



London Ambulance Service **NHS**  
NHS Trust

## **Freedom to speak up: raising concerns (whistleblowing) policy**

## DOCUMENT PROFILE and CONTROL.

**Purpose of the document:** To outline the process London Ambulance Service staff and managers should follow in reporting or managing serious concerns

**Sponsor Department:** Corporate Governance

**Author/Reviewer:** HR Manager – Projects. To be reviewed by September 2018

**Document Status:** Final

<b>Amendment History</b>			
Date	*Version	Author/Contributor	Amendment Details
26/09/17	4.5	IG Manager	Document Profile and Control update
07/08/17	4.4	HR Manager	Updated contact details (S9.3)
03/02/17	4.3	HR Manager	Updated contact details
19/09/16	4.2	IG Manager	Document Profile and Control update and formatting changes
15/09/16	4.1	Director of Corporate Governance	Minor amendments as agreed for PMAG approval
13/09/16	3.6	IG Manager	Document Profile and Control update and formatting changes
13/09/16	3.5	HR Manager - Projects	Additions to comply with local policy guidance
16/08/16	3.4	HR Manager - Projects	Amendments following consultation with key stakeholders
07/06/16	3.3	HR Manager - Projects	Integrate national policy with local Whistleblowing Policy
April 2016	3.2	NHS Improvement & NHS England	Standard integrated policy
25/11/13	3.1	IG Manager	Document Profile and Control update and formatting changes
06/11/13	2.2	IG Manager	Document Profile and Control update and formatting changes
September 2013	2.1	HR Manager, Projects	Updated in line with the Enterprise & Regulatory Reform Act 2013 and incorporating recommendations from the Francis report
May 2011	1.1	HR Manager, Staff Engagement	Policy updated in line with new guidance issued by Public Concern at Work (PCaW) and advice from Local Counter Fraud Specialist. Contact details amended.
July 2007	1.0	Assistant Director, Employee Support Services	Original policy implemented

**\*Version Control Note:** All documents in development are indicated by minor versions i.e. 0.1; 0.2 etc. The first version of a document to be approved for release is given major version 1.0. Upon review the first version of a revised document is given the designation 1.1, the second 1.2

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etc. until the revised version is approved, whereupon it becomes version 2.0. The system continues in numerical order each time a document is reviewed and approved.

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The Pulse (v4.5)	27/09/17	Digital Media Officer	Comms
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<b>Links to Related documents or references providing additional information</b>		
<b>Ref. No.</b>	<b>Title</b>	<b>Version</b>
HS011	Incident reporting procedure	
HR014	Grievance policy	
HR026	Dignity at Work Policy and Procedure	
TP005	Risk management policy	
TP006	Policy and procedure for serious incident	
TP034	Policy and procedure for being open and duty of candour	
TP035	Procedure for risk reporting assessment	
TP097	Policy for anti-fraud, bribery and corruption	

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Document Status: This is a controlled record as are the document(s) to which it relates. Whilst all or any part of it may be printed, the electronic version maintained in P&P-File remains the controlled master copy. Any printed copies are neither controlled nor substantive.

## **1. Introduction**

### **1.1 Speak up – we will listen**

- 1.1.1 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.
- 1.1.2 The London Ambulance Service NHS Trust (LAS) recognises the importance of encouraging a culture of openness in which staff and contractors can freely express their concerns without any fear of reprisal. This can contribute constructively to the development and continuous improvement of the services provided by the LAS. As a result if a member of staff raises such a concern, the matter will be dealt with positively, quickly and reasonably.
- 1.1.3 The LAS is committed to achieving in all its practices the highest possible standards of service to staff, patients, the public and its Commissioners.
- 1.1.4 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 executive directors 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 while this is happening.

## **2. Scope**

- 2.1 This policy is intended to provide guidance to all employees, agency workers, people who are in training with the Trust, non-executive directors, volunteers and self-employed workers who are working for and are supervised by the Trust should they wish to raise any concern at work.

## **3. Objectives**

- 3.1 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 (produced by NHS Improvement and NHS England) will be adopted by all NHS organisations in England as a minimum standard to help to normalise the raising of concerns for the benefit of all patients and staff.
- 3.2 Our local process has been integrated into this policy.

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## 4. Responsibilities

- 4.1 All **employees** have a responsibility to raise any 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, these should be raised within the provisions and procedures set down in this policy.

Health and Care Professional Council (**HCPC**) **registrants** and those registered with other regulatory bodies (e.g. the Nursing and Midwifery Council and the General Medical Council), and all registered professional groups such as Finance, must act in the best interests of service users and provide to their regulatory body and any other relevant regulators any important information about their conduct and competence and that of registered colleagues.

- 4.2 **Line managers** to whom disclosures are made, and the Trust's designated **Freedom to Speak Up Guardians**, are responsible for acting on the information they receive in accordance with the procedures set out below. They should also do everything reasonable to ensure that whistleblowers are protected from retaliation and victimisation.
- 4.3 **Trade Union representatives** are responsible for advising members who approach them with regards to whistleblowing.
- 4.4 The **Trust Board** are responsible for reviewing any whistleblowing incidents which are brought to their attention by the Director of Corporate Governance/Trust Secretary.

## 5. Concerns you can raise

- 5.1 You can raise a concern about any **risk, malpractice or wrongdoing** you think is harming the service we deliver. 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 to ensure staff are able to perform their role
- lack of, or poor, response to a reported patient safety incident
- suspicions of fraud (which can also be reported to our local counter-fraud team Charles Medley, KPMG, [charles.medley@kpmg.co.uk](mailto:charles.medley@kpmg.co.uk), Mobile: 07468 740949

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- a bullying culture (across a team or organisation rather than individual instances of bullying), including cyber bullying, or a failure to act on concerns raised;

For further examples, please see the [Health Education England video](#).

- 5.2 Remember that if you are a registered healthcare professional you may have a professional and contractual duty to report a concern. **If in doubt, please raise it.**
- 5.3 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.
- 5.4 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](#) or [dignity at work policy](#), depending on the issue being raised.

## 6. **Feel safe to raise your concern**

- 6.1 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.
- 6.2 Provided you are acting honestly, it does not matter if you are mistaken or if there is an innocent explanation for your concerns.
- 6.3 We want you to feel safe in raising your concern (in some instances legal protection may apply – see section 18).

## 7. **Confidentiality**

- 7.1 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 we are 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.

## 8. Who can raise concerns?

8.1 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, students, volunteers and governors.

## 9. Who should I raise my concern with?

9.1 In many circumstances the easiest way to get your concern resolved will be to raise it formally or informally with your line manager (or team leader, clinical tutor, or quality governance and assurance manager for example).<sup>1</sup> 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.

9.2 If raising it with your line manager (or lead clinician or tutor) 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 [speakup@lond-amb.nhs.uk](mailto:speakup@lond-amb.nhs.uk) this mailbox is monitored by Katy Crichton (Freedom to Speak up Guardian) [katy.crichton@lond-amb.nhs.uk](mailto:katy.crichton@lond-amb.nhs.uk) – this is an important role identified in the Freedom to Speak Up review to act 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 chief executive, or if necessary, outside the organisation
- our risk management team via Frances Field [frances.field@lond-amb.nhs.uk](mailto:frances.field@lond-amb.nhs.uk)

9.3 If you still remain concerned after this, you can contact:

- Our executive director with responsibility for freedom to speak up: raising concerns (whistleblowing) Philippa Harding, Director of Corporate Governance, [Philippa.Harding@lond-amb.nhs.uk](mailto:Philippa.Harding@lond-amb.nhs.uk)
- Our non-executive director with responsibility for whistleblowing Fergus Cass, [ferguscass@nhs.net](mailto:ferguscass@nhs.net)

9.4 All these people have been trained in receiving concerns and will give you information about where you can go for more support.

9.5 If for any reason you do not feel comfortable raising your concern internally, you can raise concerns with external bodies, listed in section [17.1](#).

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<sup>1</sup> The difference between raising your concern formally and informally is explained in our local process. In due course NHS England and NHS Improvement will consider how recording could be consistent nationally, with a view to a national reporting system.

<sup>2</sup> [Annex A](#) sets out the local process of how a concern might be escalated.

## **10. Advice and support**

- 10.1 Details on the local support available to you can be found [here](#). However, you can also contact the [Whistleblowing Helpline](#) for the NHS and social care, your professional body or trade union representative.

## **11. How should I raise my concern?**

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

## **12. What will we do?**

- 12.1 We are committed to the principles of the Freedom to Speak Up review and its vision for raising concerns, and will ensure our responses to reports are in line with them (see Appendix 2).
- 12.2 We are committed to listening to our staff, learning lessons and improving patient care and experience. 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.

## **13. Investigation**

- 13.1 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, from the outset). Wherever possible we will carry out an investigation (so, for example, where a concern is raised about a patient safety incident, we will usually undertake an 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, as well as learning lessons to prevent problems recurring.

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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](#).



13.2 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.

13.3 Any employment issues (that affect only you and not others) identified during the investigation will be considered separately.

#### **14. Communicating with you**

14.1 We will treat you with respect at all times and will thank you for raising your concerns. We will listen to your concerns and reflect back what we have heard 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).

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

15.1 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, are working effectively and can be sustained. Lessons will be shared with teams across the organisation, or more widely, as appropriate.

#### **16. Monitoring and Audit**

##### **16.1 Board oversight**

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.

##### **16.2 Review**

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

#### **17. Raising your concern with an outside body**

17.1 If you do not feel comfortable raising your concerns internally, you can raise your concern 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.

## 18. Making a 'protected disclosure'

18.1 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 in section [17.1](#), 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.

## 19. National Guardian Freedom to Speak Up

19.1 The new National Guardian (once fully operational) can independently review how staff have been treated having raised concerns where NHS trusts and foundation trusts may have failed to follow good practice, working with some of the bodies listed above to take action where needed.

<b>Implementation Plan</b>				
Intended Audience	This policy applies to all employees, agency workers, people who are in training with the Trust, non-executive directors, volunteers and self-employed workers who are working for and are supervised by the Trust			
Dissemination	The Pulse and the LAS Website			
Communications	HR bulletin, included in the RIB, brought to the attention of staff at recruitment/induction, reinforced by management			
Training	Awareness training at staff induction and management training, e.g. team leader training and management development days			
Monitoring: See section 16 above				
Aspect to be monitored	Frequency of monitoring AND tool used	Individual/team responsible for carrying out monitoring AND committee/group where results are reported	Committee/group responsible for monitoring outcomes/ recommendations	How learning will take place
Freedom to speak up log (Datix)	Ad-hoc, used to report all concerns and produce monthly report	Freedom to Speak Up Guardians	Trust Board	Dissemination of information to managers regarding failures in the application of the policy.
Concerns brought to the attention of the board	Quarterly	Workforce/Quality Governance Committee	Trust Board	Development of policy in line with legislative developments.  Promotion of policy where applicable

### 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, lead clinician or tutor, for whatever reason, please raise the matter with our local [Freedom to Speak Up Guardian](#):

Freedom to Speak up Guardian	Email	Phone
<b>Generic email address</b>	<a href="mailto:speakup@lond-amb.nhs.uk">speakup@lond-amb.nhs.uk</a>	
<b>Katy Crichton</b>	<a href="mailto:Katy.crichton@lond-amb.nhs.uk">Katy.crichton@lond-amb.nhs.uk</a>	07584 703645

These individuals have 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.

You may want to raise your concern with the Trusts' risk management team via Frances Field.

### Step three

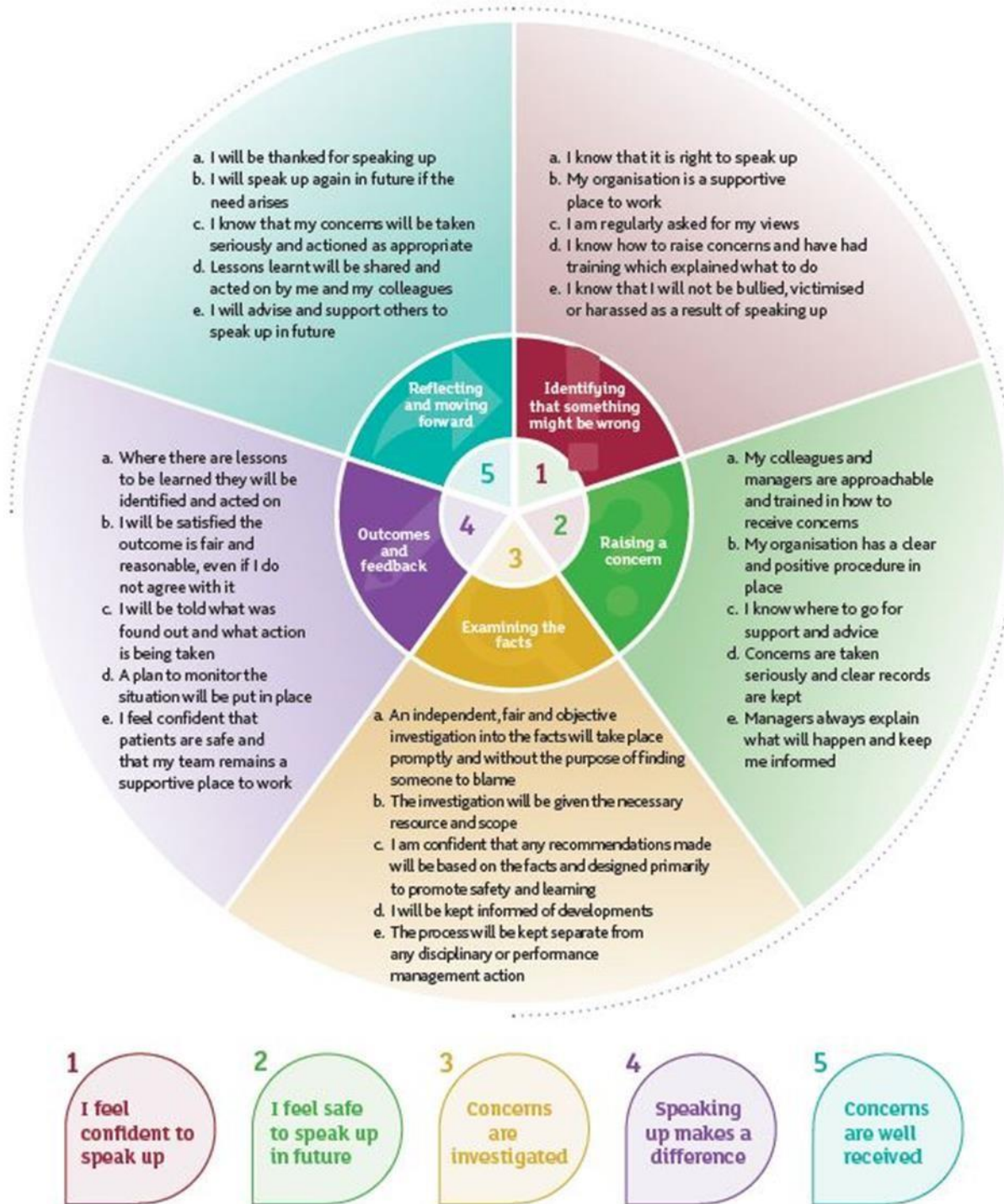
If these channels have been followed and you still have concerns, or if you feel that the matter is so serious that you cannot discuss it with any of the above, please contact our executive director with responsibility for freedom to speak up: raising concerns (whistleblowing) [Philippa Harding](#) or our non-executive director with responsibility for whistleblowing [Fergus Cass](#).

**Step four**

Seek advice and support locally, or contact the [Whistleblowing Helpline](#) for the NHS and social care, your professional body or trade union.

**Step five**

You can raise concerns formally with [external bodies](#).



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