SPEAKING UP POLICY AND PROCEDURE  
(Incorporating Whistleblowing / Raising Concerns policy and procedure)

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</tr>
</tbody>
</table>
## Contents

Policy ................................................................................................................................................. 3

1. Introduction and Background ........................................................................................................ 3

2. Policy Statement ............................................................................................................................ 3

3. Definitions ....................................................................................................................................... 4

4. Equality statement ........................................................................................................................ 4

5. Duties ............................................................................................................................................... 4

6. Application and scope .................................................................................................................... 5

7. Types of concerns to be raised ....................................................................................................... 5

8. Concerns specific to employment or about financial misconduct .............................................. 6

9. Principles ......................................................................................................................................... 7

10. Related policies and timeframes .................................................................................................. 7

11. Anonymity .................................................................................................................................... 8

12. Support for staff ........................................................................................................................... 8

13. Monitoring .................................................................................................................................... 10

Procedure ........................................................................................................................................... 11

1. How to raise a concern ..................................................................................................................... 11

2. Option A- speaking to the person directly ...................................................................................... 11

3. Option B- Speak to your line manager, more senior manager or a professional lead .11

4. Option C- Speak to designated Directors ..................................................................................... 11

5. Option D- Contact the Chief Executive........................................................................................ 12

6. Option E- Contact the designated Non-executive Director (Trust Speaking up Lead) .12

7. Option F- Contact the Chair .......................................................................................................... 13

8. Independent Advice ....................................................................................................................... 14

9. Disclosure of concerns to external bodies .................................................................................... 14

Appendix A- Flowchart of Raising Concerns procedure .................................................................. 14

Appendix B- Equality analysis ......................................................................................................... 17
Policy

1. Introduction and Background

1.1. In 2010, the NHS Staff Council agreed a new right and duty for NHS staff to raise concerns about malpractice, patient safety, financial malpractice or any serious risks at work that are in the public interest.

1.2. In January 2013, the Francis report highlighted the barriers and struggles that NHS staff felt when speaking up and raising concerns. The Government conducted a consultation after which, the NHS Constitution was updated in 2012 to include provisions on whistleblowing in the NHS. Considering that all NHS staff and employers must adhere to the NHS constitution and that it is now been made a contractual right, this highlights the commitment of the NHS to deal with concerns at the earliest stage possible so that any risks to patient care can be mitigated.

1.3. Further to this, in February 2015, Sir Robert Francis QC published his final report following the Freedom to Speak Up review, which looked at the raising concerns culture in the NHS. The report makes a number of key recommendations under five overarching themes with actions for NHS organisations and professional and system regulators to help foster a culture of safety and learning in which all staff feel safe to raise a concern.

1.4. This policy and procedure provides formal process and guidance for staff who have genuine concerns about what is happening at work, or where concerns already raised have not been dealt with appropriately. The trust places a high importance on safeguarding its patients, staff and the public and we need the combined efforts of all staff to do this effectively.

1.5. This policy incorporates the trust’s whistleblowing and raising concerns procedure. Whistleblowing is a term often used where a person involved with the organisation raises a concern about the conduct of others in the organisation or the way in which the organisation is run. It is linked to the Public Interest Disclosures Act in 1998 (often called the “whistleblowing law”) which provides protection for whistleblowers who report concerns about wrongdoing in the workplace. Whistleblowers are protected from dismissal and suffering any detriment for having ‘blown the whistle’.

2. Policy Statement

2.1 This policy demonstrates the trust’s commitment towards tackling malpractice and wrongdoing to ensure that staff feel comfortable and safe in speaking up and raising concerns within the workplace. It also reinforces trust’s strong belief that speaking up and raising concerns should be part of normal routine business for all our staff. We strongly believe that the provision of an effective and confidential procedure by which staff feel able to speak up and raise concerns is vital.

2.2 The intention of this policy is to provide mechanisms through which anyone engaged within the trust can speak up about malpractice safely with the assurance and confidence that their concern will be looked into thoroughly and appropriate steps taken. The policy also demonstrates our assurance to protect staff who raise concerns under this policy and that they will not be at risk of losing their job or suffering victimisation or detriment in anyway. It also attempts to define the type of concerns which fall under this policy and the breadth of scope that this policy applies to, though this is not an exhaustive list.
2.3 The trust believes that every member of staff has a duty to raise concerns at the earliest reasonable opportunity about the provision of care or any other malpractice (such as a risk to patient safety, fraud or breaches of patient confidentiality) within the trust where care and/or behaviour/conduct is believed to be inadequate or unacceptable. In addition staff have duties imposed upon them to raise such concerns by their respective professional regulatory bodies, such as the GMC, NMC, ACCA etc.

2.4 Anybody making a qualifying disclosure under this policy will be protected from detriment for having made the disclosure. It is safe for all those engaged with the trust to raise concerns appropriately. Victimisation of anyone who has made a qualified disclosure will be unacceptable and treated accordingly. This assurance will not be extended to staff members where it is later established that there was a malicious intent. See section 12.2 for further details.

3. Definitions

3.1 Whistleblowing- the disclosure of serious risks, criminal activity or any form of malpractice in the workplace

3.2 Qualifying disclosure- any disclosure of information that, in the reasonable belief of the worker, is made in the public interest.

4. Equality statement

4.1 The Royal Free London NHS Foundation Trust is committed to creating a positive culture of respect for all individuals, including job applicants, employees, patients, their families and carers as well as community partners. The intention is, as required by the Equality Act 2010, to identify, remove or minimise discriminatory practice in the nine named protected characteristics of age, disability (including HIV status), gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex or sexual orientation. It is also intended to use the Human Rights Act 1998 to treat fairly and value equality of opportunity regardless of socio-economic status, domestic circumstances, employment status, political affiliation or trade union membership, and to promote positive practice and value the diversity of all individuals and communities.

4.2 A full equality impact assessment has been undertaken for this policy and no negative impacts have been identified. Concerns raised under this policy will be monitored and reviewed to assess any negative impact on different equality groups.

5. Duties

5.1 Designated Directors- the designated directors (Non-executive Director - Speaking up Lead, Director of Planning and Director of Workforce and OD) must ensure their contact details are widely known in order that staff feel able to speak with them, raise any issues and whistleblowing concerns. They must ensure that the issue is clearly understood, taking care to keep the information and arrangements confidential. They should ascertain the type of concern and nominate appropriate contacts if necessary to make enquiries and look into

If there are genuine concerns about possible corruption, malpractice and danger that would adversely affect others e.g. patients, public, other staff or the Trust itself → please speak up!
the matter. The Directors should also regularly monitor and report to the Trust Executive Board matters and any risks arising under the scope of this policy.

5.2 **Managers or designated contacts (including professional leads)** - are responsible for investigating concerns that are brought to their attention. These concerns will be taken seriously, considered fully and sympathetically, recognising that raising concerns can be a difficult experience. As the manager or designated contact, they will provide advice and support, and feedback to the individual/s who has raised concerns. They will also be responsible for liaising with the senior managers and directors to escalate matters that require further investigation.

5.3 **Workforce** - will support and advise staff and managers with raising or dealing with concerns and adhering to this policy.

5.4 **Employees, contractors, other workers and anybody involved with the NHS** - raise their concerns within the guidelines of this policy and act honestly at all times.

5.5 **Trade union representatives (including Staff Side Speaking-up Guardian)** - will offer support to members who raise concerns through the Whistleblowing policy. Their role is to support and be a contact for them to discuss their concerns and provide advice to the employee on the appropriate process to follow. The Staff Side speaking up Guardian will also be responsible to raise concerns on behalf of workers who feel unable to do so themselves.

6. **Application and scope**

6.1 This policy applies to all those who are involved with the trust. This includes full-time or part-time employees, self-employed, those who are working in the trust through an agency or bank, as a volunteer, students, trainees, those on an honorary contract, patients, suppliers, providers etc. For ease, and where applicable the term “worker” will be used throughout the policy and associated procedure. Volunteers are not covered under the provisions of the Public Interest Disclosure Act 1998.

7. **Types of concerns to be raised**

7.1 Legal protection is provided for workers who legitimately raise concerns about specified matters. These are called “qualifying disclosures”. To be a qualifying disclosure it needs to be made in the public interest and there should be a reasonable belief that one or more of the following has been or is being or is likely to be committed:

- a criminal offence
- a miscarriage of justice
- an act creating a health and safety risk
- an act causing damage to the environment
- a breach of a legal obligation
- concealment of the above.

7.2 The trust is also committed to maintaining its World Class Care (WCC) values of being welcoming, respectful, communicating and reassuring. It is the duty of all engaged with the trust to speak up about concerns to help maintain the standards. The WCC standards apply to all workers, in everything they do. Therefore, if it is witnessed or personally experienced that someone engaged with the trust is acting in any way that is not in line with these promises, then it is the worker’s responsibility to speak up about this.
7.3 Some examples of risk, malpractice or criminal activity that may be raised through this policy and procedure are set out below. These examples are not exhaustive:

- Ill treatment of a patient or staff member
- Compromising patient care
- Avoidable harm to patients, staff or members of the public, this may include emotional and physical harm or neglect
- A healthcare professional being instructed to perform an activity which they do not feel safe doing or that they are unqualified/trained to perform
- A worker displaying a disregard for policy or legislation
- A worker who is in contact with vulnerable people is arrested and/or cautioned by the police for criminal activity
- Suspicion of fraudulent activity
- Suspicion of Terrorist / Extremist activity (see section 9.2)

8. Concerns specific to employment or about financial misconduct

8.1 Whistleblowing concerns are different from grievances. Grievances are about a staff member’s or worker’s own employment position and have no additional public interest. If there is a concern relating to the staff member’s own employment or treatment, they should use the grievance policy or bullying/harassment policy, which can be obtained from their manager, Workforce department or can be found on Freenet under policies section (http://freenet/policies.aspx).

8.2 If there is a concern about financial misconduct or fraud, please see the Counter Fraud and Bribery Policy on Freenet for further information or contact Baker Tilly Risk Advisory Services LLP (the trust’s Local Counter Fraud Specialists) at:

Stevan Burtenshaw  
Senior Consultant  
Phone: +44 (0)20 3201 8000  
Direct Line: +44 (0)1908 687 800  
Mobile: +44 (0)7528 970136  
Email: stevan.burtenshaw@bakertilly.co.uk

If in doubt...

IF YOU SEE SOMETHING

SAY SOMETHING...
9. **Principles**

9.1 All those engaged with the NHS have a contractual right and duty to raise genuine concerns they have with their employer about malpractice, patient safety, financial impropriety or any other serious risks they consider to be in the public interest. In addition staff have duties imposed upon them to raise such concerns by their respective professional regulatory bodies, such as the GMC, NMC, ACCA etc.

9.2 For any concern on all levels of services, the trust will deal with your concerns quickly and as near to the source of concern as possible.

9.3 It is not necessary for workers to have proof of the act- a reasonable belief is sufficient. Workers are encouraged to raise the concern at the earliest opportunity so that there is time to assess the issues within a supportive environment.

9.4 Workers have no responsibility for investigating the matter. It is the trust’s responsibility to ensure that an investigation takes place.

9.5 The trust encourages workers to raise concerns using the associated procedure in the first instance. If worker’s are not sure whether or not to raise a concern, they should discuss the issue with a manager or the workforce department or the staff side representatives.

9.6 In all cases, workers are encouraged to raise the concerns **within** the trust rather than overlooking a problem or 'blowing the whistle' outside.

9.7 Any matter raised under this policy will be reviewed thoroughly, promptly and confidentially, and the outcome of the enquiry will be reported back to the worker raising concern.

9.8 The board, the chief executive and the trade unions are committed to this policy. If a worker raises a genuine concern under this policy they will not be at risk of losing their job or suffer any detriment. If it is felt that a staff member (who has raised concerns under the scope of this policy) may be at risk of detriment or any potential harm by continuing to work in their existing role or place of work, suitable redeployment opportunities will be considered.

9.9 The trust will consider it a serious disciplinary matter if a member of staff was found to **knowingly** make a false allegations under this policy.

9.10 Victimisation by other staff members of anyone for raising a qualified disclosure will be a disciplinary offence regardless of the grade of the individual (See Section 12.2). An instruction to cover up wrongdoing is itself a disciplinary offence. If told not to raise or pursue any concern, even by a person in authority such as a manager, workers should not agree to remain silent. Workers should report the matter to a more senior manager or utilise some of the other routes set out in the procedure under this policy.

10. **Related policies and timeframes**

10.1 All concerns will be looked into promptly and depending on the nature of the concern raised, the investigation and process will be managed under the relevant trust policies and procedures. E.g.1 if misconduct is discovered as a result of any investigation under this procedure the trust’s disciplinary procedure will be used, in addition to any appropriate external measures. E.g.2 if the concern discovered is linked to bullying or harassment, the investigation will be conducted under the trust’s Bullying and Harassment policy and procedure. This may also include disciplinary proceedings and appropriate sanctions against the alleged offender in line with trust’s Disciplinary policy and procedure.
10.2 The trust recognises that it is difficult to set target timeframes for investigating concerns raised under this policy as the timeframes for investigation will differ and depend on the nature of concern raised and the type of investigation required. Where it is deemed appropriate that the concerns will be investigated under a different trust policy or procedure, the relevant timeframes of the associated policy will apply.

10.3 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. Wherever possible, consideration will be made to share the investigation report with the worker (while respecting the confidentiality of others).

10.4 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.

11. Anonymity

11.1 With all of the above assurances, it is hoped that workers will raise their concerns openly. However, there may be circumstances when workers may request that their identity is not revealed. In this case, the trust will not disclose their identity without their consent unless required by law. There may be times when the trust is unable to resolve a concern without revealing worker’s identity, for example where personal evidence is essential. In such cases, the trust will discuss with the individual whether and how the matter can best proceed.

11.2 Where an anonymous concern is received, a designated contact will still examine the contents of the concern with relevant senior managers and investigate where possible. However without talking to the worker and without the attainment of any additional facts, a full investigation may be difficult to be carried out. In these circumstances this may also mean that it will be more difficult for the trust to protect the worker or give feedback. Accordingly the worker cannot be provided the assurances offered above if a concern is reported anonymously.

12. Support for staff

12.1 Staff Side Guardian

If a worker feels unable to raise concerns on their own, the trust has a dedicated staff side Speaking up Guardian whom they can approach.

- The Staff Side Speaking-up Guardian will act in an independent capacity and provide immediate support and advice to staff who wish to raise concerns.
- Help staff determine the best course of action and advising them on their options as set out in the procedure section of this policy and the Appendix A.
- Raise concerns on behalf of staff where they feel unable to do so.
- Ensure staff are receiving right level of support and sign post them to all internal and external sources of support as appropriate.
- Work closely with the Director of Workforce and OD, Director of planning and NED Lead to develop a robust governance and assurance process around this policy.
- Link up with other staff side colleagues in order to improve resolution results within the trust and share learning on a wider basis within the organisation.
The trust staff side Speaking up Guardian is Jim Mansfield (Staff Side Chair, Tel: 07740 197923).

12.2 Staff Raising Concerns

12.2.1 The trust will not tolerate harassment or victimisation of a member of staff who has raised a concern. If a member of staff feels that they are being subjected to such treatment as a result of raising a concern, they should inform the manager dealing with their concern or escalate via one of the designated managers listed under the procedure within this policy. The trust will take action in line with the Disciplinary policy and procedure against those who subject an individual to detriment because they raised a concern. Examples of subjected detriment could include (but not limited to):

- Failure to promote
- Denial of training
- Closer monitoring
- Ostracism
- Blocking access to resources
- Unrequested re-assignment or re-location
- Unreasonably not granting requests for leave
- Demotion
- Unreasonably denying flexible working requests
- Suspension
- Unreasonably not granting requests for swapping shifts
- Disciplinary sanction
- Bullying or harassment
- Victimization
- Dismissal
- Failing to investigate a subsequent concern

The over-riding principle of this Policy and Procedure is that all members of staff should be aware that the trust strives to achieve a culture of openness and dialogue which at the same time upholds patient confidentiality, does not unreasonably undermine confidence in the service and meets the obligations of staff to their employer.

12.3 Occupational Health & Wellbeing Centre and Employee Assistance Programme – CareFirst

12.3.1 If a member of staff feels stressed or anxious as a result of raising an incidence or practice, the Royal Free London NHS Foundation Trust has dedicated Occupational Health and Wellbeing Centres (OHAWC) located on the Royal Free Hospital and the Chase Farm Hospital sites. The OHAWC’s provide occupational health services to promote staff wellbeing. A multidisciplinary team includes specialist occupational health doctors, nurses
and psychologists who will be able to assist workers with any personal issues or problems. The OHAWC's can be contact on or be 020 7830 2514 and 020 8375 1821. Further details on the services offered can also be found on Freenet.

12.3.2 The trust also offers an employee assistance programme called CareFirst that provides a 24 hour per day, 7 days per week and 365 days per year free and confidential service. CareFirst can be reached via telephone by calling 0800 174319. Further details are available on Freenet.

12.4 Training

12.4.1 The trust informs all new staff via its corporate induction programme on the importance of raising concerns and the various support available for staff.

12.4.2 The trust offers training to managers for investigating concerns under the relevant trust policies through its Licence to lead and manage programme.

12.4.3 Further information for managers to investigate concerns is available through the Employee Relations services and the HR Business Partnering team.

13 Monitoring

13.1 The Audit Committee is responsible for this policy and will review it annually. A central log of all whistleblowing concerns raised within the trust will be maintained. Quarterly updates will be given to the committee on all whistleblowing cases for routes C, D and E that have been captured and logged, along with outcomes and any risks highlighted. The trust Lead in conjunction with the Director of Planning and Director of Workforce and OD will monitor the daily operation of the policy and update the trust board on any risks identified under this policy.

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<tr>
<th>Indicators to be monitored</th>
<th>Indicator Lead</th>
<th>Method of monitoring</th>
<th>Frequency of monitoring</th>
<th>Review Committee (reviews reports to ensure compliance)</th>
<th>Accountable Committee (non-compliance reported to this committee)</th>
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<td>All whistleblowing concerns raised within the trust</td>
<td>Director of Planning and Director of Workforce and OD</td>
<td>Central Log</td>
<td>Quarterly</td>
<td>Audit committee (Routes C and above)</td>
<td>Divisional/ Corporate Board or Executive Board if problem with compliance in one or more Divisions</td>
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Procedure

This procedure includes terms issued to promote clarity and consistency. They are not contractual terms of employment and may be revised or withdrawn by the trust as it sees fit, at its absolute discretion.

1. How to raise a concern

1.1 Please remember that workers do not need to have firm evidence before raising a concern- and are encouraged raising it at the earliest opportunity. However, workers will need to explain as fully as they can the information or circumstances that gave rise to their concern.

1.2 If workers want to raise the matter in confidence, they should say so at the outset so that appropriate arrangements can be made.

1.3 There are a number of routes workers can take to raise a concern which are represented in the flowchart in Appendix A. Details are provided below.

1.4 On receipt of the concern, the worker will receive an acknowledgement within two working days from the person/ route they raise their concern with.

If you do not feel able to raise concerns yourself you can contact Staff Side speaking up Guardian to raise concerns on your behalf.

2. Option A- speaking to the person directly

2.1 Workers should only use this option if they feel safe to do so and/or if the act has caused a risk of malpractice occurring rather than actually occurred yet. There is no requirement to have used this route first before choosing another route. However, this route could be useful where a worker thinks something is not right and feel able to speak to the person directly who may then be able to clear the concerns directly. It could also be that they were unsure of the implications of their actions and appreciate your input. The Trust advises workers not to use this option if their concern relates to a financial malpractice or fraud. Please refer to section 8 of this policy for further information on these types of concerns.

3. Option B- Speak to your line manager or a more senior manager or a professional lead

3.1 Any concerns can be raised by workers with their line manager verbally or in writing. If workers have a reasonable belief that their line manager is involved, or for any reason they do not wish to approach their line manager, then they should raise it to a more senior manager. Workers can also raise concerns to their professional lead directly.

3.2 The manager / senior manager or the professional lead will make enquiries and will feedback to the worker on the relevant action/s taken. This could be, for example, that there was an innocent explanation and therefore no action to be taken, a different policy is more applicable or that a formal investigation is required under a more appropriate policy e.g. disciplinary policy.

4. Option C- Speak to designated Directors

4.1 If a worker feels unable to raise the matter through route A or route B or if after exhausting either route, they feel the concern has not been dealt with or is still occurring; they can raise the matter with the designated directors as below:
For patient or client care/delivery of service: Peter Ridley, Director of Planning- ext. 33442 or 34541;

For all other concerns: David Grantham, Director of Workforce and OD- ext 38536.

4.2 These designated directors have been given specific responsibilities for dealing with whistleblowing concerns. They will nominate a contact who will assess and consider what action may be appropriate. There may be an informal review, an internal inquiry or a more formal investigation. Worker who has raised concern will be told who is handling the matter with their contact details, and what further assistance may be needed from them. On workers request, the trust will provide a written summary of the concern, setting out how the matter will be handled and a timeframe for feedback.

4.3 Following the review, the designated contact will feedback to the worker on the relevant action taken. This could be for example, that there was an innocent explanation and therefore no action to be taken, or a different policy e.g. grievance, bullying and harassment or other relevant procedure is more applicable or that a formal investigation is required under the disciplinary policy etc. An action review will be carried out regularly to ensure the effective application of the policy and procedure.

4.4 Whenever possible, feedback on the outcome of any investigation/enquiry will be given to the worker raising concern. Please note, however, that precise actions taken may not always be disclosed where this would infringe a duty of confidence owed to another person.

4.5 Anybody participating in an investigation/review will be expected to maintain confidentiality regarding any investigation. In extreme circumstances e.g. ongoing fraud, the trust reserves the right not to inform the employee(s) being investigated until absolutely necessary.

5. **Option D - Contact the Chief Executive**

5.1 If route B and route C have been followed and the worker still has concerns, or if they feel that the matter is so serious that they cannot discuss it with any of the above, they should contact the Chief Executive in writing giving as much detail as possible.

5.2 The Chief Executive, can be contacted by writing to:

David Sloman, Chief Executive, 2nd floor executive offices, Royal Free NHS Foundation Trust, Pond Street, London, NW3 2QG (Please mark letter- Private and Confidential).

5.3 In this case the Chief Executive will assess whether route C was followed and refer to the designated directors in the case that it was not. If it was, they may nominate another contact to undergo the process and investigate independently.

6. **Option E - Contact the designated trust leads**

6.1 **Non-executive Director (Trust Speaking up Lead)**

6.1.1 If route B, C and D have been followed and the worker still has concerns, or if they feel that the matter is so serious that they cannot discuss it with any of the above; they should contact the Speaking up trust Lead in writing giving as much detail as possible at following address(Please mark letter - Private and Confidential):

Jenny Owen, Trust Speaking up Lead / Non-executive Director

2nd floor executive offices, Royal Free NHS Foundation Trust, Pond Street, London, NW3 2QG

Or by email: jenny.owen3@nhs.net
6.1.2 The trust Lead will act as an independent voice and board level champion for those who raise concerns and assess whether route C was followed. The NED will refer to the designated directors in the case if it was not referred to the Director of Planning or Director of Workforce and OD. If it was, they may nominate another contact to undergo the process and investigate independently. Staff will be able to go directly to NED lead should they wish to raise a concern directly and bypass the other governance arrangements.

6.1.3 In addition the responsibilities of the NED include:

- To act as conduit through which information is shared between staff and the Board
- Challenge Executive team on areas specific to raising concerns and the culture in the organisation
- Hold the Director of Workforce and OD and the Director of Planning to account on timely resolution of the issues raised, the incident reporting rates and the development of the organisation’s culture in line with this policy and procedure.

6.2 Staff Side Guardian

6.2.1 If a worker feels unable to raise concerns on their own, the trust has a dedicated staff side Speaking up Guardian whom they can approach.

- The Staff Side Speaking-up Guardian will act in an independent capacity and provide immediate support and advice to staff who wish to raise concerns.
- Help staff determine the best course of action and advising them on their options as set out in the procedure section of this policy and the Appendix A.
- Raise concerns on behalf of staff where they feel unable to do so.
- Ensure staff are receiving right level of support and sign post them to all internal and external sources of support as appropriate.
- Work closely with the Director of Workforce and OD, Director of planning and NED Lead to develop a robust governance and assurance process around this policy.
- Link up with other staff side colleagues in order to improve resolution results within the trust and share learning on a wider basis within the organisation.

6.2.2 The trust staff side Speaking up Guardian is Jim Mansfield (Staff Side Chair, Tel: 07740 197923).

7. Option F- Contact the Chair

7.1 If route B, C D and E have been followed and the worker still has concerns, or if they feel that the matter is so serious that they cannot discuss it with any of the above, they should contact the Chair of the trust in writing giving as much detail as possible about their concern.

7.2 Workers can contact the Chair, Dominic Dodd by writing to:

2nd floor executive offices, Royal Free NHS Foundation Trust, Pond Street, London, NW3 2QG

7.3 In this case the Chair will assess whether route C was followed and refer to the designated directors in the case that it was not. If it was, they may nominate another contact to undergo the process and investigate independently.
8. Independent Advice

8.1 The following teams / bodies can offer independent advice if workers are unsure about whether to use this policy and procedure or if they want confidential advice at any stage of the process, including concerns relating to someone external to the trust.

8.2 Workforce- The workforce department can provide independent advice on which policy is most appropriate for the concern to be raised and can advise on the most appropriate way to raise the concern.

8.3 Union- your union representatives can also provide independent and confidential advice on the matter and process and offer support as appropriate.

8.4 Public Concern at Work (PCaW), the independent whistleblowing charity, continues to offer advice to NHS Staff, who witness wrongdoing at work, who are unsure whether or how to raise concerns. Workers can call the helpline for free, confidential advice. Further information and guidance can be obtained by telephoning 020 7404 6609 or emailing whistle@pcaw.org.uk.

8.5 The whistleblowing helpline: is a free-phone service for employees working within the NHS and social care sector. The helpline provides free, confidential advice to staff that witness wrongdoing and are unsure whether or how to raise their concern. 08000 724 725 enquiries@wbhelpline.org.uk

9. Disclosure of concerns to external bodies

9.1 It is hoped that this policy provides the reassurance to workers to raise concerns internally. However, if workers feel that they have exhausted all internal processes, then they may feel it is appropriate to go to an external body. The appropriate regulator would be the Care Quality Commission, the Independent Regulator of NHS Foundation trusts (Monitor), professional regulators, the Audit Commission or the National Patient Safety Agency etc. Disclosures to the media or public should only be considered when all other channels outlined in this policy have been exhausted. It is essential that workers pursue their concerns internally first so that confidentiality can be maintained and issues are dealt with constructively. The Public Interest Disclosure Act directs the worker towards raising the matter internally in the first place. Further advice and guidance on wider disclosures can be obtained from the services below.

9.2 Royal Free London NHS Foundation Trust recognises its accountability within the NHS. In light of this the following can also be contacted for advice:

- **NHS Protect** Helpline on **0800 028 40 60** (if your concern is about financial malpractice)
- **Department of Health** (Customer Service Centre), Department of Health, Richmond House, 79 Whitehall, London SW1A 2NS E-mail: dhmail@dh.gsi.gov.uk Tel: 020 7210 4850
- **NHS Whistleblowing Helpline**: 08000 724 725 E-mail: enquiries@wbhelpline.org.uk
- **Public Concern at Work**: 020 7404 6609, www.pcaw.co.uk
- **NHS Improvement** (for concerns about how the trust is being run; other providers with an NHS provider license; NHS procurement, choice and competition; the national tariff) Email: nhsi.enquiries@nhs.net Tel: 020 3747 0000
- **Health Education England** (for education and training concerns) E-mail: info@nwl.hee.nhs.uk ; Tel: 0207 127 6287
• **Confidential Anti-Terrorist Hotline:** If your concern is around a suspect that may be of a violent extremist or terrorist nature, you should contact the confidential Anti-Terrorist Hotline: 0800 789 321. If you come across terrorist or violent extremist content online that you think might be illegal, you should report the content to Counter Terrorism Intranet Referral Unit (CTIRU) - [https://www.gov.uk/report-terrorism](https://www.gov.uk/report-terrorism).
Appendix A: Flowchart of Raising Concerns procedure

Do you have a concern about possible corruption, malpractice or danger?

- I feel able to raise the concern myself
  - Contact Staff side Speaking up Guardian to raise this on your behalf
  - Independent advice available from:
    - Workforce
    - Public Concern at Work helpline: 08000 724 725 or emailing: protectedwork@workforce.nhs.uk
  - Additional Support available to staff from:
    - Health and Work Centre: 0207 930 5510
    - CareFirst: 0800 174 319

Option A: speak to person directly
  - Only if you feel safe and the working relationship enables you to do so and when the malpractice is likely to happen rather than have happened already

Option B: speak to manager or more senior manager or professional lead
  - Do this in the first instance where you feel you cannot speak to the person directly

Option C: speak to Designated Directors
  - If the concern is relating to patient/client care or delivery of service, contact the Director of Planning. For all other, contact Director of Workforce and OD

Option D: Contact Chief Executive
  - Am able to speak to the Chief Executive

Option E: Contact designated Non Executive Director (Trust Speaking up Champion)
  - Am able to speak to the designated director

Option F: Contact Chair
  - Am able to speak to the person myself

Hold conversation - constructive and open

Conversation complete matter closed?

- No
  - Go to Route B or C or D or E or F as appropriate

- Yes
  - No need for action
    - Further action required e.g. formal conversation, disciplinary investigation

Following enquiry

- No
  - Go to next route

- Yes
  - More appropriate for another policy or procedure or team e.g. Grievance, fraud, bullying and harassment, serious incident reporting, health and safety etc.

Manager to make enquiries and look into matter

Contact Director giving as much detail as possible

Nominate contact to make enquiries and look into matter

Free Route C already been utilised?

- Yes
  - Go to next route

- No
  - Confirm action matter closed?
## Appendix B- Equality analysis

<table>
<thead>
<tr>
<th>Equality Group</th>
<th>Identify negative impacts</th>
<th>What evidence, engagement or audit has been used?</th>
<th>How will you address the issues identified?</th>
<th>Identifies who will lead the work for the changes required and when?</th>
<th>Please list positive impacts and existing support structures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>None identified</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>We anticipate a positive impact on all staff irrespective of background.</td>
</tr>
<tr>
<td>Disability</td>
<td>None identified</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>This Speaking up Policy and Procedure sets out procedures by which staff can confidentially report concerns about illegal, unethical or other unacceptable conduct. The policy is designed to ensure whistleblowers are not victimised as a result of raising a concern.</td>
</tr>
<tr>
<td>Gender Reassignment</td>
<td>None identified</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>If a member of staff feels stress or anxiety as a result of raising an incidence or practice, the Trust has a dedicated Health and Work Centre offering support: Contact: 0207 830 2514. Furthermore, a 24 hour free and confidential service is provided by CareFirst. They can be reached via telephone and online by calling 0800 174319.</td>
</tr>
<tr>
<td>Marriage and Civil Partnership</td>
<td>None identified</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Pregnancy and maternity</td>
<td>None identified</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Race</td>
<td>None identified</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Religion or Belief</td>
<td>None identified</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Sex</td>
<td>None identified</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Equality Group</td>
<td>Identify negative impacts</td>
<td>What evidence, engagement or audit has been used?</td>
<td>How will you address the issues identified?</td>
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</tr>
<tr>
<td>------------------------</td>
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<td>-----------------------------------------------</td>
<td>------------------------------------------</td>
<td>-----------------------------------------------------------------</td>
<td>--------------------------------------------------</td>
</tr>
<tr>
<td>Sexual Orientation</td>
<td>None identified</td>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Carers</td>
<td>None identified</td>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>
