

| Report to:       | Board of Directors             | Agenda item: | 15 |
|------------------|--------------------------------|--------------|----|
| Date of Meeting: | 27 <sup>th</sup> November 2019 |              |    |

| Title of Report:      | Freedom to Speak Up Update                                |
|-----------------------|---|
| Status:               | To note   |
| <b>Board Sponsor:</b> | Claire Radley, Director for People                        |
| Author:               | Louisa Hopkins, Freedom to Speak Up Guardian              |
| Appendices            | Appendix 1: Strategy Action Plan Update – November 2019   |
|                       | Appendix 2: Number of referrals: May 2019 - November 2019 |
|                       | Appendix 3: Number of open cases                          |
|                       | Appendix 4: RUH Self-Assessment update                    |

#### 1. | Executive Summary of the Report

This report provides an update on the continued progress that the Trust has made since October 2018 when the Freedom to Speak Up (FTSU) Vision and Strategy were ratified by the Board of Directors. It also highlights the recent guidance from the National Guardians Office requiring Trusts to train all staff in Freedom to Speak Up, and the emerging training offer.

The Trust has demonstrated significant commitment to encouraging a culture of openness where learning from events can be used to support improvements in the quality of services for staff, visitors, relatives and patients and the experiences of all of these people. Freedom to Speak Up and Raising Concerns is a key aspect of the Trust Strategy where we aspire to:

- Be a listening organisation; patient centred and compassionate
- Be an outstanding place to work where staff can flourish
- Improve and innovate every day

The Trust vision for Freedom to Speak Up is:

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.

Key developments during 2018-19, and since the previous report, in seeking to meet the vision include:

- The Guardian is supported by an increasingly diverse group of 'FTSU
  Advocates' (who are champions for staff) who together support staff with
  issues of concern, following activities to increase diversity in the group.
- The FTSU has developed an internal FTSU Newsletter for advocates.

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- The regional Guardian for FTSU attended the RUH to provide training for Guardian, Advocates and Champions, as well others in the area as part of a wider networking event. This will form part of the regular monitoring for Freedom to Speak Up.
- A new Raising Concerns (Whistleblowing) Policy was ratified in March 2019 by the Strategic Workforce Committee.
- Initial discussions have begun in order to develop a plan for the roll-out of training across the Trust to enable all staff to have a good understanding of F2SU. New developments from NGO have indicated that NGO will provide a 3 Tier training e-learning package for Trusts to utilise. This will be available from April 2020 for Trusts to access.

#### 2. Recommendations (Note, Approve, Discuss)

The Board is asked to:

- Note the FTSU update and support the work of the Guardian and Advocates;
- Note the policy;
- Note the review of the FTSU 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.

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- 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)

The Guardian post (0.6wte) is currently a cost pressure as well as 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

May 2019 report to Board of Directors - Freedom To Speak Up - Update

#### 8. Freedom of Information

The report is public.



#### **Appendix 1: Strategy Plan Update**

| Actions   | Progress since May 2019  | RAG |
|---|--|-----|
| Implement policies that distinguish between grievances and raising concerns | Raising Concerns Policy implemented. Grievance Policy.   | G   |
| Responding to concerns in a timely way                                      | The FTSU Guardian is supported by an increasingly diverse team of advocates from the front line. Updated webpages with full contact details and a confidential email address.  | G   |
| Awareness training for staff supported by a training strategy.              | Regional FTSU Guardian training carried out in Trust in October 2019.  Guardian and Advocates undertaking regular walk-about's to be visible and available to staff who want to talk about the raising concerns process / to raise concerns.  Guardian attending staff meetings across the Trust.  Guardian attending Directorate Board Meetings to cascade information.  The Trust Guardian is working in line with NGO guidance on recommended training, due to be released in April 2020. | A   |
| Regular communications  | Implemented internal newsletters and face to face briefings. Improved visibility of Guardian and Advocates on the front line and in meetings. Improved presence of Guardian, Advocates and information in busy areas (Landsdown) in place for regular contact with weekend staff and shift changeovers. Post-Box for anonymous reporting to be launched.   | G   |

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| Communicating key findings and improvements       | Go Engage (staff engagement) quarterly survey launched in June 2019, with actions plans under development.  | Α |
|---|---|---|
| Sharing good practice and learning from concerns. | Developed a FTSU communications plan. Further support from the communications team initiated to further embed role into organisation.   | A |
| Adopting good practice via networks and NGO       | Regular attendance by Guardian and Advocates at Regional and national events is underway and established.   | G |
| Asking staff about the processes for speaking up. | Adoption of a new staff engagement tool 'Go Engage' for regular <i>pulse checks</i> of experiences.  Confirmation of the Trust's involvement in a National Research Project on FTSU role. | G |

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#### Appendix 2 Number of FTSU referrals at the RUH

#### 1. Numbers of concerns

Since the previous report in May 2019 there has been 38 concerns raised.

Table 1: Number and areas of concerns raised

| Area of concern               | Incidence of concern being raised |
|-------------------------------|-----------------------------------|
| Patient Safety and Quality    | 8                                 |
| Behavioural and Relationships | 7                                 |
| Cultural                      | 4                                 |
| Bullying and Harassment       | 10                                |
| System and Processes          | 9                                 |

Table 2: Number of incidence of concerns raised by Directorate

| Directorate            | Number of cases |
|------------------------|-----------------|
| Estates and Facilities | 4               |
| Corporate Services     | 5               |
| Surgery                | 13              |
| Medicine               | 13              |
| Women and Children     | 3               |

#### 2. Detriment

2 members of staff from the 38 cases raised felt detriment to raising a concern in their area of work that led them to seek support from FTSU Guardian.

#### 3. Emerging themes in data

#### 3.1 Bullying and management response

A key emerging theme from individual staff is the management of support in incidences of bullying that have been perceived. For instance staff members have reported not receiving a compassion response from their manager

In half of the 10 concerns raised about bullying / harassment staff report that their complaint was not responded to by their managers. For example the manager did not respond to emails or evidence given on bullying concerns.

In 3 different cases staff reported that their manager had suggested that by raising a bullying concern the individual may experience detriment. This led to each of the individuals seeking support from the FTSU.

#### 3.2 Welcome onto wards / area of work

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For the concerns raised 9 staff spoke of the welcome to a new area of work and that is was disappointing, making them feel unvalued and / or not welcome. There is a disproportionate number of staff with a BAME background in this group.

#### 3.3 Challenges

Speed of response / timeliness of response by staff who have been asked to support or help with a concern is a challenge.

#### **Appendix 3**

| Quarter 2019-20 | Total cases in Quarter | Open cases by<br>Quarter |
|-----------------|------------------------|--------------------------|
| Q1 and Q2       | 38                     | 20                       |
| Q3              | 3                      | 3                        |



# Freedom to Speak Up review tool for NHS trusts and foundation trusts July 2019

**NHS England and NHS Improvement** 



This is a tool for the boards of NHS trusts and foundation trusts to accompany the <u>Guidance for boards on Freedom to Speak Up</u> <u>in NHS trusts and NHS foundation trusts</u> (cross referred with page numbers in the tool) and the <u>Supplementary information on</u> <u>Freedom to Speak Up in NHS trusts and NHS foundation trusts</u> (cross referred with section numbers).

We expect the executive lead for Freedom to Speak Up (FTSU) to use the guidance and this tool to help the board reflect on its current position and the improvement needed to meet the expectations of NHS England and NHS Improvement and the National Guardian's Office.

We hope boards will use this tool thoughtfully and not just as a tick box exercise. We also hope that it is done collaboratively among the board and also with key staff groups – why not ask people you know have spoken up in your organisation to share their thoughts on your assessment? Or your support staff who move around the trust most but can often be overlooked?

Ideally, the board should repeat this self-reflection exercise at regular intervals and in the spirit of transparency the review and any accompanying action plan should be discussed in the public part of the board meeting. The executive lead should take updates to the board at least every six months.

It is not appropriate for the FTSU Guardian to lead this work as the focus is on the behaviour of executives and the board as a whole. But getting the FTSU Guardian's views would be a useful way of testing the board's perception of itself. The board may also want to share the review and its accompanying action plan with wider interested stakeholders like its FTSU focus group (if it has one) or its various staff network groups.

We would love to see examples of FTSU strategies, communication plans, executive engagement plans, leadership programme content, innovative publicity ideas, board papers to add them to our Improvement Hub so that others can learn from them. Please send anything you would specifically like to flag to <a href="mailto:nhsi.ftsulearning@nhs.net">nhsi.ftsulearning@nhs.net</a>

## How to use this tool

| Summary of the expectation  | for complete detail | meet this now?            |                           | Evidence to support a 'full' rating   | Principal actions needed in relation to a 'not' or 'partial' rating               |
|---|---------------------|---------------------------|---------------------------|---|---|
|   |                     | Insert<br>review<br>date  | Insert<br>review<br>date  |   |   |
| Behave in a way that encourages workers to sp   | eak up              |                           |                           |   |   |
| Individual executive and non-executive directors can evidence that they behave in a way that encourages workers to speak up. Evidence should demonstrate that they:  - understand the impact their behaviour can have on a trust's culture - know what behaviours encourage and inhibit workers from speaking up - test their beliefs about their behaviours using a wide range of feedback - reflect on the feedback and make changes as necessary - constructively and compassionately challenge each other when appropriate behaviour is not displayed | Section 1<br>p5     | Not<br>Partially<br>Fully | Not<br>Partially<br>Fully | All directors take part in Go and See walks – with a focus on listening, not solving.  There has been positive Feedback from Chair – use of language example.  AGM example- When member of the public at AGM used inappropriate language, this was challenged by CEO.  Improving Together is in operation; huddles, exec behaviours transition to listening.  Management Board – there is an agreement to 'call out' inappropriate behaviour.  Exec team development in place.  Filtering down and local team examples of challenging inappropriate behaviour.  Having confidence to 'speak (truth) to power'  Communicated to staff – CEO writing and encouraging staff to Speak up in InTheWeek.  Support from Exec team in their communication to Trust about the role.  Executives also all ask and communicate | Review of current NED appraisal process against FTSU criteria in self assessment. |

| Summary of the expectation  Reference for complete detail  Pages refer to the guidance and sections to supplementary information   | for m complete                            | How fully meet this      |  | Evidence to support a 'full' rating   | Principal actions needed in relation to a 'not' or 'partial' rating   |
|--|---|--------------------------|--|---|---|
|  | Insert<br>review<br>date                  | Insert<br>review<br>date |  |   |   |
|  |   |                          |  | about the role and offer support.   |   |
| Demonstrate commitment to FTSU   |   |                          |  |   |   |
| The board can evidence their commitment to creating an open and honest culture by demonstrating:  • there are a named executive and non-executive leads responsible for speaking up • speaking up and other cultural issues are included in the board development programme  • they welcome workers to speak about their experiences in person at board meetings • the trust has a sustained and ongoing focus on the reduction of bullying, harassment and incivility • there is a plan to monitor possible detriment to those who have spoken up and a robust process to review claims of detriment if they are made • the trust continually invests in leadership development • the trust regularly evaluates how effective its FTSU Guardian and champion model is • The trust invests in a sustained, | p6<br>Section 1<br>Section 2<br>Section 3 |                          |  | Staff and patient stories are presented at each Board of Directors Meeting.  Go and See walks encourage open and honest communication from staff.  There is a focus on overarching cultural development rather than specifically on bullying and harassment  There is ongoing monitoring of whether there's any detriment to those who speak up by Guardian. Cases are reviewed by guardian and staff asked about this. | Further Board development in line with FTSU.  Assessment of data on Bullying and harassment.  Feedback loop to be reviewed with Divisional colleagues to ensure that themes and issues are being fed-back.  Re-focus on values and behaviours within the Trust.  Further communication to encourage speaking up including use of examples that help to encourage people to raise issues.  Build the engagement and relationships between champions and divisions.  More Trust wide communications required about role of FTSU champions and the Guardian. |

| Summary of the expectation   | Reference for complete  How fully do we meet this now?                        |                                  |  | Evidence to support a 'full' rating  | Principal actions needed in relation to a 'not' or 'partial' rating              |
|--|---|----------------------------------|--|--|--|
|  | detail  Pages refer to the guidance and sections to supplementary information | Insert review date Insert review |  |  |  |
| creative and engaging communication strategy to tell positive stories about speaking up.   |   |                                  |  |  |  |
| Have a strategy to improve your FTSU culture   |   |                                  |  |  |  |
| The board can evidence it has a comprehensive and up-to-date strategy to improve its FTSU culture. Evidence should demonstrate:  • as a minimum – the draft strategy was shared with key stakeholders • the strategy has been discussed and agreed by the board • the strategy is linked to or embedded within other relevant strategies • the board is regularly updated by the executive lead on the progress against the strategy as a whole • The executive lead oversees the regular evaluation of what the strategy has achieved using a range of qualitative and quantitative measures. | P7<br>Section 4   |                                  |  | Vision and Strategy in place, ratified in October 2018 by the Trust Board of Directors and reviewed by NHSI during 2019. | Communication of the FTSU Vision and Strategy to bring it to life for all staff. |
| Support your FTSU Guardian   |   |                                  |  |  |  |
| The executive team can evidence they actively support their FTSU Guardian.  Evidence should demonstrate:  • they have carefully evaluated  | p7<br>Section 1<br>Section 2  |                                  |  | The Guardian reports that she is well-supported by the Executive and NED teams.  Chair; CEO and Director of Nursing and  | There is not currently any ring-fenced release time for the advocates.           |

| Summary of the expectation  | Reference<br>for<br>complete  | How fully meet this                   |  | Evidence to support a 'full' rating  | Principal actions needed in relation to a 'not' or 'partial' rating |
|---|---|---------------------------------------|--|--|---|
|   | detail  Pages refer to the guidance and sections to supplementary information | Insert review date Insert review date |  |  |   |
| whether their Guardian/champions have enough ring-fenced time to carry out all aspects of their role effectively  • the Guardian has been given time and resource to complete training and development  • there is support available to enable the Guardian to reflect on the emotional aspects of their role  • There are regular meetings between the Guardian and key executives as well as the non-executive lead.  • individual executives have enabled the Guardian to escalate patient safety matters and to ensure that speaking up cases are progressed in a timely manner  • they have enabled the Guardian to have access to anonymised patient safety and employee relations data for triangulation purposes  • the Guardian is enabled to develop external relationships and attend National Guardian related events | Section 5   |                                       |  | Midwifery have monthly meetings with the FTSU Guardian. There is also an open door approach for the Guardian to access Execs and NEDs leads outside of scheduled meetings.  The FTUS role is 0.6wte and is filled on a 3 yearly term basis.  FTSU Guardian has access to a variety of training recently including: Mental Health First Aid; Advocates training; Coaching training.  The FTSU Guardian accesses monthly supervision for emotional support. This compliments the line management support. Advocates have access to supervision from the Guardian.  The Guardian has access to anonymised patient safety and employee relations data for triangulation purposes as requested.  The Guardian has developed external relationships (Regionally and Nationally) and has attend National Guardian related events.  The Guardian meets the Trust Chair on a monthly basis. |   |

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|---|------------------------------|--------------------------|--------------------------|--|--|
|   | Pages refer to the           | Insert<br>review<br>date | Insert<br>review<br>date |  |  |
| Be assured your FTSU culture is healthy and ef  | fective                      |                          |                          |  |  |
| Evidence that you have a speaking up policy that reflects the minimum standards set out by NHS Improvement. Evidence should demonstrate:  • that the policy is up to date and has been reviewed at least every two years  • reviews have been informed by feedback from workers who have spoken up, audits, quality assurance findings and gap analysis against recommendations from the National Guardian. | P8 Section 8 National policy |                          |                          | The Trust policy was developed with NHSI and NGO input and was ratified in 2018.  There is regular interaction with staff, including: Walkabouts where Execs and the Guardian visit all areas.  The Guardian is accessing a wide range of areas of the Trust including Volunteers.  The service made visible in the Trust: use of the FTSU Banner to advertise events e.g. FTSU month of October. There was an increase in activity and concerns raised during this time.  Guardian attends Trust conferences such as Nursing and Midwifery and Patient safety for improved visibility and access. Guardian has also been present at events such as Health and Wellbeing week.  Guardian uses Twitter to increase staff awareness of role and service.  Guardian attends Junior Dr induction to inform all new junior DRs of service.  Staff encouraged to use 'fresh eyes' approach when coming into the Trust.  Guardian is working with the Induction team and supports New starters. | Future updates of policy to be made in light of experiences of people who have used it.  New comms plan in progress to increase visibility across Trust.  There is acknowledgment of need for pathway for anonymous reporting. Post boxes are being made to facilitate that. |

| Summary of the expectation  Reference for complete detail  Pages refer to the guidance and sections to supplementary information  | for   | How fully meet this      |                          | Evidence to support a 'full' rating  | Principal actions needed in relation to a 'not' or 'partial' rating |
|---|---|--------------------------|--------------------------|--|---|
|   | Pages refer to the guidance and sections to supplementary | Insert<br>review<br>date | Insert<br>review<br>date |  |   |
|   |   |                          |                          | Examples of feedback "I would use the service again. It was a positive experience. I was not expecting a follow up appointment and feedback, it was nice to meet with the guardian twice and know how things were taken forward. Talking with the guardian has given me the confidence to speak up more to people and not to be ashamed."  "I am so happy to talk with the service. I feel better as I know something has been done. I do not want to get people into trouble but I need to be valued at work. This has been so important to me to have my voice heard." |   |
| Evidence that you receive assurance to demonstrate that the speaking up culture is healthy and effective. Evidence should demonstrate:  • you receive a variety of assurance • assurance in relation to FTSU is appropriately triangulated with assurance in relation to patient experience/safety and worker experience. • you map and assess your assurance to ensure there are no gaps and you flex the amount of assurance you require to suit your current circumstances | P8<br>Section 6   |                          |                          | Board of Directors receives updated twice a year that includes triangulated data.  Staff stories are presented to Board to help reflection and challenge as they hear things that don't otherwise get heard.  Board has sought out staff feedback on difficult issues such as the proposed wholly owned subsidiary option (now closed).  Board makes additional requests for information where areas of concern are raised.  Strategic Workforce Committee (reports to Management Board) receives regular  |   |

| Summary of the expectation  | Reference<br>for<br>complete  | How fully meet this      |                          | Evidence to support a 'full' rating   | Principal actions needed in relation to a 'not' or 'partial' rating |
|---|---|--------------------------|--------------------------|---|---|
|   | detail  Pages refer to the guidance and sections to supplementary information | Insert<br>review<br>date | Insert<br>review<br>date |   |   |
| <ul> <li>you have gathered further assurance during times of change or when there has been a negative outcome of an investigation or inspection</li> <li>you evaluate gaps in assurance and manage any risks identified, adding them to the trust's risk register where appropriate.</li> </ul> |   |                          |                          | reports from the Guardian.  The Trust People Committee (new in 2019) to provide oversight and scrutiny.  The Guardian of Safe Working Hours (Junior Doctors Hours) regularly reports to Board, and works with the FTSU Guardian.  Guardian attends Staffside partnership meetings to share themes and build relationships for improved staff experiences. |   |
| The board can evidence the Guardian attends poard meetings, at least every six months, and presents a comprehensive report.   | P8<br>Section 7   |                          |                          | The Guardian attends Board meetings and this is minuted.  |   |
| The board can evidence the FTSU Guardian role has been implemented using a fair recruitment process in accordance with the example job description (JD) and other guidance published by the National Guardian.  | Section 1<br>NGO JD   |                          |                          | There was a robust process including: guidance from NHSI; internal and external advert; desk top exercise; telephone interview; face to face interview.   |   |
| The board can evidence they receive gap analysis in relation to guidance and reports from the National Guardian.  | Section 7   |                          |                          | CEO and exec lead – read and review weekly updates  The National findings and research included in Board report.  | NED lead to receive updates regularly.                              |

| Summary of the expectation   | Reference for complete  How fully do we meet this now?                        |                          |  | Evidence to support a 'full' rating   | Principal actions needed in relation to a 'not' or 'partial' rating          |
|--|---|--------------------------|--|---|--|
|  | detail  Pages refer to the guidance and sections to supplementary information | Insert<br>review<br>date |  |   |  |
| The trust can evidence how it has been open and transparent in relation to concerns raised by its workers. Evidence should demonstrate:  - discussion with relevant oversight organisation - discussion within relevant peer networks - content in the trust's annual report - content on the trust's website - discussion at the public board - welcoming engagement with the National Guardian and her staff | P9  |                          |  | The Trust has worked with NHSI and CQC on aspects of FTSU including concerns raised. These have also been shared as part of the Guardian' engagement with the NGO regional meetings and national events.  The Trust complies with the requirements for the annual report in this area, and also publishes information on the website.  There are regular reports received as documented here.  The Guardian works well with the National Guardian / her staff / the office (NGO). | Learning from whistleblowing – standard approach to debriefing and learning. |
| Individual responsibilities  |   |                          |  |   |  |
| The chair, chief executive, executive lead for FTSU, Non-executive lead for FTSU, HR/OD director, medical director and director of nursing should evidence that they have considered how they meet the various responsibilities associated with their role as part of their appraisal.   | Section 1   |                          |  | The requirements for FTSU varies between roles and in built into the appraisal processes for both NED and Execs.  The NED lead has a specific objective identified as does the Chair; and the Director for People. The Duty of Candour is a specific requirement for the DoN&MW and the Trust Medical Director  |  |

| Summary of the expectation | Reference<br>for<br>complete  | How fully meet this      |                          | Evidence to support a 'full' rating  Principal actions needed in r 'not' or 'partial' rating | Principal actions needed in relation to a 'not' or 'partial' rating |
|----------------------------|---|--------------------------|--------------------------|--|---|
|                            | detail  Pages refer to the guidance and sections to supplementary information | Insert<br>review<br>date | Insert<br>review<br>date |  |   |
|                            |   |                          |                          | is the Caldicott Guardian with responsibility for the Guardian of Safe Working Hours.        |   |