



Whistleblowing Performance Report

Quarter 3 – October to December 2025



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1.0 Context

The National Whistleblowing Standards (the Standards) set out how all NHS service providers in Scotland must handle concerns that have been raised with them about risks to patient safety and effective service delivery. They apply to all services provided by or on behalf of NHS Scotland and must be accessible to all those working in these services, whether they are directly employed by the NHS or a contracted organisation. This includes students, trainees, volunteers and ex-employees for up to six months.

“Whistleblowing” is defined as: *“...when a person who delivers services or used to deliver services on behalf of a health service body, family health service provider or independent provider (as defined in section 23 of the Scottish Public Services Ombudsman Act 2002) raises a concern that relates to speaking up, in the public interest, about an NHS service, where an act or omission has created, or may create, a risk of harm or wrong doing.”*

This report will demonstrate our performance in the national key indicators as required by the Independent National Whistleblowing Officer (INWO) and includes key areas of Whistleblowing handling, as well as highlighting outcomes and providing more detail on any Whistleblowing themes. Over time, this approach will illustrate trends in and more importantly, allow us to evidence necessary improvement and learning in response to the trends and themes demonstrated.

During Speak Up week we engaged with our staff to build on the culture where everyone confidently can raise a concern and where they know that any concerns raised, will be thoroughly investigated, with any lessons learned being taken forward by the organisation.

The Standards specify high level principles plus a detailed process for investigating concerns which all NHS organisations in Scotland must follow. NHS Health Boards have particular responsibilities regarding the implementation of the Standards:

- ensuring that their own whistleblowing procedures and governance arrangements are fully compliant with the Standards.
- ensuring there are systems in place for primary care providers in their area to report performance data on handling concerns.
- working with higher education institutions and voluntary organisations to ensure that anyone working to deliver NHS Scotland services (including students, trainees and volunteers) has access to the Standards and knows how to use them to raise concerns

This reports provides an overview of the outcome from Speak Up week and the performance update for Quarter 3.

2.0 Areas covered by the Report

The national Whistleblowing Standards (the Standards) set out how all NHS Service providers in Scotland must handle concerns that have been raised with them about risk to patient safety and effective service delivery.

Under the terms of the Standards, the quarterly performance report must contain information on the following indicators:

1. Total number of concerns received.
2. Concerns closed at stage 1 and stage 2 of the whistleblowing procedure as a percentage of all concerns closed.
3. Concerns upheld, partially upheld and not upheld at each stage of the whistleblowing procedure as a percentage of all concerns closed in full at each stage.
4. The average time in working days for a full response to concerns at each stage of the whistleblowing procedure.
5. The number and percentage of concerns at each stage which were closed in full within the set timescales of 5 and 20 working days.
6. The number of concerns at stage 1 where an extension was authorised as a percentage of all concerns at stage 1.
7. The number of concerns at stage 2 where an extension was authorised as a percentage of all concerns at stage 2.

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.

3.0 Quarter 3 Performance

Indicator 1 - Total number of concerns, and concerns by Stage

During Quarter 3, October to December 2025, no Whistleblowing Concerns were received.

Indicator 2 – Concerns closed at Stage 1 and Stage 2 of the whistleblowing procedure as a percentage of all concerns closed.

To date there has been one Whistleblowing Concern received, during 2022/23 that was concerned with the adequacy of arrangements within NHS Golden Jubilee for the provision of First-Aid to employees, patients and visitors. The lessons learned are continually being reviewed.

Indicator 3 - Concerns upheld, partially upheld and not upheld at each stage of the whistleblowing procedure as a percentage of all concerns closed in full at each stage.

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

No stage 1 concerns were received in Q3 this year.

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

No stage 2 concerns were received in Q3 this year.

Indicator 4 - The average time in working days for a full response to concerns at each stage of the whistleblowing procedure.

No Whistleblowing Concerns were raised during Quarter 3 this year.

Indicator 5 - The number and percentage of concerns at each stage which were closed in full within the set timescales of 5 and 20 working days.

No Whistleblowing Concerns were raised during Quarter 3 this year.

Indicator 6 - The number of concerns at stage 1 where an extension was authorised as a percentage of all concerns at stage 1.

No Whistleblowing Concerns were raised during Quarter 3 this year.

Indicator 7 - The number of concerns at stage 2 where an extension was authorised as a percentage of all concerns at stage 2.

No Whistleblowing Concerns were raised during Quarter 3 this year.

4.0 Anonymous Concerns

Concerns cannot be raised anonymously under the Standards, nor can they be considered by INWO. However good practice is to follow the whistleblowing principals and investigate the concern in line with the Standards, as far as practicable.

The definition of an anonymous concern is 'a concern which has been shared with the organisation in such a way that nobody knows who provided the information'.

There were no anonymous concerns received during the Quarter 3 period.

5.0 Learning, changes or improvements to services

Learning, changes or improvements to services can be limited by the need to maintain confidentiality of individual Whistleblowers.

In relation to local and system-wide learning processes we have now captured these through the Speak Up Week Outcomes, Section 6.0.

As part of this year's iMatter survey an additional two questions were included which specifically related to raising concerns. It should be noted that these questions were not specifically in relation to Whistleblowing but relate to raising concerns in a general sense. A total number of 1,476 staff completed the two questions with the average score included.

I am confident that I can safely raise concerns about issues in my workplace	75
I am confident that my concerns will be followed up and responded to	69

NHS Golden Jubilee has seen a change of -2 in both results which is quite significant for a Board our size.

Throughout Quarter 4, initiatives will be implemented to increase awareness of the Whistleblowing Standards as part of our ongoing improvement plan. Local procedures will be emphasised during All Staff Sessions across the organisation. Additionally, during Speak Up Week, there was an initiative to encourage new staff members to complete Confidential Contact training in support of this process.

6.0 Level of staff perception, awareness and training

It is difficult to quantify staff perceptions. However we continue to promote the Senior Managers and staff training and will continue to monitor uptake, effectiveness and appropriateness as required.

Our Communications Team will continue to promote raising awareness and further actions in relation to this topic and is discussed later in the report.

NHS Golden Jubilee participated in the recent National Speak Up Week held on 29 September 2025 with the theme 'Listen, Act, Build Trust'. This was a networking opportunity across NHS Health Boards discussing how 'speak up' methodologies could be implemented within organisations. The five main areas were the Launch, Listening to Concerns, Acting on Feedback, Building Trust and a Round Up from the Week. Quotations from our Executive and Non-Executive cohort were shown on the INWO website, to support the process. We also provided a short survey to give staff the opportunity to, anonymously, let us have their view on the Whistleblowing process.

The Non-Executive Whistleblowing Champion meets with the Confidential Contacts on a periodic basis to ensure any Whistleblowing Concerns are signposted as a support to staff.

It is recognised that this is a learning process and that processes and communications may require to be changed or developed as feedback from updated Whistleblowing processes is received.

The current levels of Training for staff are shown as:

Short Resource Hierarchy - Resource Name	Learning Status - Status	Learners
Whistleblowing : an overview	Completed	584
Whistleblowing : for line managers	Completed	59
Whistleblowing : for senior managers	Completed	46

This training has improved each quarter (up 71 from Q2) with staff continuously undertaking the learning.

7.0 Speak Up Week Outcomes

NHS Golden Jubilee participated in the recent National Speak Up Week held on 29 September to 3 October 2025 with the theme 'Speaking Up'. This was a networking opportunity across NHS Health Boards discussing how 'speak up' methodologies could be implemented within organisations.

We used quotations received from our Executive and Non-Executive cohort to support the process. The quotations were used during Speak Up Week and were displayed within the area next to the canteen. Our Communications Team also used these quotations within reminder emails sent to staff for each day of the Speak Up Week.

We also advised staff on the Whistleblowing Reporting Process and the Governance Framework around Whistleblowing.

Over the four days, we asked staff to complete a short survey to give them the opportunity to let us know, anonymously, their view on the Whistleblowing process. We received 138 responses which equated to 6% of the workforce at that time. The questions we asked and responses received are noted below.

1. Do you know the organisation has a confidential email address for reporting a concern?

43% of our workforce know about the confidential email address, indicating an area for improvement in communication.

2. If I raised one, I would feel confident in the organisation's handling of a Whistleblowing concern?

Confidence in the organisation's handling of whistleblowing concerns is relatively high, with **66%** of our workforce expressing confidence.

3. Have you ever wanted to report something, but felt uncomfortable to do so?

30% of our workforce have wanted to report something but felt uncomfortable with some of the reasons being:

- Similar concerns raised and not supported
- Not supported by management to take further
- Do not want to be 'that person' to call out a poor manager
- Knowing you would not be tarnished as a 'bad person or bad behaviour' for speaking up
- Concern around the backlash you may receive
- Not being anonymous therefore comeback would be inevitable
- If became a whistleblower, left feeling isolated
- Ensuring anonymity within the process if truly confidential, thereby ensuring staff safety
- Having confidence that complaints would not be 'brushed under the carpet'
- Nothing changes and issues are still here
- Process of whistleblowing being more visible
- Conduct of management to take concern seriously
- Confidence in there being a resolution/process followed

75% did not feel uncomfortable, suggesting most do not perceive a barrier to reporting.

4. Do you think the organisation culture encourages Whistleblowing where necessary?

60% of our workforce believe the organisational culture encourages whistleblowing.

5. I have completed the Whistleblowing modules in TURAS learn.

54% of our workforce have completed the modules in TURAS learn.

6. Would you be interested in becoming a Confidential Contact?

Only **6%** of the workforce would consider becoming a Confidential Contact, indicating an area for improvement in support. The organisation has recently undergone a recruitment drive in this area and we await the outcome following the training sessions.

The Whistleblowing Oversight Group has now reviewed these responses and the following plan of action has been agreed.

Action Plan – January 2026

1. Ensure Whistleblowing is featured at an All-Staff Session, which is attended by at least 8% of the workforce, is recorded and saved on the intranet.
2. Creation of Whistleblowing animation to be circulated through quarterly Comms update.
3. Whistleblowing process paperwork to be regularly reviewed and displayed at Main Street West lifts.
4. Promote the work of the Confidential Contacts once recruitment drive has completed.
5. To point staff to the new Corporate Governance intranet pages where information on Whistleblowing will be featured.
6. Where requested, Board Whistleblowing Champion to attend staff engagement sessions.

8.0 Whistleblowing Oversight Group

The Whistleblowing Oversight Group ('the Group') was established in September 2024 to provide assurance to the Clinical Governance Committee, Staff Governance and Person Centred Committee and NHS GJ Board that Whistleblowing Concerns are being discharged in relation to the National Whistleblowing Standards and Once for Scotland Policies. The Terms of Reference is reviewed and approved annually.

The Group are responsible for the oversight of all Whistleblowing arrangements within NHS Golden Jubilee and will ensure that guidance and processes are in place to deliver the requirements of the National Whistleblowing Standards. The Group meet on a quarterly basis and the Chair is the Non-Executive Whistleblowing Champion.

The Group support, oversee and enable the appropriate quarterly and annual reporting to the Clinical Governance Committee and also share the report for noting with the Staff Governance and Person Centred and NHS GJ Board.

One of the main functions of the Group is to support, oversee and plan for the 'Speak Up' weeks that are held each year, to ensure these are meaningful, manageable and memorable.

9.0 Conclusion

It is recognised that this is a learning process and that processes may require to be changed or developed as feedback from updated Whistleblowing processes is received.

In line with the National Whistleblowing Standards, we reiterate our commitment to dealing responsibly, openly and professionally regarding any whistleblowing concern we may receive.

This quarterly report will form part of our Annual Report 2025/26 as we continually raise the profile of Whistleblowing and our commitment to support everyone to 'speak up' at the earliest opportunity.