# NHS Golden Jubilee

### **Meeting: NHS Golden Jubilee Board**

### **Meeting date: 27 March 2025**

### **Title:** Whistleblowing Q3 Report (October to December 2024)

### **Responsible Executive/Non-Executive: Anne Marie Cavanagh, Director of Nursing**

### **Report Author: Nicki Hamer, Head of Corporate Governance and Board Secretary**

## 1 Purpose

### This is presented to **NHS Golden Jubilee Board** for:

### Decision

### This report relates to a:

* Government policy/directive

### This aligns to the following NHS Scotland quality ambition(s):

* Safe
* Effective
* Person Centred

## 2 Report summary

## 2.1 Situation

The National Whistleblowing Standards and Once for Scotland Whistleblowing policy were launched on 1 April 2021 and a significant amount of work was and continues to be undertaken to ensure that the standards are implemented across the organisation.

NHS Golden Jubilee (NHS GJ) Board is asked to approve the report on organisational activity in relation to Whistleblowing concerns raised in 2024-25 Quarter 3 (1 October to 31 December 2024).

## 2.2 Background

The National Whistleblowing Standards set out how the Independent National Whistleblowing Officer (INWO) expects all NHS Boards to manage, record and report whistleblowing concerns. The Standards also require that Boards publish an annual report setting out performance in handling whistleblowing concerns. The annual report will summarise and build on the quarterly reports produced by the Board, including performance against the requirements of the Standards, Key Performance Indicators (KPIs), the issues that have been

raised and the actions that have been or will be taken to improve services as a result of concerns.

NHS Golden Jubilee’s approach to the implementation of the standards was key to ensuring that staff feel safe, supported and have confidence in the fairness of the processes should they feel they need to raise concerns.

In NHS Golden Jubilee the agreed governance route for reporting on whistleblowing is to Clinical Governance Committee with any staff concerns being shared with Staff Governance and Person Centred Committee and then onward to the Board.

## 2.3 Assessment

As no concerns were raised as Whistleblowing in Q3 it is not possible to provide a detailed report.

Over time it is hoped that we will be able to illustrate trends and evidence necessary improvement and learning in response to trends and themes demonstrated. Any future report raised will cover:

• Whistleblowing concerns raised

• Learning, changes or improvements to service or procedures

• Experience of individual raising concern/s

• Level of staff perceptions, awareness and training

• Whistleblowing themes, trends and patterns

Monthly reports are produced to monitor completion of the Turas Whistleblowing eLearning modules. The latest figures relating to this training is shown within the Quarter 3 Report. Whistleblowing communications continue to be refreshed as a reminder to staff on how to raise a Whistleblowing concern.

The Non-Executive Whistleblowing Champion meets with the Confidential Contacts to ensure any whistleblowing concerns are signposted as a support to staff.

The Head of Corporate Governance and Board Secretary continues to attend the Whistleblowing Practitioners Forum and will take any updates through the Whistleblowing Oversight Group.

In relation to the iMatter survey, these results are now detailed within the Quarter 3 report, which also includes the outcomes from the survey taken during the National Speak Up Week.

The Whistleblowing Oversight Group have received the report and approved its route through the Governance Committees and Board for approval and awareness.

### 2.3.1 Workforce

The National Whistleblowing Standards support NHS GJ ambition for an open and transparent organisational culture where staff have the confidence to speak up.

### 2.3.2 Financial

There is no financial impact.

### 2.3.3 Risk Assessment/Management

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

### 2.3.4 Equality and Diversity, including health inequalities

A local Equality Impact Assessment (EQIA) for the Standards has been completed and will be published on our public facing website. This assesses the impact of the Whistleblowing Standards on staff and those who provide services on behalf of the NHS with protected characteristics.

### 2.3.5 Other impacts

Best value: Governance and accountability and Performance management.

The delivery of an effective process for whistleblowing concerns will support the Board’s commitment to safe, effective and person-centred care. Effective handling of concerns supports the delivery of the Healthcare Quality Strategy

Compliance with Corporate Objectives - Create compassionate partnerships between patients, their families and those delivering health and care services which respect individual needs and values and result in the people using our services having a positive experience of care to get the outcome they expect.

### Communication, involvement, engagement and consultation

There is no requirement for formal engagement with external stakeholders in relation to the formulation of this paper. There has been wide communication of the National Whistleblowing Standards across the organisation.

## 2.4 Recommendation

NHS Golden Jubilee Board is asked to:

* Approve the Whistleblowing Q3 Report (October to December 2024).

## List of appendices

There is one appendix attached to this report:

Appendix 1 – Whistleblowing Performance Q3 Report