



# Freedom to Speak Up: Raising Concerns (Whistleblowing) Policy

## Document Control

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<b>Approved by</b>	Trust Board
<b>Lead Director/Manager</b>	Chief Paramedic and Quality Officer
<b>Author</b>	Freedom to Speak Up Guardian
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## Change History

<b>Date</b>	<b>Change</b>	<b>Approved by/Comments</b>
30/03/2023	Contact details updated 4.12	Trust Risk Manager updated. Minor Terminology updates.

## 1. Introduction - Policy Objective

### 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. 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.
- 1.3. The LAS is committed to achieving in all its practices the highest possible standards of service to staff, patients, the public and its Commissioners.
- 1.4. 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 and Definitions

- 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. Accountabilities and Responsibilities

- 3.1. 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.
- 3.2. 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.
- 3.3. **Line managers** to whom disclosures are made, and the Trust's designated **Freedom to Speak Up Guardian, Freedom to Speak Up Coordinator and Freedom to Speak Up Ambassadors**, 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 staff who raise concerns are protected from retaliation and victimisation.

- 3.4. **Trade Union representatives** are responsible for advising members who approach them with regards to raising concerns.
- 3.5. The **Trust Board** is responsible for reviewing any concerns that are raised which are brought to their attention by the Freedom to Speak Up Guardian or Director of Corporate Governance.

## 4. Raising concerns

### Concerns you can raise

- 4.1. You can raise a concern about any **risk, malpractice or wrongdoing** you think is harming staff experience or 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)
  - Bullying and Harassment or issues with discrimination or culture

For further examples, please see this **Health Education England video**.

- 4.2. 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.**
- 4.3. 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.
- 4.4. This policy may not cover certain types of concern, but the Freedom to Speak Up Guardian will be able to signpost you if another policy or route of escalation is more appropriate – for example the dignity at work policy.

### Feel safe to raise your concern

- 4.5. 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.
- 4.6. Provided you are acting honestly, it does not matter if you are mistaken or if there is an innocent explanation for your concerns.
- 4.7. We want you to feel safe in raising your concern (in some instances legal protection may apply – see paragraph 4.28).

## Confidentiality

4.8. 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.

## Who can raise concerns?

4.9. 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

4.10. Workers, students, volunteers and governors.

## Who should I raise my concern with?

4.11. 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.

4.12. 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 [Londamb.speakup@nhs.net](mailto:Londamb.speakup@nhs.net) this mailbox is monitored by Carmen Peters (Freedom to Speak Up Guardian) [carmen.peters@nhs.net](mailto:carmen.peters@nhs.net) 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 Trust Risk Manager Stuart Fitch [stuart.fitch@nhs.net](mailto:stuart.fitch@nhs.net)

4.13. If you still remain concerned after this, you can contact:

- Our executive director with responsibility for Freedom To Speak Up, John Martin, [johnmartin@nhs.net](mailto:johnmartin@nhs.net)
- Our non-executive director with responsibility for Freedom To Speak Up, Amit Khutti [amit.khutti@nhs.net](mailto:amit.khutti@nhs.net)

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

4.15. If for any reason you do not feel comfortable raising your concern internally, you can raise concerns with external bodies, listed in paragraph 4.27.

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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 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.

## Advice and support

4.16. Details on the local support available to you can be found on our intranet. However, you can also contact the **Speak up online tool** for the NHS and social care, your professional body or trade union representative.

## How should I raise my concern?

4.17. You can raise your concerns with any of the people listed above in person, by phone or in writing (including email).

4.18. Whichever route you choose, please be ready to explain as fully as you can the information and circumstances that gave rise to your concern.

## What will we do?

4.19. We are committed to the principles of Freedom to Speak Up and its vision for raising concerns, and will ensure our responses to reports are in line with them (see Appendix 2).

4.20. 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.

## Investigation

4.21. 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 however we will likely refer the investigation (with your permission) to the appropriate manager or department who will follow an investigation process. We may make recommendations for an internal or external investigation if there is sufficient evidence of wrongdoing or failings.

4.22. We may decide that your concern would be better looked at under another process; for example, our process for dealing with dignity at work issues. If so, we will discuss that with you.

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

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<sup>3</sup> If your concern suggests a Patient Safety Incident has occurred, an investigation will be carried out in accordance with the Patient Safety Incident Response Framework.

## Communicating with you

4.24. 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).

## How will we learn from your concern?

4.25. 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.

## Raising your concern with an outside body

4.26. If you do not feel comfortable raising your concerns internally, you can raise your concern outside the organisation with:

- **Care Quality Commission** for quality and safety concerns
- **NHS England** 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
- **Health Education England** for education and training in the NHS
- **NHS Protect** for concerns about fraud and corruption.

## Making a 'protected disclosure'

4.27. 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 identified in paragraph 4.25, who you can make a protected disclosure to. To help you consider whether you might meet these criteria, please seek independent advice from the **Speak up online tool** for the NHS and social care, **Public Concern at Work** or a legal representative.

## National Guardian Freedom to Speak Up

4.28. The National Guardian 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.

### 5. Implementation Plan

- 5.1. The policy will be posted on the Trust internet and intranet site and all staff will be made aware of its existence via the Routine Information Bulletin (RIB).
- 5.2. All new staff joining the organisation will be made aware of this policy at induction.

### 6. Competence (Education and Training)

- 6.1. The Director of Quality and Freedom to Speak Up Guardian will ensure the provision of advice for managers with whom concerns are raised. Training and awareness of how to deal with concerns will form part of the remit of the Freedom to Speak Up Guardian.

### 7. Monitoring Compliance

Monitoring and compliance of FTSU is maintained by the FTSU Guardian reporting to The Director of Quality, and with reports to the Executive Leadership Team, the People and Culture Committee and the Trust Board of Directors.

### 8. Effectiveness and Reporting

- 8.1. 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 also include similar high level information in our annual report. The Board supports staff raising concerns and wants you to feel free to speak up.

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 Guardian	Trust Board	Dissemination of information to managers regarding failures in the application of the policy.
Concerns brought to the attention of the Board	Quarterly	Freedom to Speak Up Guardian, Chief Paramedic and Quality	Trust Board	Development of policy in line with legislative



		Officer, Director of  Quality  People and Culture Committee		developments.  Promotion of policy where applicable
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## 9. Policy Review

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

## 10. Equality Impact Assessment Statement:

10.1. This policy has been reviewed in line with the Equality Act 2010 which places a duty on the Trust to have due regard to the need to:

10.1.1. Eliminate discrimination, harassment and victimisation.

10.1.2. Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.

10.1.3. Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

10.2. The Act sets out nine protected characteristics that apply to the equality duty, which must be considered in the writing of all documents.

## 11. References

11.1. This policy has drawn on guidance from:

11.1.1. National Guardian's Office Freedom to Speak Up  
<https://www.nationalguardian.org.uk/>

11.1.2. Plain English Campaign Guidelines  
<http://www.plainenglish.co.uk/>

11.1.3. Royal Institute for the Blind Guidelines  
[http://www.rnib.org.uk/xpedio/groups/public/documents/code/InternetHome\\_hcsp](http://www.rnib.org.uk/xpedio/groups/public/documents/code/InternetHome_hcsp)

11.1.4. NHS Resolution risk management guidance  
<http://www.nhs.uk>

11.1.5. Equality Act 2010  
<https://www.gov.uk/guidance/equality-act-2010-guidance>

# Appendix 1 - Process for raising and escalating a concern



**London Ambulance Service**  
NHS Trust

## What happens when you raise a Freedom to Speak Up concern.

\* Confidentiality will have to be broken if a member of staff or patient are at immediate risk of danger.

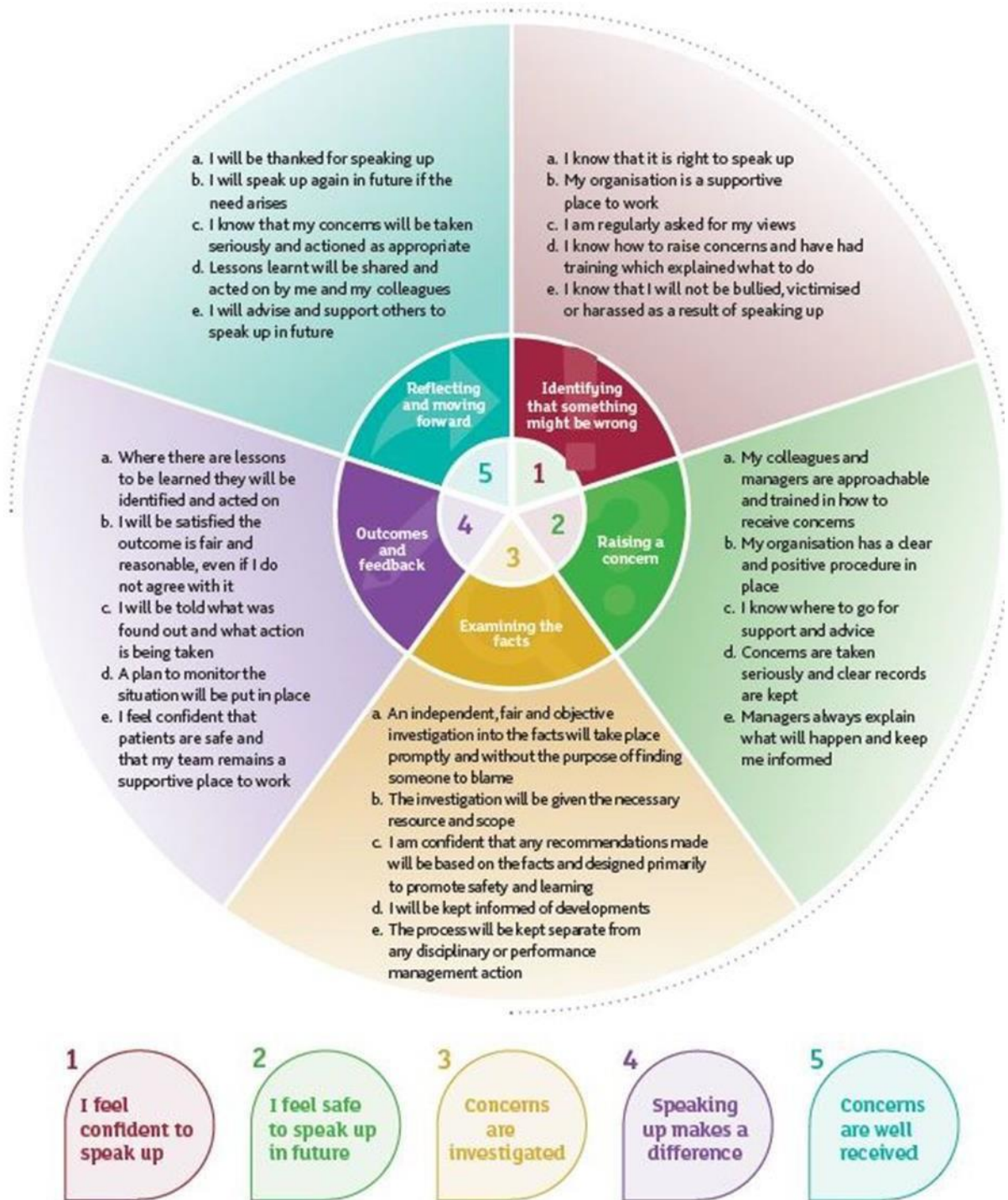


Who enacts the plan?  
The person who raised the concern or FTSU?

For more information please see the FTSU pulse pages and the FTSU policy.



## Appendix 2 - 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*.