

**Freedom to Speak Up: Raising Concerns (Whistleblowing) Policy**  
**ME CCG Policy Reference:**  
**MECCG012**

<b>Target Audience</b>	Board members, subcommittee members and all staff working for, or on behalf of, the CCG.
<b>Brief Description (max 50 words)</b>	This 'standard integrated policy' was one of a number of recommendations of the review by Sir Robert Francis into whistleblowing in the NHS, aimed at improving the experience of whistleblowing in the NHS. It is expected that this policy will be adopted by all NHS organisations in England as a minimum standard to help normalise the raising of concerns for the benefit of all patients.  Our local procedure has been integrated into the policy and provides more detail how we will look into a concern.
<b>Action Required</b>	To be approved by the CCG Board then disseminated to all staff

**Document Information**

<b>Version Number</b>	Version 2.5
<b>Accountable Officer</b>	Accountable Officer
<b>Responsible Officer</b>	Director of Governance & Performance
<b>Date Approved by Audit Committee</b>	4 September 2019
<b>Adopted by Board</b>	Part II, 26 March 2020 (virtual meeting)
<b>Review Date</b>	March 2022 (Agreed at Audit Committee 23 Feb 2021 to extend the review date for this policy to March 2022)
<b>Stakeholders engaged in development/review</b>	Audit Committee, Quality, Finance and Governance Committee

**Amendment History**

<b>Version</b>	<b>Date</b>	<b>Reviewer</b>	<b>Comments</b>
0.2	20/06/13	Corporate and Governance Team	Contact details updated on page 5 and irrelevant information removed.
0.3 (renumbered to 1.0)	20/02/14	Kerry Franklin – Assistant Director of Quality Assurance and Governance Support	Policy reviewed in light of planned review. Policy version number amended to v1.0 to ensure consistency.

<b>Version</b>	<b>Date</b>	<b>Reviewer</b>	<b>Comments</b>
1.1	26/02/15	Director of Corporate Services/Head of Corporate Governance	Section 5 (How to raise a concern internally) amended and contact details up-dated.
1.2	09/03/2015	Audit Committee	Minor amendments made following comments by Audit Committee.
2.0	11/07/16	Director of Corporate Services	Complete refresh of policy to reflect 'standard integrated policy' template developed by NHSI and NHS England for adoption by all NHS organisations in England
2.1	28/09/17	Director of Corporate Services	Policy reviewed – no amendments required at this time. Audit Committee agreed to roll the policy over for one year.
2.2	31/07/18	Head of Corporate Governance	Minor amendments made to take account of revised job titles, etc.
2.3	28/08/18	Audit Committee	Policy approved subject to minor amendments requested by Chair of Audit Committee.
2.4	21/08/19	Head of Corporate Governance Local Counter Fraud Specialist	Minor amendments following annual review.
2.5	05/03/2020	Head of Corporate Governance	Freedom to Speak Up Guardian Contact details amended from Alan Hubbard to John Gilham.

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## 1. SPEAK UP – WE WILL LISTEN

- 1.1 Speaking up about any concern you have at work is really important. In fact, it's vital because it will help us to keep improving our services for all patients and the working environment for our staff.
- 1.2 You may feel worried about raising a concern, and we understand this. But please don't be put off. In accordance with our duty of candour, our senior leaders and entire board are committed to an open and honest culture. We will look into what you say and you will always have access to the support you need.

## 2. WHAT CONCERNS CAN I RAISE?

- 2.1 You can raise a concern about risk, malpractice or wrongdoing you think is harming the service we deliver or commission. Just a few examples of this might include (but are by no means restricted to):
  - unsafe patient care
  - unsafe working conditions
  - inadequate induction or training for staff
  - lack of, or poor, response to a reported patient safety incident
  - suspicions of fraud (which must be reported to our Local Counter-Fraud Specialist (LCFS), the Chief Finance Officer or the NHS Counter Fraud Authority – NHSCFA)<sup>1</sup>)
  - a bullying culture (across a team or organisation rather than individual instances of bullying).
- 2.2 For further examples, please see the [Health Education England video](#).
- 2.3 Remember that if you are a healthcare professional you may have a professional duty to report a concern. If in doubt, please raise it.
- 2.4 Don't wait for proof. We would like you to raise the matter while it is still a concern. It doesn't matter if you turn out to be mistaken as long as you are genuinely troubled.
- 2.5 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](#).

## 3. FEEL SAFE TO RAISE YOUR CONCERN

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<sup>1</sup> Contact details for the individuals listed in this policy to whom a whistleblowing concern may be raised can be found in Annex A.  
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- 3.1 If you raise a genuine concern under this policy, you will not be at risk of losing your job or suffering any form of reprisal as a result. We will not tolerate the harassment or victimisation of anyone raising a concern. Nor will we tolerate any attempt to bully you into not raising any such concern. Any such behaviour is a breach of our values as an organisation and, if upheld following investigation, could result in disciplinary action
- 3.3 Provided you are acting honestly, it does not matter if you are mistaken or if there is an innocent explanation for your concerns.

## 4. CONFIDENTIALITY

- 4.1 We hope you will feel comfortable raising your concern openly, but we also appreciate that you may want to raise it confidentially. This means that while you are willing for your identity to be known to the person you report your concern to, you do not want anyone else to know your identity. Therefore, we will keep your identity confidential, if that is what you want, unless required to disclose it by law (for example, by the police). You can choose to raise your concern anonymously, without giving anyone your name, but that may make it more difficult for us to investigate thoroughly and give you feedback on the outcome. The CCG is committed to thoroughly investigating all reports whether raised anonymously or not. However, if you are intending to raise a report anonymously, you should include as much information and, if relevant, any supporting documentation.

## 5. WHO CAN RAISE A CONCERN?

- 5.1 Anyone who works (or has worked) in the NHS, or for an independent organisation that provides NHS services can raise concerns. This includes agency workers, temporary workers, contracted workers, students, volunteers and governors.

## 6. WHO SHOULD I RAISE MY CONCERN WITH?

- 6.1 In many circumstances the easiest way to get your concern resolved will be to raise it formally or informally with your line manager or lead clinician. But where you don't think it is appropriate to do this, you can use any of the options set out below in the first instance.
- 6.2 If raising it with your line manager (or lead clinician) does not resolve matters, or you do not feel able to raise it with them, you can contact one of the following people:<sup>2</sup>
- our Freedom to Speak Up Guardian – this is an important role identified in the Freedom to Speak Up review to act as an independent and

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<sup>2</sup> Annex B sets out an example of how a concern might be escalated through a local process

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. See **Annex A** for contact details.

- Head of Corporate Governance or one of our Safeguarding Leads.
- If the report concerns Fraud or Bribery, this must be reported to the Local Counter Fraud Specialist (LCFS) [eleni.gill@nhs.net](mailto:eleni.gill@nhs.net) or the Chief Finance Officer immediately, unless the LCFS or the Chief Finance Officer is implicated. If that is the case, you should report it to the NHS Fraud and Corruption Reporting Line (FCRL) on freephone 0800 028 4060 or at <https://cfa.nhs.uk/reportfraud>.

Contact details are listed at **Annex A**.

- 6.4 All these people have been trained in receiving concerns and will give you information about where you can go for more support.
- 6.5 If for any reason you do not feel comfortable raising your concern internally, you can raise concerns with external bodies, listed on page 8.

## 7. ADVICE AND SUPPORT

- 7.1 Details on the local support available to you can be found here <http://www.midessexccg.nhs.uk/>. However, you can also contact the [Whistleblowing Helpline](#) for the NHS and social care, your professional body or trade union representative.

## 8. HOW SHOULD I RAISE MY CONCERN?

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

## 9. WHAT WE WILL DO

- 9.1 We are 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 C**).
- 9.2 We are committed to listening to our staff, learning lessons and improving patient care. On receipt the concern will be recorded and you will receive an acknowledgement within two working days. The central record will record the date the concern was received, whether you have requested confidentiality, a summary of the concerns and dates when we have given you updates or feedback. If you have submitted an anonymous report, this will not be possible but the matter will be investigated.

### **Investigation**

- 9.3 Where you have been unable to resolve the matter quickly (usually within a few days) with your line manager, we will carry out a proportionate investigation – using someone suitably independent (usually from a different part of the organisation) and properly trained – and we will reach a conclusion within a reasonable timescale (which we will notify you of). Wherever possible we will carry out a single investigation (so, for example, where a concern is raised about a patient safety incident, we will usually undertake a single investigation that looks at your concern and the wider circumstances of the incident<sup>3</sup>). The investigation will be objective and evidence-based, and will produce a report that focuses on identifying and rectifying any issues, and learning lessons to prevent problems recurring.
- 9.4 We may decide that your concern would be better looked at under another process; for example, our process for dealing with bullying and harassment. If so, we will discuss that with you.
- 9.5 Any employment issues (that affect only you and not others) identified during the investigation will be considered separately.

### **Communicating with you**

- 9.6 We will treat you with respect at all times and will thank you for raising your concerns. We will discuss your concerns with you to ensure we understand exactly what you are worried about. We will tell you how long we expect the investigation to take and keep you up to date with its progress. Wherever possible, we will share the full investigation report with you (while respecting the confidentiality of others). We will agree the most suitable method of contacting you.

### **How will we learn from your concern?**

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<sup>3</sup> If your concern suggests a Serious Incident has occurred, an investigation will be carried out in accordance with the [Serious Incident Framework](#).

- 9.7 The focus of the investigation will be on improving the service we provide for patients. Where it identifies improvements that can be made, we will track them to ensure necessary changes are made, and are working effectively. Lessons will be shared with teams across the organisation, or more widely, as appropriate.

### **Board oversight**

- 9.8 The Board will be given high level information about all concerns raised by our staff through this policy and what we are doing to address any problems. We will include similar high level information in our annual report. The Board supports staff raising concerns and wants you to feel free to speak up.

### **Review**

- 9.9 We will review the effectiveness of this policy and local process at least annually, with the outcome published and changes made as appropriate.

## **10. RAISING YOUR CONCERN WITH AN OUTSIDE BODY**

- 10.1 Alternatively, you can raise your concern outside the organisation with:

- NHS England and 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
  - primary medical services (general practice)
  - primary dental services
  - primary ophthalmic services
  - local pharmaceutical services
  -
- Care Quality Commission for quality and safety concerns
- Health Education England for education and training in the NHS
- NHS Counter Fraud Authority for concerns about fraud and corruption.

### **Making a ‘protected disclosure’**

- 10.2 There are very specific criteria that need to be met for an individual to be covered by whistleblowing law 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, who you can make a protected disclosure to. To help you consider whether you might meet these

criteria, please seek independent advice from the [Whistleblowing Helpline](#) for the NHS and social care, [Public Concern at Work](#) or a legal representative.

### **National Guardian Freedom to Speak Up**

- 10.3 The [National Guardian's Office](#) is an independent, non-statutory body with the remit to lead culture change in the NHS so that speaking up becomes business as usual. The office is not a regulator, but is sponsored by the CQC, NHS England and NHS Improvement. The National Guardian's office provides challenge, learning and support to the healthcare system as a whole by reviewing organisation's speaking up culture and the handling of concerns where they have not followed good practice.

## ANNEX A: KEY CONTACT DETAILS

<b>Role</b>	<b>Name</b>	<b>Telephone</b>	<b>Email</b>
Freedom to Speak Up Guardian	John Gilham	07710206001	<a href="mailto:john.gilham@nhs.net">john.gilham@nhs.net</a>
Executive Director for Whistleblowing (Director of Governance & Performance)	Viv Barnes	01245 398139 07891 303745	<a href="mailto:viv.barnes@nhs.net">viv.barnes@nhs.net</a>
Clinical Vice-Chair	Dr Julie McGeachy	TBC	<a href="mailto:Julie.mcgeachy1@nhs.net">Julie.mcgeachy1@nhs.net</a>
Head of Corporate Governance	Sara O'Connor	01245 398731 07769 161681	<a href="mailto:sara.oconnor@nhs.net">sara.oconnor@nhs.net</a>
Safeguarding Adults Lead	Jackie Barrett	01245 398064  07508 108674	jackie.barrett1@nhs.net
Safeguarding Children Lead	Leila Francis	01245 459472   07875 086090	<a href="mailto:leila.francis@nhs.net">leila.francis@nhs.net</a>
Director of Nursing & Quality	Rachel Hearn	01245 459431 07827 976937	<a href="mailto:rachel.hearn@nhs.net">rachel.hearn@nhs.net</a>
Local Counter Fraud Specialist	Eleni Gill	07827 308906	<a href="mailto:eleni.gill@nhs.net">eleni.gill@nhs.net</a>
NHS Counter Fraud Authority		0800 028 40 60	<a href="https://cfa.nhs.uk/reportfraud">https://cfa.nhs.uk/reportfraud.</a>

## ANNEX B: EXAMPLE PROCESS FOR RAISING AND ESCALATING A CONCERN

### Step one

If you have a concern about a risk, malpractice or wrongdoing at work, we hope you will feel able to raise it first with your line manager, lead clinician or tutor (for students). This may be done orally or in writing.

### Step two

If you feel unable to raise the matter with your line manager or lead clinician, for whatever reason, please raise the matter with our local Freedom to Speak Up Guardian.

This person has been given special responsibility and training in dealing with whistleblowing 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 you want to raise the matter in confidence, please say so at the outset so that appropriate arrangements can be made.

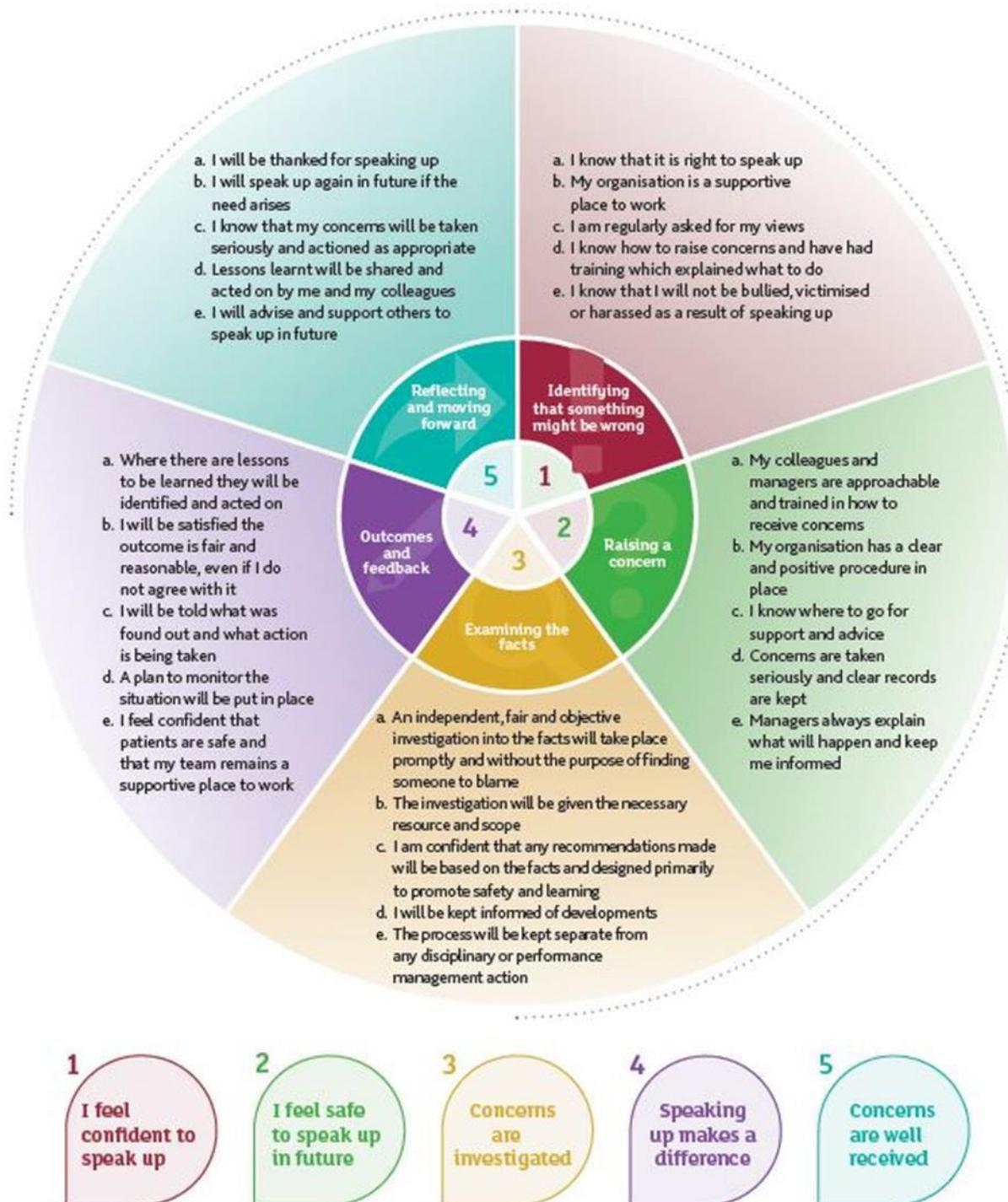
### Step three

If these channels have been followed and you still have concerns, or if you feel that the matter is so serious that you cannot discuss it with any of the above, please contact our Executive Director with responsibility for whistleblowing or our Clinical Vice Chair.

### Step four

You can raise concerns formally with external bodies – see page 8.

## ANNEX C: 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 D: REGULATORY FRAMEWORK

### **Public Interest Disclosure Act 1998**

The Public Interest Disclosure Act protects workers from detrimental treatment or victimisation from their employer if, in the public interest, they blow the whistle on wrongdoing.

The Act protects most workers in the public, private and voluntary sectors. The Act does not apply to genuinely self-employed professionals (other than in the NHS), voluntary workers (including charity trustees and charity volunteers) or the intelligence services.

The Act protects employees from retaliation or mistreatment having raised a genuine concern in good faith. For example, if an employee is dismissed because s/he has made a protected disclosure that will be treated as unfair dismissal

### **Enterprise and Regulatory Reform Act 2013**

The Act clarifies that such a whistleblowing concern must be raised in the 'public interest'. It also clarifies that an employer may be liable for the behaviour of other employees if they victimise a person who has reported wrongdoing. To be protected, the disclosure must be in the public interest, the worker must have a reasonable belief that the information shows that one of the categories of wrongdoing listed in the legislation has occurred or is likely to occur, and the concern must be raised in the correct way.