

### Freedom to Speak Up: Raising Concerns Policy

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#### Version control sheet

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## **Equality Statement**

NHS Frimley CCG Clinical Commissioning Group aims to design and implement services, policies and measures that meet the diverse needs of our service, population, and workforce, ensuring that none are placed at a disadvantage over others.

Throughout the development of the policies and processes cited in this document, the CCG has:

- Given due regard to the need to eliminate discrimination, harassment, and victimisation, to advance equality of opportunity, and to foster good relations between people who have shared a relevant protected characteristic (as cited under the Equality Act 2010) and those who do not share it.
- Given regard to the need to reduce inequalities between patients in access to, and outcomes from, healthcare services and in securing that services are provided in an integrated way where this might reduce health inequalities.

Members of staff, volunteers or members of the public may request assistance with this policy if they have particular needs. If the member of staff has language difficulties and difficulty in understanding this policy, the use of an interpreter will be considered.

The CCG embraces the four staff pledges in the NHS Constitution. This policy is consistent with these pledges.”

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## **Freedom to Speak Up: Raising Concerns Policy**

### **1. Introduction**

1.1. Speaking up about any concern at work is important. In fact, it's vital because it will help the CCG improve services for all patients and the working environment for staff. Speaking up is celebrated and used to address errors or failings as well as an opportunity to make improvements that turns 'good' into 'great'.

1.1. Anyone may feel worried about raising a concern, and the CCG understands this. But please don't be put off. In accordance with the CCG's duty of candour, all senior leaders and entire Governing Body are committed to an open and honest culture. The CCG will look into the concerns raised and ensure staff have access to the support they need.

1.2.

### **2. Purpose**

2.1. This policy was one of a number of recommendations of the review by Sir Robert Francis into "Freedom to Speaking up" in the NHS, aimed at improving the experience of staff in the NHS. The CCG has therefore adopted this policy as a minimum standard to help to normalise the raising of concerns for the benefit of all patients.

### **3. Scope**

3.1. This policy applies to all staff working in the CCG including those staff members who are working on short term fixed contracts, bank contracts and contractors.

### **4. Definitions**

#### **4.1. What concerns can be raised:**

Any concerns about the workplace where the interest of others or the organisation may be at risk. Such concerns may include (these are few examples):

- Unsafe patient care resulting in poor quality of care or malpractice
- Lack of, or poor response to, a reported patient safety incident
- Systematic failings that result in patient safety being endangered
- Unsafe working conditions
- Health and safety issues
- Inadequate induction or training for staff
- A criminal offence
- A miscarriage of justice
- An act causing damage to the environment or deliberate concealment
- A breach of legislation
- Concerns about a colleague's professional conduct or performance

- Fraud, bribery and/or corruption

## **5. Roles and responsibilities**

**5.1 Freedom to Speak Up Guardian (FTSU)** – The FTSU Guardian will work alongside the Accountable Officer, Chair, executive team, and the Governing Body to support the organisation in becoming a more open and transparent place to work, where all staff are actively encouraged and enabled to speak up safely.

5.2 Essentially the role will ensure that a culture of speaking up is instilled throughout the organisation and effective processes are in place to support staff. As a nationally defined role, the FTSU Guardian will focus on the key area of supporting individuals to raise concerns that are in the interest of patients or the public. **The CCG's Speak up Guardian is Katherine Atkinson**, Lay Member for Patient, Public Involvement.

5.3 The FTSU Guardian will have the responsibility to make sure that all concerns are addressed to and by the right people both inside and, if appropriate, outside the CCG. The FTSU Guardian will ensure policies and practices are robust and staff are appropriately supported, listened to, and issues are resolved quickly and professionally. This does not necessarily entail a member of the board having this responsibility but can be a nominated manager who has authority and autonomy to report directly to the Accountable Officer on the issue of concerns.

**5.4 Senior Executives** - Senior Executives is the generic term for: the chair of the CCG, Accountable Officer and Executive Directors (including Managing Directors). These post-holders will:

- Promote a culture of openness that welcomes the opportunity to address and resolve concerns.
- Respond positively to any escalated concerns, either taking or arranging appropriate action.

**5.5 Senior Managers** - Senior managers is the generic term for: heads of function, associate directors, and directors. These postholders will:

- Champion this policy and ensure effective implementation.
- Ensure that all managers understand their responsibilities in relation to this policy.

**5.6 Line Managers**

- will respond positively to any concerns and take appropriate action.
- Ensure that anyone raising a concern has support within a non-punitive framework.

- Foster and promote an open culture and provide regular opportunities for staff to speak up and discuss concerns at both an individual and team level.
- Respond to concerns seriously and consider them fully, sympathetically, and fairly in accordance with this policy.

#### 5.7 Employee responsibilities when **raising a concern**.

They will:

- have read and understood this policy.
- deal with matters at the nearest point of origin and where appropriate first.
- approach the appropriate manager to discuss the problem informally.
- bring to the attention any matter where the interest of others or the organisation may be at risk.
- contact HR, a trade union representative or an appropriate professional body for advice and guidance.

**5.8 HR** - An appropriate HR representative will provide advice and guidance on the application of this policy. They will:

- assist managers and employees in the fair and consistent application of the policy.
- provide advice to employees and managers concerning individual issues, including advice on the range of options or courses of action that may be taken.
- facilitate informal meetings on request.
- provide coaching and training on the application of this policy.
- provide support at formal meetings.
- provide template letters/documents to managers.
- record and monitor cases and report equal opportunities data.
- maintain confidentiality.

#### 6.0. What concerns can be raised?

6.1. Staff can raise any concerns about **risk, malpractice, or wrong doing which they** think is harming the service the CCG commissions. Just a few examples of this might include (but are by no means restricted to):

- Unsafe patient care resulting in poor quality of care or malpractice.
- Lack of, or poor response, to a reported patient safety incident.
- Systematic failings that result in patient safety being endangered.
- Unsafe working conditions.
- Health and safety issues.
- Inadequate induction or training for staff.
- A criminal offence.
- A miscarriage of justice.
- An act causing damage to the environment or concealment.

- A breach of legislation.
- Concerns about a colleague's professional conduct or performance.
- Any suspicions of fraud (should be reported to our counter-fraud team. Our Anti-Crime Specialist is Sarah Pratley: 07769 640781 or [spratley@nhs.net](mailto:spratley@nhs.net))
- A bullying culture (across a team or organisation rather than individual instances of bullying).

6.2. Remember that if as a healthcare professional you may have a professional duty to report a concern. **If in doubt, please raise it.** Don't wait for proof. The CCG would like all staff members to raise the matter while it is still a concern. It doesn't matter if the incidence [should this not be "incident"?] reported turns out to be mistake/error as long as you are genuinely troubled.

This policy is not for people with concerns about their employment that affect only them – that type of concern is better suited to our grievance policy.

## 7. **Feel safe to raise a concern**

7.1. When a concern is raised under this policy, the staff member raising the concern will not be at risk of losing their job or suffering any form of reprisal as a result. The CCG will not tolerate the harassment or victimisation of anyone raising a concern. Nor will the CCG tolerate any attempt to bully you into not raising any such concern. Any such behaviour is a breach of the CCGs values as an organisation and, if upheld following investigation, could result in disciplinary action.

Provided that the staff member is acting honestly, it does not matter if they were mistaken or if there is an innocent explanation for the concerns raised.

7.2 CCG will take up action against anyone who tries to prevent speaking up or victimises someone for doing so, and that this will be viewed as a serious disciplinary matter.

## 8. **Confidentiality**

Staff should feel comfortable about raising their concerns but there may be some instances when a staff member may want to raise it confidentially. In such cases the individuals should contact FTSU Guardian directly and they will not identify the informant without prior agreement unless required to disclose it by law (for example, by the police).

8.1 In other cases members of staff can choose to raise their concern anonymously, without giving anyone their name. In this case staff need to understand that it is more difficult for the CCG to investigate thoroughly and give feedback on the outcome.

## 9. **Who can raise concerns?**

9.1. Anyone who works (or has worked) in the NHS, or for an independent organisation that provides NHS services, can raise concerns. This includes all

staff including short term, bank contracts, agency workers, temporary workers, and volunteers.

**10. Who should the concern be raised with?**

- 10.1. Please see section 10.2 if the concern relates to fraud, bribery, or corruption. Otherwise, in many circumstances the easiest way for staff member to raise a concern is to informally raise it with their line manager. But where you, as a staff member, don't think it is appropriate to do this, you can use any of the options set out below in the first instance.

If raising it with the line manager does not resolve matters, or a staff member does not feel able to raise it with them, they can contact one of the following people:

10.2. **Freedom to Speak Up Guardian, Kathy Atkinson**

[frimleyccg.speakupguardian@nhs.net](mailto:frimleyccg.speakupguardian@nhs.net). This person acts 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 Accountable Officer, or if necessary, outside the organisation

**Anti-Crime Specialist (ACS), Sarah Pratley – [spratley@nhs.net](mailto:spratley@nhs.net)**

If a concern relates to fraud, bribery, or corruption, then this should be reported direct to the ACS, or the Director of Finance. It is not recommended that you discuss your concerns with anyone else. Your identity will be protected in accordance with section 8.1. Further information on how referrals will be treated can be found within the (add link) CCG's Anti-fraud, bribery, and corruption policy. Or contact NHS Counter Fraud Authority Fraud and Corruption Reporting Line (24-hour freephone) – 0800 028 4060 <https://www.frimleyccg.nhs.uk/policies-and-documents/corporate-policies/163-fraud-policy/file>

- 10.3. If a member of staff remains concerned after this point, they can contact: Emma Boswell, who is the CCG's Executive Director with responsibility for "Freedom to Speak Up"

- 10.4. All these people have been trained in receiving concerns and will give information about where further support can be provided.

- 10.5. **Raising concern with an outside body-** If for any reason a staff member does not feel comfortable raising a concern internally, they can raise concerns with external bodies outside the organisation with:

**NHS Improvement for concerns about:**

- how NHS trusts and foundation trusts are being run
- other providers with an NHS provider licence
- NHS procurement, choice, and competition
- the national tariff

**Care Quality Commission for quality and safety concerns**

**NHS England for concerns about:**

- primary medical services (general practice)
- primary dental services
- primary ophthalmic services
- local pharmaceutical services

**Health Education England for education and training in the NHS**

**NHS Protect for concerns about fraud and corruption.**

**11. How should a concern be raised?**

- 11.1. Staff can raise concerns with any of the people listed above in person, by phone or in writing (including email). Whichever route you choose, please be ready to explain as fully as you can the information and circumstances that gave rise to your concern.

**12. What will the CCG do?**

- 12.1. In the first instance the individual raising the concern will be listened to without prejudice and in confidence. Only if the concern is considered significant will any further action be agreed.

The CCG is committed to the principles of the Freedom to Speak Up review and its vision for raising concerns and will respond in line with them (see Annex A).

- 12.2. The CCG will treat staff members with respect and will thank them for raising concerns. The CCG will discuss the concerns raised by the staff member to ensure that we understand exactly what they are worried about. The staff member will be advised on next steps and whether there is a need for a formal or informal review process. See Annex B for the process the CCG will follow
- 12.3. The CCG will inform the staff member about the outcome of any formal or informal review.

**13. Board oversight**

The board will be given high level information about all concerns raised by our staff through this policy and what the CCG are doing to address any problems. The CCG will include similar high-level information in the Annual Report. The board supports staff raising concerns and wants all staff to feel free to speak up.

**14. Bribery Act 2010**

- 14.1. The CCG has a responsibility to ensure that all staff are made aware of their duties and responsibilities arising from The Bribery Act 2010. The Bribery Act 2010 makes it a criminal offence to bribe or be bribed by another person by offering or requesting a financial, or other advantage, as a reward or incentive

to perform a relevant function or activity improperly. The penalties for any breaches of the Act are potentially severe. There is no upper limit on the level of fines that can be imposed, and an individual convicted of an offence can face a prison sentence of up to 10 years.

14.2. For further information see:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/832012/bribery-act-2010-quick-start-guide.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/832012/bribery-act-2010-quick-start-guide.pdf)

14.3. Due consideration has been given to the Bribery Act 2010 in the review of this policy and no specific risks were identified.

## **15. NHS Constitution**

15.1. The CCG is committed to: Designing and implementing services, policies and measures that meet the diverse needs of its population and workforce, ensuring that no individual or group is disadvantaged.

15.2. This Policy supports the NHS Constitution as follows:

*“The NHS aspires to the highest standards of excellence and professionalism in the provision of high-quality care that is safe, effective and focused on patient experience; in the planning and delivery of the clinical and other services it provides; in the people it employs and the education, training and development they receive; in the leadership and management of its organisations; and through its commitment to innovation and to the promotion and conduct of research to improve the current and future health and care of the population”.*

## **16. Dissemination/Publication**

16.1. This policy will be available on the intranet on the staff hub area. It will be sent to all staff via staff email communication and shared as part of the induction.

## **17. Review and revision**

This policy will be reviewed every three years or sooner if required, to ensure continued validity and relevance, with a schedule of proposed amendments presented to the Audit Committee for approval.

## **18. Stakeholder /Consultation information**

The draft policy will be shared at the CCG’s Staff Partnership forum, executive management team to get their comments and amendments to the policy prior to it being approved at the Audit Committee.

## **19. References and links relating to this policy**

This policy is set out in accordance with the following guidance provided by NHS England <https://www.england.nhs.uk/publication/freedom-to-speak-up-raising-concerns-whistleblowing-policy-for-the-nhs/>

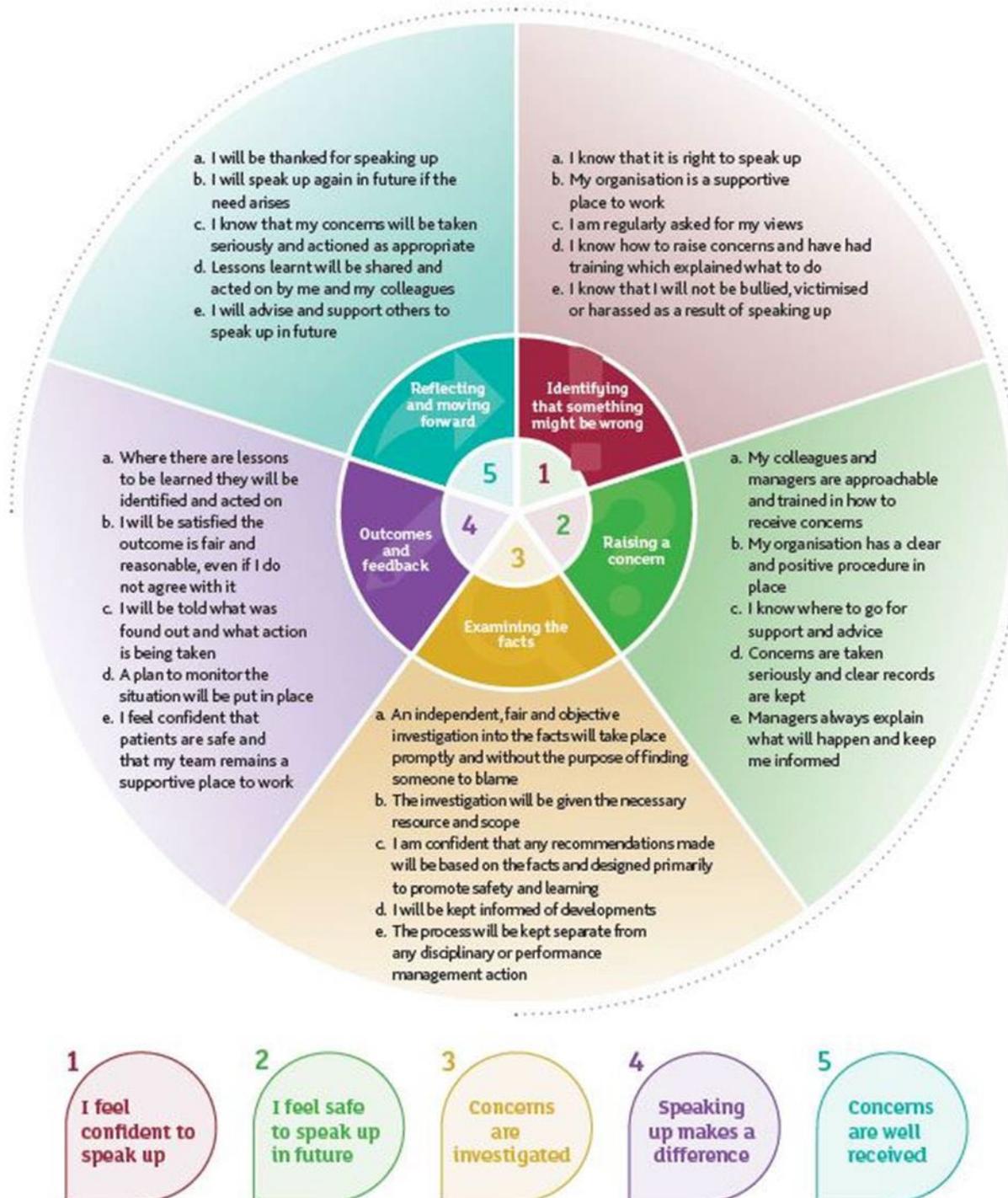
### **Other CCG policies:**

- Anti-Fraud, Bribery & Corruption Policy

- Standards of Business Conduct and Managing Conflict of Interest Policy
- Equality & Diversity Policy
- Grievance Policy
- Bullying & Harassment Policy

## Annex B: A vision for raising concerns in the NHS

Source: Sir Robert Francis QC (2015) *Freedom to Speak Up: an independent report into creating an open and honest reporting culture in the NHS*.





## **Annex B**

### **Step one**

If a staff member has a concern about a risk, malpractice, or wrongdoing at work, they are advised if they feel comfortable in the first instance to raise it with their line manager. This may be done orally or in writing. Their concern will be acknowledged within 5 days of receiving the concerns by the line manager.

If the concern is about fraud, corruption, or bribery, please raise the concern with the CCG's Anti-Crime Specialist Sarah Pratley, [spratley@nhs.net](mailto:spratley@nhs.net) or 07769 640781, or the Director of Finance.

### **Step two**

If the staff member feels unable to raise the matter with their line manager, for whatever reason, they can raise the matter confidentially with our local Freedom to Speak Up Guardian, Kathy Atkinson, [kathy.atkinson@nhs.net](mailto:kathy.atkinson@nhs.net). This person has been given special responsibility and training in dealing with these types of concerns. They will:

- treat your concern confidentially unless otherwise agreed
- ensure you receive timely support to progress your concern
- escalate to the board any indications that you are being subjected to detriment for raising your concern
- remind the organisation of the need to give you timely feedback on how your concern is being dealt with
- ensure you have access to personal support since raising your concern may be stressful.

If the staff member wants to raise the matter in confidence, they are advised to state this at the outset so that appropriate arrangements can be made.

With both step one and two, the staff member will receive feedback on the management action being taken within a one calendar month, with due regard to the organisation's duty of confidence and without infringing the rights of other parties, for example where disciplinary action is being taken against another employee

### **Step three**

If these channels have been followed and the staff member still have concerns, or if they feel that the matter is so serious that you cannot discuss it with any of the above, please contact *[chief executive, medical director, responsible officer, nursing director, nominated non-executive director]*.

### **Step four**

Alternatively, staff members can raise concerns formally with external bodies *[relevant list of prescribed bodies to be provided, similar to that on page XXX]*.

NHS Counter Fraud Authority Fraud and Corruption Reporting Line (24-hour freephone) – 0800 028 4060

Procedural Document - checklist for approval

<b>Procedural document checklist for approval</b>			
To be completed and attached to any document which guides practice when submitted to the appropriate committee for consideration and approval.			
	<b>Title of document being reviewed:</b> Policy framework for the development and management of procedural documents	<b>Yes/No/Unsure</b>	<b>Comments/Details</b>
<b>A</b>	<b>Is there a sponsoring director?</b>	Yes	Kathy Atkinson Non-Executive Lay PPI lead
<b>1.</b>	<b>Title</b>		
	Is the title clear and unambiguous?	Yes	
	Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	Policy
<b>2.</b>	<b>Rationale</b>		
	Are reasons for development of the document stated?	Yes	
<b>3.</b>	<b>Development Process</b>		
	Do you feel a reasonable attempt has been made to ensure relevant expertise has been used?	Yes	
	Is there evidence of consultation with stakeholders, unions (where appropriate) and users?	Yes	
<b>4.</b>	<b>Content</b>		
	Is the objective of the document clear?	Yes	
	Is the target group clear and unambiguous?	Yes	
	Are the intended outcomes described?	Yes	
<b>5.</b>	<b>Evidence Base</b>		
	Is the type of evidence to support the document identified explicitly?	Yes	
	Are key references cited?	Yes	
<b>6.</b>	<b>Approval</b>		
	Does the document identify which committee/group will approve it?	Yes	
<b>7.</b>	<b>Dissemination and Implementation</b>		
	Is there an outline/plan to identify how the document will be disseminated and	Yes	

**Procedural document checklist for approval**

To be completed and attached to any document which guides practice when submitted to the appropriate committee for consideration and approval.

	<b>Title of document being reviewed:</b> Policy framework for the development and management of procedural documents	<b>Yes/No/ Unsure</b>	<b>Comments/Details</b>
	implemented amongst the target group? Please provide details. [These two lines should be in the grey are above]		
<b>8.</b>	<b>Process for Monitoring Compliance</b>		
	Have specific, measurable, achievable, realistic, and time-specific standards been detailed to monitor compliance with the document?		
<b>9.</b>	<b>Review Date</b>		
	Is the review date identified?	Yes	
<b>10.</b>	<b>Overall Responsibility for the Document</b>		
	Is it clear who will be responsible for implementing and reviewing the documentation i.e., role of author/originator?	Yes	

**Director Approval**

On approval, please sign and date it and forward to the chair of the committee/group where it will receive final approval.

Name	Emma Boswell	Date	
Signature			

**Committee Approval**

On approval, Chair to sign and date.

Name	Arthur Ferry	Date	
Signature			