National Whistleblowing Helpline (<https://speakup.direct>). This service offers free, confidential advice to all staff within the NHS and Social care on the speaking up process. To speak to a helpline advisor use the online contact form at <https://speakup.direct/contact-us/> or telephone 08000 724 725. There is also an answering service where message can be left for an advisor to call back at a convenient time. All messages are treated in strict confidence, or
- The independent charity Public Concern at Work runs a free helpline for people who are worried about wrong-doing in the workplace but who are unsure whether or how to raise the concern, for free confidential advice contact, 020 3117 2520, or visit www.pcaw.co.uk.

5.4. Who can use this policy?

The following people can use this policy and procedure to raise concerns:

- All members of staff;
- Staff of other parts of the NHS working at Royal United Hospital ;
- Trainees & students;
- Agency staff;
- Home workers;
- All self-employed NHS professionals;
- Contractors;
- Volunteers (including Governors).

Members of other NHS organisations can refer to their own organisation's policy

5.5. What to do if you are concerned

Please see Appendix 3 for flowcharts.

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Formal steps

When raising a concern the individual must make it clear that they are formally raising a matter of serious concern in the public interest and they must be clear if they wish their identity to remain confidential. Concerns may be raised verbally or in writing.

Concerns can be raised with any of the individuals identified below at any time; however it is recommended that concerns be raised with a line manager in the first instance (if appropriate).

- Concerns should initially be taken to the individual's Line Manager, Divisional Manager or Head of Division (or Executive Director for Corporate and Facilities divisions). They will meet with the individual within five working days of receipt of their communication. The outcome of the meeting will be recorded in writing and a copy given to the individual within three working days of the meeting.
- If the individual is not satisfied with the response then they should take your concerns to the Chief Executive or any other Executive Director. They will meet with the individual within five working days. The outcome of the meeting will be recorded in writing and a copy given to the individual within three working days of the meeting.
- If the individual is not satisfied with the response then they should take their concerns to the Chairman or any of the Non-Executive Directors.
- The Chairman or the Non-Executive Director will meet with the individual within ten working days. The outcome of the meeting will be recorded in writing and a copy given to the individual within three working days of the meeting.
- If the individual meets with the Chairman and is not satisfied with the response then they should take their concerns to a Non-Executive Director. If this has been done previously then please consider the further options outlined below.

Further Options

If the individual is not satisfied with the response to their concerns then they may consider any of the following actions:

- Further contact with a trade union at local or full time official level;
- Seeking further specialist guidance including discussing the matter further with colleagues or professional advisors;
- Consulting their Member of Parliament;

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- Contacting the NHS Fraud & Corruption Reporting Line 0800 028 4060 if your concern is about fraud, or the Trust's Local Counter Fraud Specialist, Andrew Morely, on 0845 300 3333 (andrew.morely@tiaa.co.uk);
- Contact the National Audit Office (<https://www.nao.org.uk/contact-us/whistleblowing-disclosures/>)
- Contacting the Secretary of State for Health
- Raising a concern regarding medical training via the Deanery (<http://www.severndeanery.nhs.uk/>)

Raising concerns with an outside body

Alternatively, concerns can be raised outside the organisation with:

NHSI Improvement (<https://improvement.nhs.uk/>) for concerns about:

- How NHS trusts and foundation trusts are being run;
- Other providers with an NHS provider licence;
- NHS procurement, choice and completion;
- The national tariff.

Care Quality Commission (<https://www.cqc.org.uk/>) for quality and safety concerns;

NHS England (<https://www.england.nhs.uk/>) for concerns about:

- Primary medical services (general practice);
- Primary dental services;
- Primary ophthalmic services;
- Local pharmaceutical services.

Health Education England (<https://hee.nhs.uk/>) for education and training in the NHS

NHS Counter Fraud Authority (<https://cfa.nhs.uk/>) for concerns about fraud and corruption.

Making a 'protected disclosure'

There are very specific criteria that need to be met for an individual to be covered by the Protected Disclosures Act when they raise a concern (to be able to claim the protection that accompanies it). There is also a defined list of 'prescribed persons', similar to the list of outside bodies above, whom an individual can make a protected disclosure to:

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<https://www.gov.uk/government/publications/blowing-the-whistle-list-of-prescribed-people-and-bodies--2/whistleblowing-list-of-prescribed-people-and-bodies>

To help individuals consider whether they might meet these criteria, independent advice can be sought from the National Whistleblowing Helpline for the NHS and Social Care, Public Concern at Work (see contact details on page 10 of this policy) or a personal legal representative.

Disclosure to the Media

Individuals are strongly discouraged from making a disclosure to the media as the first response to their concern. This could adversely prejudice and invalidate any investigations and evidence related to their concern. If all other routes have been exhausted and approach to the media is considered, then individuals should refer to the Trust Media Policy. Employees wishing to raise a concern should always follow the Raising Concerns Policy first.

Disclosure to another NHS organisation

An individual with an issue relating to another NHS organisation is required to contact their line manager and this matter should be raised by that manager with the appropriate Executive Director, who will contact the appropriate Executive Director in the NHS organisation concerned.

Reporting issues to a manager

If an individual believes there are strong reasons why you should not approach their Manager, Divisional Manager, Head of Division and/or the Chief Executive then they can speak to the Trust Freedom to Speak Up Guardian or approach a Non-Executive Director directly without following the earlier stages of this procedure.

Training

Individuals will receive advice and information regarding Raising Concerns from a number of sources:

- Trust Policies
- Line Manager
- Fraud Awareness Training
- Other communication methods (e.g. team brief, team meetings)
- Trade Unions
- Induction

Monitoring Compliance & Reporting

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7.1. Reporting

Many concerns will be raised openly with line managers as part of the day to day practice. The arrangements within this Policy should do nothing to undermine this.

Concerns may be raised more formally using a variety of different methods and routes, including via:

- Line managers, in accordance with this policy;
- Freedom to Speak Up Guardian or Divisional Guardians in accordance with this policy;
- Local Counter Fraud Services, where the concerns relate to fraud, bribery or corruption;
- The Director of Medical Education/Severn Deanery, for concerns raised by medical students.

The Board of Directors will be given high level information about all concerns raised by staff through this policy (no matter the route) and what the Trust is doing to address any problems. Similar high level information will be included in the Trust's annual report.

The Trust Freedom to Speak Up Guardian will work with the Board of Directors' Secretary and the Human Resources Department to prepare and provide quarterly reports to the Strategic Workforce Committee (and to the Board of Directors at least bi-annually) which identify key themes raised by staff, identify key concerns and potential action and learning that is required.

To ensure confidentiality and to protect the identity of colleagues, reports will include a case number, details of the concern raised and an outcome.

The reporting process is set out in flow-chart form in Appendix 5.

7.2. Monitoring Compliance

In the spirit of developing a learning culture, at the conclusion of an investigation under this policy, the individual raising the concern will also be asked for their opinion on how the concern was handled. This feedback will be sought by the person with whom the concern was raised and will be fed back to the Freedom to Speak Up Guardian.

Confidence in raising concerns will be monitored annually by the responses to the Staff Survey.

The HR Department will be responsible for monitoring that this procedure is followed and may be consulted at any stage throughout the process to offer advice to those involved.

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Monitoring information will be published within the bi-monthly HR Performance Report, which in turn will be reported to the Strategic Workforce Committee, a sub-group of Management Board.

Should the monitoring uncover any shortfalls in the implementation of the policy, the HR team will work with the relevant management team to draw up an action plan for improvement. This action plan may include:

- Additional training for line managers and/or employees;
- A risk assessment;
- An action plan in support of the risk assessment;

Review

This policy will be subject to a planned review every three years as part of the Trust's Policy Review Process. It is recognised however that there may be updates required in the interim arising from amendments or release of new regulations, Codes of Practice or statutory provisions or guidance from the Department of Health or professional bodies. These updates will be made as soon as practicable to reflect and inform the Trust's revised policy and practise.

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References

NHS Improvement & NHS England “Freedom to speak up: raising concerns (whistleblowing) policy for the NHS” April 2016

National Audit Office <https://www.nao.org.uk/contact-us/whistleblowing-disclosures/>

National Guardian’s Office <https://www.cqc.org.uk/national-guardians-office/content/national-guardians-office>

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Appendix 1: Further Useful Guidance for Staff

National whistleblowing helpline for staff

Independent advice can be sought from the National Whistleblowing helpline. This service offers free, confidential advice to all staff within the NHS and Social Care. The helpline will be able to clarify whether an individual has a “whistleblowing” concern and explain the processes to raise the concern, or will advise on how to escalate the concern if the individual feels that the issues raised has not been dealt with appropriately. National Whistleblowing helpline will advise on rights under the Public Interest Disclosure Act 1998 (PIDA) which is aimed at protecting those who raise a patient safety or other issue in the public interest by following the correct procedures.

To speak to a helpline advisor telephone: **08000 724 725**. The phone line is open Mon-Fri 8am-6pm. If calling out-of-hours or on a bank holiday, there is also an answering service where a message can be left for an advisor to call back at a convenient time.

Alternatively, email: enquiries@wbhelpline.org.uk

All messages are treated in strict confidence.

Further information is obtainable through the National Whistleblowing helpline website.

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Appendix 2: What to do when a concern has been raised

The following should be noted:

If you are a manager/senior member of staff you can lead by example. Be clear to your teams what sort of behaviour is unacceptable. Encourage staff to ask you what is appropriate if they are unsure.

If you find wrongdoing or a potential risk to patient safety, take it seriously and deal with it immediately.

Responding to a concern:

At all times you should seek to encourage the member of staff raising concerns to do so directly with the person(s) concerned or within the department they work, but should not seek to pressurise them to do so.

Remember that there are different perspectives to every story - you will always need to be aware that there may be other issues that are either the real cause for concern or which are running concurrently to the concern raised.

Whether a staff member raises concerns with you verbally or in writing, contemporaneous notes must be kept by you for (a) your personal use and (b) future reference should the case be taken further. The notes must be dated and kept strictly confidential. These may be anonymised, where necessary.

If another individual is the person identified as the cause for concern they have rights which you should also consider. If you resolve the concern immediately to the satisfaction of the person raising the concern, you may not need to inform the second party. But if you need to pursue the concern further and involve other parties, to assess the risk for example, that second party has a right to be informed. Every effort should be made to do this in a sensitive manner and still protecting the interests of the person raising concerns.

Determine whether there are grounds for concern and investigate if necessary as soon as possible. If the concern is potentially very serious or wide-reaching, consider who should handle the investigation and know when to ask for help. If asked, put your response in writing. When in doubt, advice should be sought from the Human Resources Department, the Trust Freedom to Speak Up Guardian and/or the Board of Directors' Secretary.

Remember that you may have to explain how you have handled the concern.

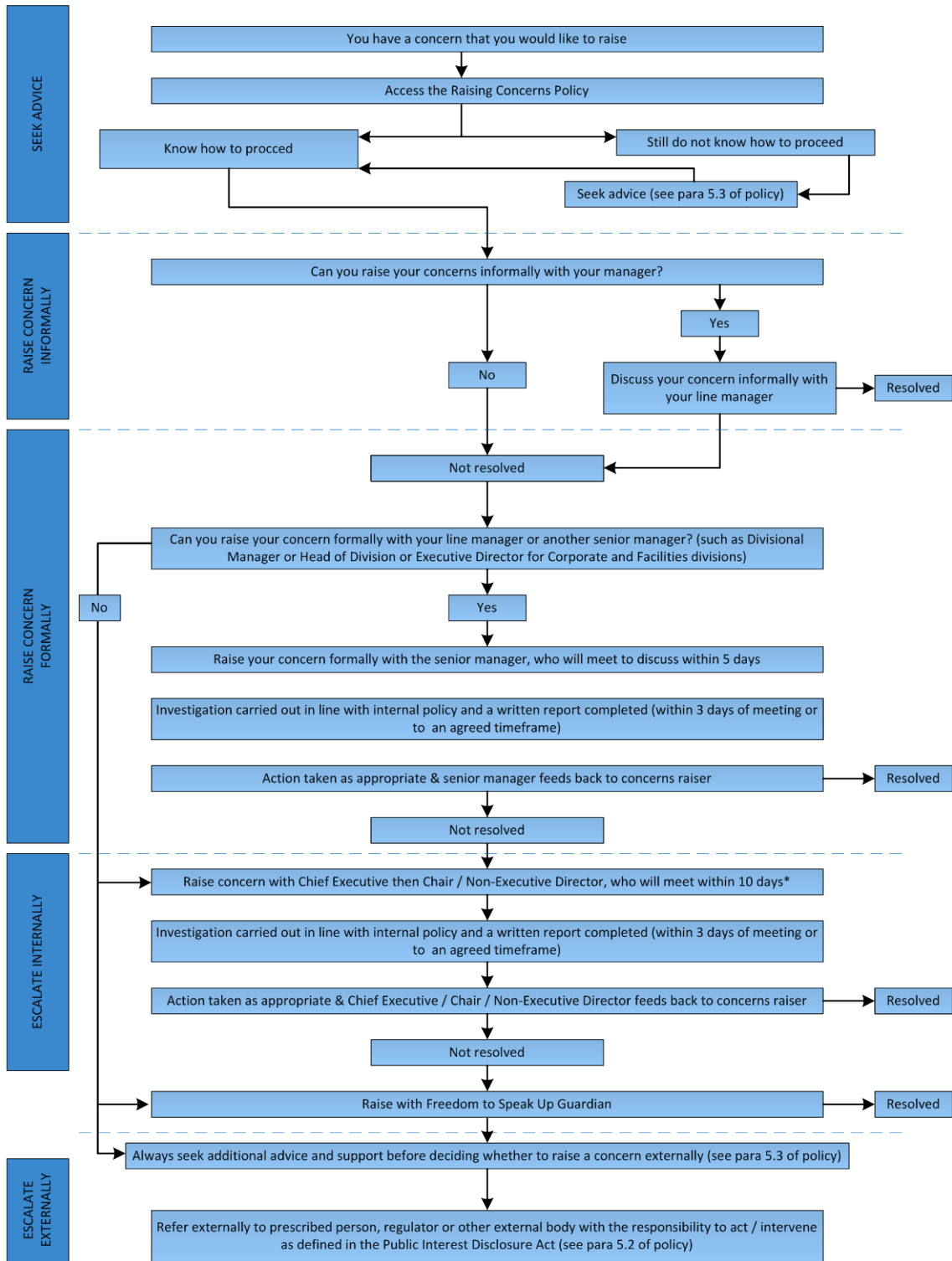
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Consider reporting the concern to your Divisional Manager/Head of Division /other member of your Divisional t and/or another appropriate manager or executive in the organisation.

Where malpractice or a serious safety risk has been identified and addressed, discuss with your Division/an appropriate Executive Director how the appropriate regulatory body should be advised of this outcome.

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Appendix 3: Raising a Concern Flowchart



* If the Chief Executive is unable to resolve your concerns, you should then raise them with the Chair or Non-Executive Director.

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Appendix 4: PREVENT

PREVENT is one of the four elements of “Contest”, the UK Government’s counter terrorism strategy. These include:

Protect: border controls, security fences, locks on doors etc.

Prepare: plans to mitigate the effects of terrorist activity

Pursue: police and intelligence service activity to catch or control terrorists

Prevent: stopping people becoming terrorists in the first place.

Prevent is seen as the most effective long term solution to the threat of terrorism because it aims to stop the problem before it starts. *Prevent* is said to occupy the “pre-criminal space” where anybody can intervene to help stop a person becoming a terrorist in the first place.

What does this have to do with the health service?

Healthcare staff may work with, meet and treat people who are vulnerable to radicalisation. Where there are signs that someone has been or is being drawn into terrorism, healthcare staff may notice and be able to act to prevent someone from becoming a terrorist. This is no different from safeguarding vulnerable individuals from other forms of exploitation.

Indicators may include:

- Graffiti symbols, writing or artwork promoting extremists messages or images.
- Patients or staff accessing terrorist related material on line, including through social networking sites.
- Parental/family reports of changes in behaviour, friendships or actions and requests for assistance.
- Patient voicing opinions drawn from terrorist related ideologies and narrative
- Use of extremist or hate terms to exclude others or incite violence.

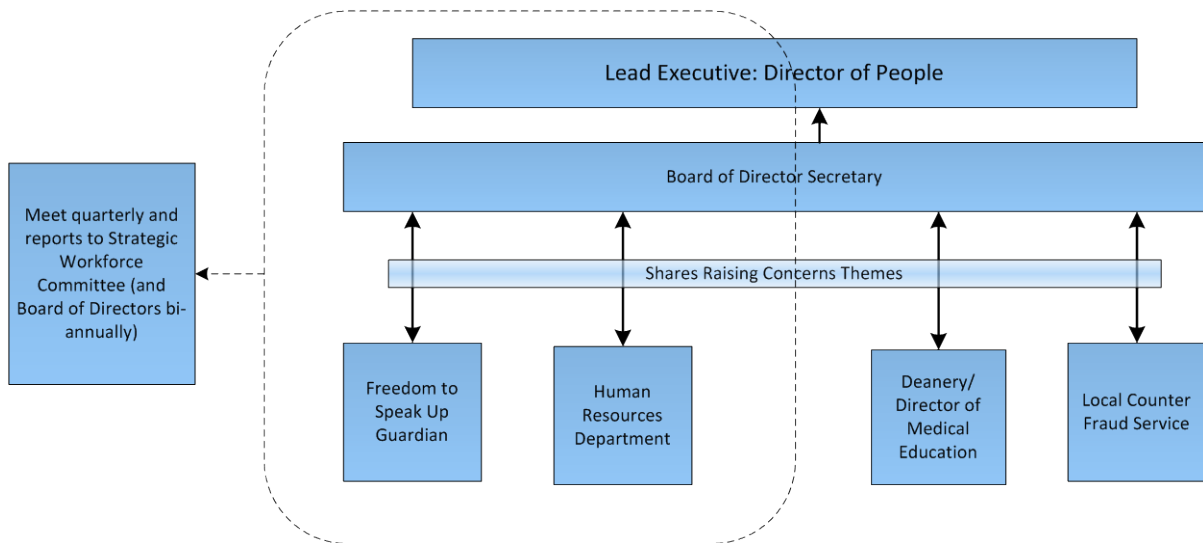
Raising concerns:

Should any staff member have a concern relating to an individual’s behaviour which may indicate that they may be being drawn into terrorist related activity they should raise a concern.

To raise concerns, call the confidential voicemail service: **01225 826212**

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Appendix 5: Information & Report Flowchart



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Document Control Information

Ratification Assurance Statement

Dear Claire

Please review the following information to support the ratification of the below named document.

Name of document: Freedom to Speak Up: Raising Concerns Policy

Name of author: Jo Hodson/Xavier Bell
Freedom to Speak Up Guardian / Board of Directors'

Job Title: Secretary

I, the above named author confirm that:

- The Policy presented for ratification meets all legislative, best practice and other guidance issued and known to me at the time of development of the Policy;
- I am not aware of any omissions to the Policy, and I will bring to the attention of the Executive Director any information which may affect the validity of the Policy presented as soon as this becomes known;
- The Policy meets the requirements as outlined in the document entitled Trust-wide Policy for the Development and Management of Policies (v4.0);
- I have undertaken appropriate and thorough consultation on this Policy and I have documented the names of those individuals who responded as part of the consultation within the document. I have also fed back to responders to the consultation on the changes made to the Policy following consultation;
- I will send the Policy and signed ratification checklist to the Policy Coordinator for publication at my earliest opportunity following ratification;
- I will keep this Policy under review and ensure that it is reviewed prior to the review date.

Signature of Author: Jo Hodson & Xavier Bell **Date:** _____

Name of Person Ratifying this policy: Claire Radley

Job Title: Director of People

Signature: _____ **Date:** _____

To the person approving this policy:

Please ensure this page has been completed correctly, then print, sign and **post this page only** to: Director's Office, Wolfson Centre, (D1), Royal United Hospital

The **whole policy** must be sent electronically to: ruh-tr.policies@nhs.net

Consultation Schedule

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Name and Title of Individual	Date Consulted
Deputy Director of People	17/10/2018
HR Business Partners	17/10/2018
Complaints Manager	17/10/2018
Head of Patient Experience	17/10/2018
Divisional Managers	17/10/2018
Local Counter Fraud Specialist Officer	17/10/2018
Head of Risk & Assurance	17/10/2018
Head of Audit & Quality Assurance	17/10/2018
Health & Safety Manager	17/10/2018
Staff Side Chair	17/10/2018
Executive Team	17/10/2018
Head of Communications	17/10/2018
Local FTSU Guardians	17/10/2018
Trust FTSU Guardian	17/10/2018
FTSU Lead Non-Executive Directors	17/10/2018

The following people have submitted responses to the consultation process:

Name and Title of Individual	Date Responded
Trust FTSU Guardian	18/10/2018
FTSU Lead Non-Executive Director	22/10/2018
Divisional Manager, Surgery	22/10/2018

Name of Committee/s (if applicable)	Date of Committee
TCNC Policy Sub-Group	
TCNC	
Strategic Workforce Committee	
Management Board	
Board of Directors	

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Equality Impact: (A) Assessment Screening

1. Title of document/service for assessment	Freedom to Speak Up: Raising Concerns Policy	
2. Date of assessment		
3. Date for review		
4. Directorate/Service	Corporate	
5. Approval Committee		
6. Does the document/service affect one group less or more favourably than another on the basis of:		
Protected characteristic:	Yes/No	Rationale
• Age		
• Disability		
• Gender reassignment		
• Pregnancy and maternity		
• Race		
• Religion and belief		
• Sex		
• Sexual orientation		
• Marriage and civil partnership		
7. If you have identified potential discrimination, are the exceptions valid, legal and/or justified?		
8. If the answers to the above question is 'no' then adjust the element of the document / service to remove the disadvantage identified.		
9. If neither of the above is possible, take no further action until you have contacted your EIA Divisional / Directorate link for review and support		
Signature of person completing the Equality Impact Assessment		
Name		
Time		
Date		
Chair of decision making Board / Group / Committee approval and sign off		
Name		
Time		
Date		
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Equality Impact: (B) Full Analysis

Note:

Only complete this section if you answered **YES** to any of the questions in the **Equality Impact: (A) Screening Assessment**

Equality Analysis is a process of systematically analysing a new or existing policy or service to identify what impact or likely impact it will have on different groups within the community. The primary concern is to identify any discriminatory or negative consequences for a particular group or sector of the community. Equality Analysis can be carried out in relation to service delivery as well as employment policies and strategies.

This template has been developed to use as a framework when carrying out an Equality Analysis on a policy, service or function. It is intended that this is used as a working document throughout the process, with a final version including the action plan section being published on the Royal United Hospital, Bath NHS Trust website.

1. Identify the aims of the policy or service and how it is implemented.		
	Key questions	Answers / Notes
1.1	Briefly describe purpose of the service/policy including <ul style="list-style-type: none"> ● How the service/policy is delivered and by whom ● If responsibility for its implementation is shared with other departments or organisations ● Intended outcomes 	
1.2	Provide brief details of the scope of the policy or service being reviewed, for example: <ul style="list-style-type: none"> ● Is it a new service/policy or review of an existing one? ● Is it a national requirement?. ● How much room for review is there? 	
1.3	Do the aims of this policy link to or conflict with any other policies of the Trust?	

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2. Consideration of available data, research and information

Monitoring data and other information should be used to help you analyse whether you are delivering a fair and equal service. Please consider the availability of the following as potential sources:

- **Demographic** data and other statistics, including census findings
- Recent **research** findings (local and national)
- Results from **consultation or engagement** you have undertaken
- Service user **monitoring data** (including ethnicity, gender, disability, religion/belief, sexual orientation and age)
- Information from **relevant groups** or agencies, for example trade unions and voluntary/community organisations
- Analysis of records of enquiries about your service, or **complaints** or **compliments** about them
- Recommendations of **external inspections** or audit reports

	Key questions	Data, research and information that you can refer to
2.1	What is the equalities profile of the team delivering the service/policy?	
2.2	What equalities training have staff received?	
2.3	What is the equalities profile of service users?	
2.4	What other data do you have in terms of service users or staff? (e.g results of customer satisfaction surveys, consultation findings). Are there any gaps?	
2.5	What engagement or consultation has been undertaken as part of this EIA and with whom? What were the results?	
2.6	If you are planning to undertake any consultation in the future regarding this service or policy, how will you include equalities considerations within this?	

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3. Assessment of impact: 'Equality analysis'

Based upon any data you have considered, or the results of consultation or research, use the spaces below to demonstrate you have analysed how the service or policy:

- Meets any particular needs of equalities groups or helps promote equality in some way.
- Could have a negative or adverse impact for any of the equalities groups

		Examples of what the service has done to promote equality	Examples of actual or potential negative or adverse impact and what steps have been or could be taken to address this
3.1	Gender Identify the impact/potential impact of the policy on women and men. (Are there any issues regarding pregnancy and maternity?)		
3.2	Transgender Identify the impact/potential impact of the policy on transgender people		
3.3	Disability Identify the impact/potential impact of the policy on disabled people (ensure consideration of a range of impairments including both physical and mental impairments)		
3.4	Age Identify the impact/potential impact of the policy on different age groups		
3.5	Race Identify the impact/potential impact on different black and minority ethnic groups		
3.6	Sexual orientation Identify the impact/potential impact of the policy on lesbians, gay, bisexual & heterosexual people		
3.7	Religion/belief Identify the impact/potential impact of the policy on people of different religious/faith groups and also upon those with no religion.		
3.8	Marriage/Civil Partnership Identify the impact/potential impact of the policy		
3.9	Pregnancy/Maternity Identify the impact/potential impact of the policy		

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4. Royal United Hospital, Bath Equality Impact Assessment Improvement Plan

Please list actions that you plan to take as a result of this assessment. These actions should be based upon the analysis of data and engagement, any gaps in the data you have identified, and any steps you will be taking to address any negative impacts or remove barriers. The actions need to be built into your service planning framework. Actions/targets should be measurable, achievable, realistic and time framed.

Issues identified	Actions required	Progress milestones	Officer responsible	By when

5. Sign off and publishing

Once you have completed this form, it needs to be 'approved' by your Line Manager or their nominated officer. Please ensure that it is submitted to the body ratifying your policy or service change with your report/proposal. Keep a copy for your own records.

Signed off by:

Date:

Document name:

Ref.:

Issue date:

Status:

Author:

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Freedom to Speak Up Vision and Strategy

Purpose

Sir Robert Francis's 'Freedom to Speak Up' review in February 2015 highlighted the need for the creation of the National Guardian and Freedom to Speak Up Guardians at every Trust in England as a 'vital step towards developing the right culture and environment for speaking up'.

Enabling our staff to speak up is a central aspect of our Trust vision and goals, particularly to be '*recognised as a listening organisation*' and to '*be an outstanding place to work where staff can flourish*'. It will also enable us to develop a culture of safe care and of learning and improvement.

It is central to our Trust values. Key to achieving our value *Everyone Matters* is the behaviour '*Speak Up – encourage everyone to have a voice and help people to be heard*'.



This document sets out the Trust's Freedom to Speak Up vision and strategy and should be read alongside the Trust's Raising Concerns Policy. There are also links to our commitment to Equality, Diversity and Inclusion and our Code of Expectations.

Our Vision

To promote and maintain an open and transparent culture across the Trust, ensuring that all members of staff feel safe and confident to speak up about issues that concern them.

Our Strategy

The Trust will take the following actions to deliver this vision by: -

- Implementing policies which clearly differentiate between a grievance and raising a concern;
- Responding to concerns in a timely way, ensuring timely resolution and clear, appropriate communication with staff to demonstrate the reality of the Trust's commitment;
- Providing effective awareness training for all staff so they are clear about how to raise concerns;
- Ensuring everyone is clear about their roles and responsibilities when handling concerns and are supported to do so effectively;
- Providing regular communications to all staff (including those permanently employed on a full-time/part-time basis, temporary/ contracted workers and volunteers) to raise the profile and understanding of our raising concerns arrangements;
- Communicating key findings to staff about the level and type of concerns raised and any resultant actions taken, as is appropriate under the scope of confidentiality;
- Developing a training strategy which sets out who, how and when staff will receive Freedom to Speak Up training;
- Sharing good practice and learning from concerns raised using a variety of communication channels, with the key aim of fostering openness and transparency;
- Adopting good practice identified through active involvement with regional networks and the National Guardian's Office; and
- Actively seeking the opinion of staff to assess that they are aware of and, are confident in using local processes and use this feedback to ensure our arrangements are improved based on staff experiences and learning.

Monitoring

The following **annual staff survey results** provide an important barometer of our Speaking Up culture.

- Senior managers in this organisation promote a culture of patient / service user safety
- Staff are encouraged to challenge safety practices if they are not working
- In my team / department, we discuss ways to improve staff / patient safety
- If you were concerned about unsafe clinical practice, would you know how to report it?
- I would feel secure raising concerns about unsafe clinical practice
- I am confident that my organisation would address my concern
- My organisation treats staff who are involved in an error, near miss or incident fairly
- My organisation encourages us to report errors, near misses or incidents
- When errors, near misses or incidents are reported, my organisation takes action to ensure that they do not happen again
- We are given feedback about changes made in response to reported errors, near misses and incidents

The **number of referrals** made to the Freedom to Speak Up Guardian. Our ambition in the first three years is to achieve an increase in the number of referrals as evidence that staff are feeling more confident to raise concerns.

The **nature of the referrals** and in particular the themes emerging.

The **number and nature of staff who have been trained** about Freedom to Speak Up.

The **number of Freedom to Speak Up Champions**, and the extent to which their **diversity** represents the demographics of Trust staff.

The **annual reporting to the National Guardian's Office** will also be available locally.

Assurance

A Freedom To Speak Up report will be presented to the Board twice a year by the Freedom To Speak Up Guardian and the Executive Lead for Raising Concerns which will include: -

- An assessment of the efficacy of the Trust's Raising Concern Policy;
- An overview of the cases reported and the themes identified;
- Benchmarking of the Trust against other Trusts in the region and nationally;
- Interactions between the Freedom to Speak Up Guardian and external bodies and network, and their engagement with senior managers and members of the executive team; and
- A work plan for the next 12 months.

The Freedom to Speak Up Guardian will present an update quarterly to the Strategic Workforce Committee.

Our Commitment

Our Board and senior leadership team will support the achievement of this by: -

- Modelling the behaviours to promote a positive culture in the organisation;
- Providing the resources required to deliver an effective Freedom to Speak Up function; and
- Having oversight to ensure the policy and procedures are being effectively implemented.

Our FTSU Guardian and other champions have a key role in: -

- Raising the profile of 'raising concerns' in our organisation;
- Providing confidential advice and support to staff in relation to concerns they have about patient safety; and
- Providing confidential advice and support to staff in relation to the way their concern has been handled.

The Trust are fully engaged with the National Guardian's Office and the local network of Freedom to Speak Up Guardians to learn and share best practice.

Freedom to Speak Up self-review tool for NHS trusts and foundation trusts

May 2018

How to use this tool

Effective speaking up arrangements help to protect patients and improve the experience of NHS workers. Having a healthy speaking up culture is evidence of a well-led trust.

NHS Improvement and the National Guardian's Office have published a [guide](#) setting out expectations of boards in relation to Freedom to Speak Up (FTSU) to help boards create a culture that is responsive to feedback and focused on learning and continual improvement.

This self-review tool accompanying the guide will enable boards to carry out in-depth reviews of leadership and governance arrangements in relation to FTSU and identify areas to develop and improve.

The Care Quality Commission (CQC) assesses a trust's speaking up culture during inspections under key line of enquiry (KLOE) 3 as part of the well-led question. This guide is aligned with the good practice set out in the well-led framework, which contains references to speaking up in KLOE 3 and will be shared with Inspectors as part of the CQC's assessment framework for well-led.

Completing the self-review tool and developing an improvement action plan will help trusts to evidence their commitment to embedding speaking up and help oversight bodies to evaluate how healthy a trust's speaking up culture is.

Self review indicator (Aligned to well-led KLOEs)	To what extent is this expectation being met?	What are the principal actions required for development?	How is the board assured it is meeting the expectation? Evidence
Our expectations			
Leaders are knowledgeable about FTSU			
Senior leaders are knowledgeable and up to date about FTSU and the executive and non-executive leads are aware of guidance from the National Guardian's Office.	The Board of Directors receive an annual update, there is an intranet page for FTSU, and the FTSU guardian is active in pursuing her role across the Trust.	More regular updates to Board & Management Board A FTSU vision & strategy will be developed Up-to-date guidance circulated to Board and senior leaders	Board and Management Board work-plans have been updated with new guidance and good practice from the NGO.
Senior leaders can readily articulate the trust's FTSU vision and key learning from issues that workers have spoken up about and regularly communicate the value of speaking up.	Board members can currently articulate why FTSU is important, and the Trust's	A FTSU vision & strategy is currently being developed, with a draft to be presented to Board of Directors in October 2018.	The Board receive an annual update, which includes key learning from issues raised, and key Executives and Non-Executives engage

	commitment to a culture that values speaking up by staff.		closely with the FTSU Guardian.
They can provide evidence that they have a leadership strategy and development programme that emphasises the importance of learning from issues raised by people who speak up.	No current leadership strategy in place	Leadership strategy currently being developed, which emphasises a learning culture	People Strategy and delivery plan (including leadership strategy) monitored through Strategic Workforce Committee
Senior leaders can describe the part they played in creating and launching the trust's FTSU vision and strategy.	The FTSU vision and strategy was drafted with involvement from the Executive Team, Strategic Workforce Committee, the Trust's FTSU Guardian and Trust Board Secretary	A draft FTSU vision & strategy has been developed, with a draft to be presented to Board of Directors in October 2018. Their involvement in the launch of the strategy will be discussed at the Board meeting.	Board involvement in reviewing and agreeing the vision and strategy. Monitoring of strategy included in annual report to Board.
Leaders have a structured approach to FTSU			
There is a clear FTSU vision, translated into a robust and realistic strategy that links speaking up with patient safety, staff experience and continuous improvement.	N/A	A FTSU vision & strategy has been developed, with a draft to be presented to	This will be reviewed, fed into and approved by Board.

		Board of Directors in October 2018.	
There is an up-to-date <u>speaking up policy</u> that reflects the minimum standards set out by NHS Improvement.	The policy is currently under review following the KPMG Audit in 2018.	The FTSU Guardian and the Board Secretary will update the policy for approval at the October Management Board.	Board will approve the revised policy in October.
The FTSU strategy has been developed using a structured approach in collaboration with a range of stakeholders (including the FTSU Guardian) and it aligns with existing guidance from the National Guardian.	The FTSU vision and strategy was drafted with involvement from the Executive Team, Strategic Workforce Committee, the Trust's FTSU Guardian and Trust Board Secretary	A FTSU vision & strategy has been developed, with a draft to be presented to Board of Directors in October 2018.	This will be reviewed, fed into and approved by Board.
Progress against the strategy and compliance with the policy are regularly reviewed using a range of qualitative and quantitative measures.	The Board of Directors currently receives an annual FTSU update. This will move to twice	The Lead Executive with support from the FTSU Guardian will consider what qualitative and quantitative measures should be reviewed. The proposed measures	Board currently review an annual report. This will move to twice yearly, and will include a discussion on the usefulness or otherwise

	yearly.	are included in the strategy document	of chosen metrics.
Leaders actively shape the speaking up culture			
All senior leaders take an interest in the trust's speaking up culture and are proactive in developing ideas and initiatives to support speaking up.	Recent KPMG audit commented that FTSU Guardian has good access to Executive Directors (including Chief Exec) and Chair, and that staff recognise senior leadership's commitment to open culture.	FTSU to be added as a standing agenda item (alongside updates on patient safety visits) to all Executive Team meetings to strengthen opportunities to develop ideas and initiatives	KPMG Audit 2018, presented to Board and its Audit Committee, confirms that this is the case.
They can evidence that they robustly challenge themselves to improve patient safety, and develop a culture of continuous improvement, openness and honesty.	The Executive Team and Non-Executives participate in patient safety visits and there are subsequent discussions at	The OD Programme "improving together" will provide additional opportunities for managers and staff across the organisation to develop a culture of continuous	The Board participates in the patient/staff stories on a monthly basis, and is committed to and fully involved in the OD programme. It features regularly at Board Development

	Executive team meetings, there are patient/staff stories at Board, and action plans around improving staff survey results on reporting clinical near-misses.	improvement, openness and honesty.	Sessions
Senior leaders are visible, approachable and use a variety of methods to seek and act on feedback from workers.	This is evidenced by patient safety visits by the Board; the KPMG report specifically noted that Chief Executive is very approachable and visible across the Trust. E&Y Well-Led report noted that Medical Director and DoNM are both visible and approachable.		Evidence set out in the following reports, reviewed by Board: KPMG Audit 2018 E&Y Report 2018

<p>Senior leaders prioritise speaking up and work in partnership with their FTSU Guardian.</p>	<p>Members of the Executive Team will meet with the FTSU Guardian on request. There are regular meetings in place with key Executives.</p>	<p>The development of the new Vision and Strategy for FTSU will provide an opportunity for the Executive Team and the Trust as a whole to re-focus on FTSU.</p>	
<p>Senior leaders model speaking up by acknowledging mistakes and making improvements.</p>	<p>The draft Vision and Strategy recognises the importance of senior leaders modelling these behaviours</p>	<p>Delivery plan for the strategy will include details of how we do this</p>	<p>Key measures will be reported to the Board as part of the bi-annual reporting cycle</p>
<p>The board can state with confidence that workers know how to speak up; do so with confidence and are treated fairly.</p>	<p>KPMG Audit focus group found that staff are aware of FTSU processes and confident in the process; however staff survey results indicate that staff are not</p>	<p>Key measures to assess confidence in reporting and being treated fairly included in the Vision and Strategy</p>	<p>Key measures will be reported to the Board as part of the bi-annual reporting cycle</p>

	comfortable raising certain concerns. Staff survey action plans in the Divisions address these results		
Leaders are clear about their role and responsibilities			
The trust has a named executive and a named non-executive director responsible for speaking up and both are clear about their role and responsibility.	Director of People is Lead Executive and there are two named Non-Executive Directors.	Policy needs to be updated to identify correct individuals. Need to review training opportunities for named NEDs.	KPMG Audit 2018, presented to Board and its Audit Committee, confirms that this is in place.
They, along with the chief executive and chair, meet regularly with the FTSU Guardian and provide appropriate advice and support.	These visits take place regularly.	N/A	KPMG Audit 2018, presented to Board and its Audit Committee, confirms that this takes place.
Other senior leaders support the FTSU Guardian as required.	The FTSU Guardian is visible across the organisation, and senior leaders	A more structured approach to engagement with divisional and departmental leadership	KPMG Audit 2018, presented to Board and its Audit Committee, confirms that this takes

	are aware of her remit and role and support it.	is required. This is covered in the draft FTSU Vision and Strategy	place.
Leaders are confident that wider concerns are identified and managed			
Senior leaders have ensured that the FTSU Guardian has ready access to applicable sources of data to enable them to triangulate speaking up issues to proactively identify potential concerns.	The FTSU Guardian currently collects data locally, and has access to some data from HR on formal Whistleblowing investigations.	A review of the policy and reporting process is recommended as an action by KPMG and has been accepted by the Trust. The aim is to ensure that FTSU and Raising Concerns data is brought together from across the Trust to ensure that themes can be properly identified.	This will be covered in future reports to the Board, to ensure that data is triangulated to provide a full picture for the Board's consideration.
The FTSU Guardian has ready access to senior leaders and others to enable them to escalate patient safety issues rapidly, preserving confidence as appropriate.	Yes – the FTSU Guardian has access to the Executive Team and meets regularly with the Chief Executive	This part of the FTSU system is currently working very well.	The interactions between the FTSU Guardian and senior leaders will be covered in future reports to the Board.

	and Chair.		
Leaders receive assurance in a variety of forms			
Workers in all areas know, understand and support the FTSU vision, are aware of the policy and have confidence in the speaking up process.	The recent KPMG Audit indicates that staff understand the process; however staff survey results from 2017/8 indicate that there is more work required to increase confidence in the process.	Key measures to assess confidence in reporting and being treated fairly included in the Vision and Strategy	Key measures will be reported to the Board as part of the bi-annual reporting cycle
Steps are taken to identify and remove barriers to speaking up for those in more vulnerable groups, such as Black, Asian or minority ethnic (BAME), workers and agency workers	Actions identified in KPMG audit. Two staff networks established in the last month (BAME and Disability). Terms of Reference include 'speaking	Further staff networks to be established. Key updates from the networks to be shared through Strategic Workforce Committee	Diversity and inclusion updates to Management Board and Board, including progress made by networks

	up'		
Speak up issues that raise immediate patient safety concerns are quickly escalated	The FTSU Guardian has confirmed that issues relating to patient safety are quickly escalated. She would take issues directly to divisions or to relevant clinical leads, and ensures cover via one of the local Guardians when she is on leave.	This will be covered in more detail in the FTSU strategy.	This will be covered in the reports to Board.
Action is taken to address evidence that workers have been victimised as a result of speaking up, regardless of seniority	There is no evidence of cases where people have been victimised, and the FTSU Guardian is not aware of any such cases.	The policy makes it clear that victimisation is not tolerated.	The Board is aware of the policy statement and of the Trust's obligation to protect those that raise concerns.

Lessons learnt are shared widely both within relevant service areas and across the trust	This does not currently take place in any structured manner. This has been identified as an action required via the KPMG audit report.	The FTSU Vision and strategy will include awareness-raising and opportunities to ensure lessons can be shared.	The Board will be involved in the development and approval of the FTSU strategy and vision.
The handling of speaking up issues is routinely audited to ensure that the FTSU policy is being implemented	Audited by KPMG in 2018 as part of internal audit.	Consideration needs to be given to a more regular internal audit system.	
FTSU policies and procedures are reviewed and improved using feedback from workers	Needs input from Jo Hodson		
The board receives a report, at least every six months, from the FTSU Guardian.	Currently received annually.	Need to increase frequency of reporting to Board.	
Leaders engage with all relevant stakeholders			
A diverse range of workers' views are sought, heard and acted upon to shape the culture of the organisation in relation to speaking up; these are reflected in the	The Trust's FTSU vision and strategy are under	The draft vision and strategy will be reviewed by the Board in October	The Trust has previously engaged effectively with staff in developing the Trust

<p>FTSU vision and plan.</p>	<p>development, and will involve seeking input from staff. The Improving Together programme requires all staff to be involved in addressing issues and problems</p>		<p>values. The number and type of staff involved in the Improving Together programme is reported to the Programme Board and Board</p>
<p>Issues raised via speaking up are part of the performance data discussed openly with commissioners, CQC and NHS Improvement.</p>	<p>This is currently the case, in that high profile speaking up items feature on the agenda with regulators.</p>	<p>Once the FTSU report is properly developed as per KPMG audit this can be made a more regular agenda item with regulators during formal liaison meetings.</p>	<p>This will be covered in FTSU reports to the Board. The Board is assured that this is currently taking place, as the Chair and Executives regularly meet with NHSI to discuss FTSU matters, and Whistleblowing and FTSU discussions are referenced in the recent CQC report.</p>

<p>Discussion of FTSU matters regularly takes place in the public section of the board meetings (while respecting the confidentiality of individuals).</p>	<p>The FTSU report is presented in the public section of the Board meetings.</p>	<p>N/A</p>	<p>N/A</p>
<p>The trust's annual report contains high level, anonymised data relating to speaking up as well as information on actions the trust is taking to support a positive speaking up culture.</p>	<p>The annual report does not contain any specific information on FTSU.</p>	<p>The annual report for 2018/19 will include an FTSU section. This will be developed from the various reports to the Board of Directors, with input from the FTSU Guardian, and will be reviewed and approved by the Board.</p>	<p>The Board of Directors review the draft report and it will be reviewed and approved by the Audit Committee.</p>
<p>Reviews and audits are shared externally to support improvement elsewhere.</p>	<p>This does not currently take place, although the FTSU Guardian meets with other guardians regionally where themes and outcomes are discussed.</p>	<p>The Trust's FTSU Guardian and Lead Executive will explore avenues for engaging more effectively with external networks and sharing learning.</p>	<p>N/A</p>

<p>Senior leaders work openly and positively with regional FTSU Guardians and the National Guardian to continually improve the trust's speaking up culture</p>	<p>The FTSU Guardian meets with other guardians regionally where themes and outcomes are discussed.</p>	<p>Consideration will be given to how other senior leaders, in particular the Lead Executive, can engage more effectively with regional and national networks.</p>	<p>N/A</p>
<p>Senior leaders encourage their FTSU Guardians to develop bilateral relationships with regulators, inspectors and other local FTSU Guardians</p>	<p>The FTSU Guardian is encouraged and required to be involved in regional networks. The Guardian meets with regulators as part of inspections.</p>	<p>More opportunities could be created for the FTSU Guardian to engage with regulators.</p>	<p>N/A</p>
<p>Senior leaders request external improvement support when required.</p>	<p>The RUH has received support from NHSI in the review of its FTSU policy and the development of its FTSU internal audit</p>	<p>N/A</p>	<p>The Board is aware of this support via regular reports to Board meetings.</p>

	terms of reference.		
Leaders are focused on learning and continual improvement			
Senior leaders use speaking up as an opportunity for learning that can be embedded in future practice to deliver better quality care and improve workers' experience.	The Board of Directors includes a patient/staff story at the beginning of each meeting. These are often challenging and involve raising concerns and issues. Actions are often agreed out of these stories and reported back the Board, which improve the quality of care and workers experience. Executive Directors take	In addition to patient/staff stories and patient safety visits, the new FTSU Vision and Strategy will set out how the Trust and leadership will capture and disseminate learning opportunities.	Actions agreed from patient/staff stories are tracked at meetings of the Board.

	<p>part in regular “patient safety visits” which provide staff an opportunity to raise and discuss concerns. These are then discussed by the Executive Team at its weekly meetings and actions taken forward.</p>		
<p>Senior leaders and the FTSU Guardian engage with other trusts to identify best practice.</p>	<p>The FTSU Guardian is actively involved in regional networks.</p> <p>The new Director of People is using her existing contacts with national FTSU evaluation team from Cardiff University to</p>	<p>The Lead Executive will seek to become more involved in the regional networks.</p>	<p>This will be covered in future FTSU reports to the Board of Directors.</p>

	develop the Trust's FTSU vision and strategy.		
Executive and non-executive leads, and the FTSU Guardian, review all guidance and case review reports from the National Guardian to identify improvement possibilities.	The FTSU Guardian and Lead Executive are engaged with National Guardian communications.	The new strategy includes awareness raising and a training package for key stakeholders, including Non-Executive Directors.	The latest guidance will be included in the bi-annual updates to the Board of Directors.
Senior leaders regularly reflect on how they respond to feedback, learn and continually improve and encourage the same throughout the organisation.	Executive Directors take part in regular "patient safety visits" which provide staff an opportunity to raise and discuss concerns. These are then discussed by the Executive Team at its weekly meetings and actions taken	The OD Programme deliverables will be monitored over the life of the programme to ensure the anticipated benefits are achieved.	The Board of Directors will be kept apprised of the outputs of the OD Programme. The regular FTSU report to Board will also encourage reflection on how feedback is being actioned and used to improve care to patients and better environments for staff.

	<p>forward.</p> <p>The Trust has recently invested in an OD programme “Improving Together” which focuses on aligning improvement methodology and continual improvement. This includes Executive and Senior Management coaching and reflection.</p>		
<p>The executive lead responsible for FTSU reviews the FTSU strategy annually, using a range of qualitative and quantitative measures, to assess what has been achieved and what hasn't; what the barriers have been and how they can be overcome; and whether the right indicators are being used to measure success.</p>	<p>The draft Vision and Strategy will be reviewed by Board in October 2018. It includes a range of qualitative and quantitative</p>	<p>Draft measures to be considered as part of the review of the draft Vision and Strategy at Board in October 2018</p>	<p>Measures reported to Board annually to enable monitoring of progress (this will move to bi-annually)</p>

	indicators to measure effectiveness		
The FTSU policy and process is reviewed annually to check they are fit for purpose and realistic; up to date; and takes account of feedback from workers who have used them.	The FTSU Policy is currently reviewed on a three yearly basis, in line with the Trust's policy review process.	Consideration will be given to more regular review, should this be required (for example, as a result of significant national policy change, feedback or changes in best practice).	N/A
<p>A sample of cases is quality assured to ensure:</p> <ul style="list-style-type: none"> the investigation process is of high quality; that outcomes and recommendations are reasonable and that the impact of change is being measured workers are thanked for speaking up, are kept up to date though out the investigation and are told of the outcome Investigations are independent, fair and objective; recommendations are designed to promote patient safety and learning; and change will be monitored 	An audit has been carried out in 2017/18 by KPMG as part of the Trust's internal audit function. This has resulted in an assurance rating of "Significant Assurance with minor improvement opportunities".	Consideration will be given to more regular audits. One issue is that there may not be enough cases audit, as there were only three cases for KPMG to audit over the last 3 years.	The Board has received a copy of the KPMG Audit report, which was also discussed and approved via the Board's Audit Committee.

Positive outcomes from speaking up cases are promoted and as a result workers are more confident to speak up.	This does not currently take place.	The new strategy needs to include awareness-raising which may include promoting positive outcomes from FTSU cases.	Any activity in this area would form part of the regular report to the Board.
Individual responsibilities			
Chief executive and chair			
The chief executive is responsible for appointing the FTSU Guardian.	The Chief Executive is involved in this process.	N/A	N/A
The chief executive is accountable for ensuring that FTSU arrangements meet the needs of the workers in their trust.	Confirmed. However, the Director of People is the lead Executive for FTSU and takes the lead on a day to day basis.	N/A	N/A
The chief executive and chair are responsible for ensuring the annual report contains information about	The annual report does not contain any specific	The annual report for 2018/19 will include an FTSU section. This will	The Board of Directors review the draft report and it will be reviewed

FTSU.	information on FTSU.	be developed from the various reports to the Board of Directors, with input from the FTSU Guardian, and will be reviewed and approved by the Board.	and approved by the Audit Committee.
The chief executive and chair are responsible for ensuring the trust is engaged with both the regional Guardian network and the National Guardian's Office.	Engagement with external bodies is currently led by the FTSU Guardian and the Lead Executive.	While the current arrangements are felt to be sufficient, consideration will be given to increasing the Chair and Chief Executive's involvement in engagement with external networks.	N/A
Both the chief executive and chair are key sources of advice and support for their FTSU Guardian and meet with them regularly.	Yes		
Executive lead for FTSU			

<p>Ensuring they are aware of latest guidance from National Guardian's Office.</p>	<p>The Director of People receives regular updates from the NGO through the Trust's FTSU Guardian</p>	<p>Director of People to identify opportunities for more involvement in regional and national FTSU fora</p>	
<p>Overseeing the creation of the FTSU vision and strategy.</p>	<p>The Director of People wrote the Vision and Strategy</p>		
<p>Ensuring the FTSU Guardian role has been implemented, using a fair recruitment process in accordance with the example job description and other guidance published by the National Guardian.</p>	<p>The FTSU Guardian was appointed with oversight by the previous Director of HR in accordance with national guidance</p>	<p>Future recruitment will be overseen by the Director of People, with the CEO leading the process</p>	
<p>Ensuring that the FTSU Guardian has a suitable amount of ring fenced time and other resources and there is cover for planned and unplanned absence.</p>	<p>The Director of People meets regularly with the Trust FTSU Guardian and considers time and resources</p>	<p>This is supported by KPMG audit</p>	

	available to them		
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<p>Ensuring that a sample of speaking up cases have been quality assured.</p>	<p>This is completed through the KPMG audit</p>		<p>Included in bi-annual report to Board</p>
<p>Conducting an annual review of the strategy, policy and process.</p>	<p>Once approved the draft Vision and Strategy is the first that the Trust will have. The intention is to review it annually. The policy is reviewed every three year in line with the Trust's policy review process</p>	<p>Annual review of strategy to be scheduled for Autumn 2019</p>	
<p>Operationalising the learning derived from speaking up issues.</p>	<p>Discussion about operationalising the learning takes place quarterly at Strategic Workforce Committee as part of the update from the FTSU Guardian</p>		

<p>Ensuring allegations of detriment are promptly and fairly investigated and acted on.</p>	<p>Assessed through KPMG audit</p>		
<p>Providing the board with a variety of assurance about the effectiveness of the trusts strategy, policy and process.</p>	<p>The effectiveness of the strategy, policy and process is assessed through key measures identified in the draft Vision and Strategy. Reporting takes place quarterly through Strategic Workforce Committee and annually to Board</p>	<p>Board to review and approve draft Vision and Strategy in October 2018, including agreement that it is receiving the assurance required</p>	
<p>Non-executive lead for FTSU</p>			

<p>Ensuring they are aware of latest guidance from National Guardian's Office.</p>	<p>Non-Executive Director leads are aware of guidance; however this is largely self-driven. There was Non-Executive representation and involvement in the completion of this self-assessment.</p>	<p>The new strategy needs to include awareness raising and a training package for key stakeholders, including Non-Executive Directors.</p>	<p>The latest guidance will be included in the bi-annual updates to the Board of Directors.</p>
<p>Holding the chief executive, executive FTSU lead and the board to account for implementing the speaking up strategy.</p>	<p>The Non-Executive Director leads actively seek assurance both when the existing FTSU reports are presented and outside of board via meetings with Executive Directors.</p>	<p>FTSU will be on the Board of Directors' work-plan as a bi-annual report (this is an increase from the current annual report). This will provide further opportunity for discussion and challenge. Meetings between the lead Non-Executives and Executives outside of Board should also be</p>	<p>Discussion of the FTSU report at Board is captured in the minutes.</p>

		referenced in the report.	
Robustly challenge the board to reflect on whether it could do more to create a culture responsive to feedback and focused on learning and continual improvement.	The Non-Executive Director leads are actively involved in FTSU review and discussions.	FTSU will be on the Board of Directors' work-plan as a bi-annual report (this is an increase from the current annual report). This will provide further opportunity for discussion and challenge.	Discussion of the FTSU report at Board is captured in the minutes.
Role-modelling high standards of conduct around FTSU.	The Non-Executive Director leads are available to meet with Executives and the FTSU Guardian as well as staff as required by the Trust's policy. Speaking up behaviour is modelled at public board meetings through challenge and	Consideration will be given to increasing the Non-Executive Director leads' profile within the Trust, either through more visibility via the vision and strategy, and/or via more opportunities for them to be involved in FTSU events with staff.	N/A

	discussion with the Executive Team and the Board.		
Acting as an alternative source of advice and support for the FTSU Guardian.	The Non-Executive Director leads are available to both the lead Executive and the FTSU Guardian, and regular meetings take place with the Guardian (at least quarterly).	The interactions between the FTSU Guardian and the Non-Executive Director leads will be more clearly outlined in the FTSU report to Board in the future.	The Chairman is kept aware of the Non-Executive Directors via their appraisals, including their engagement with the FTSU Guardian and process in the Trust. This is also referenced in discussions at Board, particularly during discussion of the FTSU report.
Overseeing speaking up concerns regarding board members.	This process is outlined in the Trust's policy, and relevant process and procedure is understood by those involved.	The new strategy needs to a clearer training package for key stakeholders, including Non-Executive Directors. This will include their responsibilities for speaking up concerns regarding board	The Board is kept informed of any board level speaking up matters, in so far as it is appropriate to do so.

		members.	
Human resource and organisational development directors			
Ensuring that the FTSU Guardian has the support of HR staff and appropriate access to information to enable them to triangulate intelligence from speaking up issues with other information that may be used as measures of FTSU culture or indicators of barriers to speaking up.	The Trust FTSU Guardian has regular and open access to the Deputy Director of People, recognised through the KPMG audit to discuss issues		
Ensuring that HR culture and practice encourage and support speaking up and that learning in relation to workers' experience is disseminated across the trust.	The HR culture and wider Trust culture encourages and supports people to speak up and this is explicit in the Trust values and behaviours framework. This is referred to in the Vision and Strategy	Explicit reference to be made to encouraging a speaking up culture to be made in staff survey action plans	

	document		
Ensuring that workers have the right knowledge, skills and capability to speak up and that managers listen well and respond to issues raised effectively.	Training has been identified as an area requiring some focus by KPMG audit	Key measures included in draft Vision and Strategy document for agreement by Board in October 2018	Key measures reported annually to Board
Medical director and director of nursing			
Ensuring that the FTSU Guardian has appropriate support and advice on patient safety and safeguarding issues.	The FTSU Guardian has regular meetings with the Director of Nursing & Midwifery, and access to the Medical Director.	N/A	Any concerns in this regard would be raised by the FTSU via the report to the Board of Directors.
Ensuring that effective and, as appropriate, immediate action is taken when potential patient safety issues are highlighted by speaking up.	The FTSU Guardian reports that patient safety issues identified via speaking up processes are immediately highlighted to the	Consideration will be given to highlighting any examples of patient safety issues identified via speaking up processes in the report to Board. However, this will only be done if it is	The Board receives regular updates on any significant risks to patient safety. Any concerns on the part of the FTSU Guardian would be raised in the report to Board.

	relevant Executive Director and team, and she is confident that appropriate action is taken.	consistent with principles of confidentiality and privacy.	
Ensuring learning is operationalised within the teams and departments that they oversee.	Relevant information and learning is communicated by the FTSU Guardian.	The FTSU Vision and Strategy will contain a clearer and more structured way of ensuring learning is captured and communicated.	This will be reviewed by the Board as part of the approval and ongoing review of the FTSU Vision and Strategy.