

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

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The Policy has been through the approval steps and can now be published on the Trust Intranet	
Rachel Nudd on behalf of Workforce	Please sign and date
Paul Smith on behalf of Staff Side	Please sign and date

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**JAMES PAGET UNIVERSITY HOSPITALS NHS FOUNDATION TRUST**  
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**EXECUTIVE SUMMARY**

The James Paget University Hospitals NHS Foundation Trust is committed to achieving the highest possible standards of service. Therefore, 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 individuals who support patient care and the James Paget University Hospitals NHS Foundation Trust.

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.

This policy contributes to the need to develop a more open and supportive culture that encourages staff to raise any issues of patient care quality or safety.

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## **1.0 INTRODUCTION**

### **1.1 Background**

Raising concerns or whistleblowing is the term applied to a situation where an individual raises concerns about safety, malpractice or wrongdoing at work. In the context of the NHS, the term refers to NHS staff raising concerns about issues which may affect patients, the public, other staff or the organisation. The NHS Constitution was updated in March 2012 to include an expectation that NHS staff will raise concerns as early as possible and a pledge that NHS employers will support all staff in raising concerns, responding to and where necessary, investigating the concerns raised.

The James Paget University Hospitals NHS Foundation Trust is committed to achieving the highest possible standards of service. Therefore, 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 all individuals.

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.

This policy contributes to the need to develop a more open and supportive culture that encourages staff to raise any issues of patient care quality or safety. It has been written to take into account the Public Interest Disclosure Act 1998, which protects workers from suffering bad treatment or losing their job because they have made a disclosure.

### **1.2 Scope**

This policy is intended for all individuals in the Trust. This includes:

all employees, bank workers, agency workers, workers, volunteers, apprentices, contractors, students, trainees of the Trust. Specifically all individuals working at all levels of the Trust, including Executive Directors, senior managers, officers, directors, employees, governors, consultants, contractors, trainees, home-workers, workers, agency staff and volunteers (collectively referred to as "individuals" in this policy.)

### **1.3 Responsibilities**

#### **1.3.1 Board of Directors**

The Board will receive a monthly report for monitoring via the Workforce report to Board in terms of numbers of concerns raised and themes.

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### **1.3.2 Managers**

Managers are responsible for:

- Ensuring that all staff are familiar with and have access to this policy.
- Complying with the Trust's procedures and principles as outlined.
- 
- Ensuring concerns raised are taken seriously and responding to concerns in a timely fashion.
- Evaluating the basis of any claim brought to their attention and referring upwards to a more senior manager if appropriate.
- Respecting confidentiality when handling sensitive/confidential information, and maintaining anonymity where necessary.

### **1.3.3 Workforce**

Workforce are responsible for:

- Ensuring individuals are made aware of this policy and how they can access it.
- Advising managers and individuals in the application of the policy and procedure.
- Monitoring the application of the policy to ensure it is applied in a fair and consistent way to each concern raised.
- Keeping records, monitoring and auditing the number and nature of claims made, actions taken, and reporting this information to the Trust Board on an annual basis.

### **1.3.4 Individuals**

The person raising the concern is responsible for:

- Raising the concern as soon as possible in an objective and factual way, using this policy and accompanying procedure.
- Keeping records where possible of any incidents and potential witnesses.
- Cooperating with any investigation, if appropriate, including being available for interview (notice will be given), providing a statement and/or documentation.
- Maintaining confidentiality of patients and staff and any other individuals concerned.

## **1.4 Monitoring and Review**

This policy will be reviewed every three years. Compliance with this policy will be undertaken by the Director of Governance and Associate Director of Workforce and reported to the Board of Directors.

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### 1.5 Related Documents

This policy should be read in conjunction with the following Trust policies:

Grievance Policy  
Dignity at Work Policy  
Disciplinary Policy  
Equality and Diversity Policy  
Anti-Fraud and Corruption Policy  
Being Open/ Duty of Candour Policy  
Adverse Events Policy  
Safeguarding Policies  
Bullying & Harassment  
Conflicts of Interest and Hospitality Policy

### 1.6 Reader Panel

The following formed the Reader Panel that reviewed this document:

#### Post Title

Workforce Policies Partnership Forum
Staffside
Director of Governance and Workforce
Director of Finance
Consultant Physician/Deputy Responsible Officer
Julia Hunt – Director of Nursing, Quality and Patient Experience
Chief Executive Officer
Associate Director of Workforce
Audit Committee

### 1.7 Trust Values

This Policy conforms to the Trust's values of putting patients first, aiming to get it right, recognising that everybody counts and doing everything openly and honestly. The Policy incorporates these values throughout and an Equality Impact Assessment is completed to ensure this has occurred.

### 1.8 Glossary

The following terms and abbreviations have been used within this Policy

Term	Definition
JPUH	James Paget University Hospital NHS Foundation Trust
The Trust	James Paget University Hospital NHS Foundation Trust

### 1.9 Distribution Control

Printed copies of this document should be considered out of date. The most up to date version is available from the Trust Intranet.

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## **2.0 STATEMENT OF POLICY**

### **2.1 Policy Objectives**

The objectives of this Policy are:

- To ensure that individuals feel encouraged to speak up and raise any concerns as soon as possible
- To set out the processes that encourage and enable all individuals to raise genuine concerns so that such issues are addressed at an early stage and in the right way, without fear of penalties or reprisals.

### **2.2 Policy Definitions**

Whistleblowing occurs “when an individual raises a concern about dangerous or illegal activity that they are aware of through their work” (Public Concern at Work).

A “protected” disclosure is one where a worker must have a reasonable belief that their disclosure is in the public interest.

## **3.0 RAISING CONCERNS**

### **3.1 What concerns can I raise?**

You can raise a concern about **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
- 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 [*Keith Wilson, Local Security Management Specialist*])
- a bullying culture (across a team or organisation rather than individual instances of bullying).

Remember that if you are a healthcare professional you may have a professional duty to report a concern. **If in doubt, please raise it.**

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.

Please note 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

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### **3.2 Feel safe to raise your concern**

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.

Provided you are acting honestly, it does not matter if you are mistaken or if there is an innocent explanation for your concerns.

### **3.3 Confidentiality**

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.

### **3.4 Who can raise concerns?**

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.

### **3.5 Who should I raise my concern with?**

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 or tutor). 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.

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:

- our Freedom to Speak Up Guardians:
  - Leigh Beuttell ext. 2179
  - Julie Smith ext. 3824
  - Devender Khurana ext. 2699
  - Nabil El Fahimi bleep 2106
  - Steven Duffell ext. 3084

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

- our executive director with responsibility for whistleblowing [*Anna Hills, Director of Governance*]
- our non-executive director with responsibility for whistleblowing [*Peter Hargreaves, Non-Executive Director*].

All these people have been trained in receiving concerns and will give you information about where you can go for more support. You can also contact your professional body or trade union representative.

If for any reason you do not feel comfortable raising your concern 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.
- Whistleblowing Helpline for free advice for the NHS and Social Care on 08000 724 725

### **Making a 'protected disclosure'**

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.

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

The new National Guardian (once fully operational) can independently review how individuals 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.

#### **3.6 How should I raise my concern?**

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

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

#### **3.7 What will we do?**

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 B).

We are committed to listening to individuals, 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.

### **Investigation**

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). 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.

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.

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

### **Communicating with you**

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).

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

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**

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**

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

## **4.0 LOCAL PROCEDURE FOR DEALING WITH STAFF CONCERNS**

### **4.1 Process**

There are a number of different stages that an individual can follow when raising a concern in order for this to be investigated and any appropriate action taken.

#### **4.1.1 Informal stage Level 1**

It must always be the aim for worker's verbal concerns to be resolved through contact between the individual and his or her line manager or speak up guardian. The Line Manager will be required to complete appendix D. Workers may wish to approach their trade union or professional organisation who can raise specific concerns on behalf of their members. Where a concern can be acted upon, action must be taken promptly and the individual notified quickly of the action taken.

If a manager decides that no action is warranted, they must discuss this with their respective manager/director prior to the decision being notified to the individual who has raised the concern. Where action is not considered appropriate, then the individual must be given a prompt and thorough explanation of the reasons for this. They must also be advised that they can raise this issue under the formal procedure, detailed below.

Individuals who raise a concern should receive feedback in writing as quickly as possible taking into account the seriousness of the concern but in any event, within ten working days.

**Workers must, of course, if they witness or suspect there is immediate risk, report the concerns to the appropriate person or authority without delay (refer to Adverse Events Policy)**

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#### **4.1.2 Formal stage Level 2**

This stage should be adopted if an individual is dissatisfied with the outcome after following the informal stage – level 1 or for whatever reason feels unable to report matters to their line manager (e.g. if their line manager is at the centre of the concern).

In these circumstances, individuals must report concerns in writing, see appendix C, to either their Head of Department, Deputy Chief Operating Officer, Service Manager, Lead Nurse, Speak Up Guardian who will be required to complete appendix D.

The concerns will be acknowledged by letter, normally within 2 working days, investigated and a written response to the complainant's home address given normally within 15 working days.

The issue must however obviously be dealt with immediately if it has urgent patient care or other such serious implications. It may be that such concerns are reported verbally.

If it is anticipated the investigation will require longer than 15 working days, this will be notified to the individual who has raised the concern with an expected date of completion.

If the Head of Department, Deputy Chief Operating Officer, Service Manager or Lead Nurse decides action is not appropriate, a written explanation will be provided to the individual within the given timeframe.

#### **4.1.3 Formal stage Level 3**

If a concern cannot be resolved at Stage 1 or 2, then the individual is entitled to raise their concern directly with an Executive Director and/or the Chief Executive. This should ideally take the form of a written concern, see appendix C, which will normally be acknowledged by letter within **5 working days** and a written response to the complainant's home address provided within **20 working days**. Appendix D will need to be completed by the Executive Director and/or the Chief Executive. If the concern is raised verbally, then a record of the key details will be made and shared with the individual raising the concern. The written response must contain details of what actions are to be taken together with a timetable or if no action, and the reasons why.

The Trust will give as much feedback as it properly can, however it does have legal obligations of confidentiality to its patients and other staff, so it may not be able freely to provide full feedback, e.g., on the outcome of any disciplinary action.

If at any stage the individual considers the issue is not being addressed fully they may forward their concerns in writing directly to the Chief Executive or with the Trust Chairman.

Any anonymous concerns raised will be considered and may be investigated, but if the Trust does not know who has raised a specific concern, it will be more difficult to look into the matter, protect the individual and provide appropriate feedback. If an anonymous concern is raised and found to be malicious or untrue then disciplinary action may be taken against the complainant, if identified.

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It is important that individuals feel that they are able to raise such issues either with their line manager/Speak Up Guardian, relevant director or direct with the Chief Executive, or his/her designated deputy and to feel confident that their position will not be jeopardised or that harassment or bullying will not take place as a result of their actions. Disciplinary action will not be taken against the complainant as a direct result of raising a concern. The Trust regards the ability to raise issues of concern as very important, and is therefore anxious that staff feel able to do so.

The Trust will not tolerate any detriment, reprisals, bullying, harassment or victimisation against any worker or other individual because he or she has raised a concern under this policy, and will treat any such instance as a disciplinary matter which may lead to dismissal of the perpetrators or sanctions against those acting as agents of the Trust.

Individuals making **deliberately false or malicious** allegations will be subject to disciplinary action in accordance with the Trust's Disciplinary Procedure

#### **4.2 Monitoring and recording**

A central log of all formal concerns raised will be maintained by the executive office for the Director of Governance or the Associate Director of Workforce. This will allow for the effective acknowledgement, monitoring and progress of reported disclosures. This log will be available to the Trust's Audit Committee.

The Divisional Office (DO) to maintain the log up to and including Stage 2. The DO to send a quarterly summary (July, October, January and April) to Executive office to be available to the Trust's Audit Committee.

The Executive office to maintain the log for Stage 3 to be available to the Trust's Audit Committee.

- Speak up Guardian to feed into central log

#### **4.3 Referral to a Regulatory Body**

Individuals who have raised their concern internally but who feel it has not been addressed properly, or feel unable to raise concerns at any level in the organisation may consider the need to raise their concern outside the Trust.

In order for the concern to be investigated and for individual protection under current legislation, this must be with a recognised healthcare organisation that has the authority to investigate the issue. This could be the regulator of health and social care services (for example the Care Quality Commission) or a regulator of health professionals (for example, the General Medical Council or Nursing and Midwifery Council).

Before reporting concerns to a regulatory organisation, it is recommended that advice is sought. The Trust Chief Executive/Chairman should also be informed of your actions.

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#### **4.4 Fraud, Corruption and Bribery**

All allegations of suspected fraud, bribery and corruption must be reported to either the Director of Finance, the Trust's nominated Local Counter Fraud Specialist (LCFS), or by calling the NHS Fraud and Corruption Reporting Line. All reports will be assessed and, where necessary, investigated in accordance with the Trust's Counter Fraud Policy.

In addition, where allegations involve an Executive Director or Non-Executive Director (NED) the information can also be reported to the Audit Committee Chair.

The contact details for reporting fraud, corruption and bribery are as follows:

- Director of Finance
- Local Counter Fraud Specialist (LCFS) on: 07802 658845 see Trust Intranet for further information - <http://powwow/intranet/>  
NHS Fraud and Corruption Reporting Line on: 0800 028 40 60.

#### **5.0 WHEN A CONCERN IS RAISED**

Where an individual formally invokes the policy and raises a concern with their manager or at a higher level, the manager who is dealing with the issue should establish by investigation:

- If the individual is anxious about reprisals;
- When the concern first arose and, where relevant, what is prompting the decision to speak up now;
- Whether the information is first hand or hearsay;
- Where the approach is to a designated officer, whether the individual has raised the concern with their line manager and (a), if not, why and (b) if so, with what effect;
- Whether confidentiality is sought;
- If there is anything else relevant the individual wants to mention

These issues are indicative of the approach that may be taken and should not be seen as a definitive list.

#### **6.0 REFERENCE TO MEMBERS OF PARLIMENT AND THE MEDIA**

An individual who has exhausted the informal and formal procedures above, may wish to consult their Member of Parliament in confidence. He or she may also contemplate the possibility of disclosing their concern to the media.

They should inform, ideally before disclosure, either the Communications Manager or the Chief Executive so that the Trust is able to deal with subsequent press enquiries.

Disciplinary action will not be taken as a direct result of raising a concern, provided the concern is raised in accordance with the Public Interest Disclosure Act 1998 and the person raising the concern reasonably believes that to raise the concern is in the public interest.

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It is however, the underlying aim of this procedure that staff will find it unnecessary to resort to such actions, as concerns will be addressed locally within the Trust.

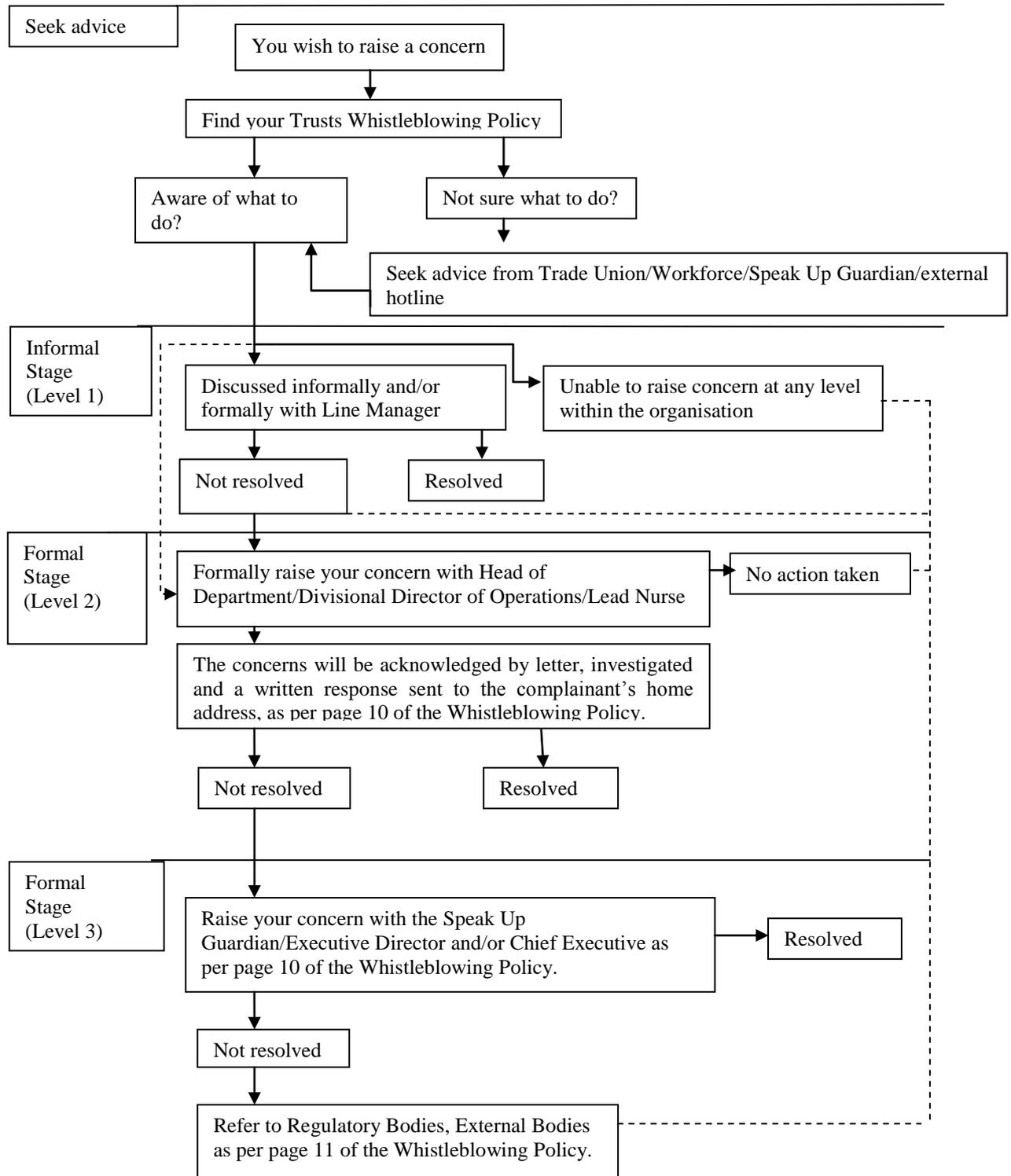
**7.0 THE PUBLIC INTEREST DISCLOSURE ACT 1998**

In addition to the local procedures, the Public Interest Disclosure Act 1998 provides specific rights for those who disclose information to a third party about an alleged wrongdoing. The wrongdoing must fall into one of a specific number of categories and be raised following a laid down procedure.

If an individual has a concern, and wishes to consider seeking protection under the Public Interest Disclosure Act when raising it, they should seek advice from their trade union or an independent advisor to ensure that they are protected.

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**APPENDIX A – FLOWCHART FOR PROCESS**

This flowchart below sets out the stages in raising a concern and shows the management levels for internal disclosure.



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**APPENDIX B – CONTACT DETAILS**

If you are not sure whether or how to raise a concern at any stage, you should seek advice from either Trade Union, the Whistleblowing helpline or your professional body/regulator.

Contact details for these organisations are provided below:-

British Medical Association (BMA)	020 7387 4499	<a href="http://www.bma.org.uk">www.bma.org.uk</a>
General Dental Council (CDS)		<a href="http://www.gdc-uk.org/Pages.default.cfm">www.gdc-uk.org/Pages.default.cfm</a>
General Medical Council (GMC) – regulator for medical doctors throughout the UK in all healthcare sectors	0161 923 6602	<a href="http://www.gmc-uk.org">www.gmc-uk.org</a>
General Pharmaceutical Council (GPhC)		<a href="http://pharmacyregulation.org/">http://pharmacyregulation.org/</a>
Health and Care professions Council (HCPC) – regulator for the allied health professions	0845 3000 6184	<a href="http://www.hpc-uk.org/">www.hpc-uk.org/</a>
Health and Safety Executive		<a href="http://www.hse.gov.uk">www.hse.gov.uk</a>
Medical Defence Union	0800 716 646	<a href="http://www.themdu.com">www.themdu.com</a>
Medical and Dental Defence Union of Scotland	0845 270 2034	<a href="http://www.mddus.com">www.mddus.com</a>
Patients First		<a href="http://www.patientsfirst.org.uk">www.patientsfirst.org.uk</a>
Pensions Regulator		<a href="http://www.thepensionsregulator.gov.uk">www.thepensionsregulator.gov.uk</a>
Public Concern at Work	020 7404 6609	<a href="http://www.pcaw.co.uk">www.pcaw.co.uk</a>
Royal college of Nursing (RCN)	0345 772 6300	<a href="http://www.rcn.org.uk/raisingconcerns">www.rcn.org.uk/raisingconcerns</a>
Royal college of Midwives (RCM)	0300 303 0444	<a href="http://www.rcm.org.uk">www.rcm.org.uk</a>
The College of Social Work	020 8453 2929	<a href="http://www.tcsw.org.uk/home/">www.tcsw.org.uk/home/</a>
UNISON	0845 355 0845	<a href="http://www.unison.org.uk">www.unison.org.uk</a>
Unite	0207611 2500	<a href="http://www.unitetheunion.org">www.unitetheunion.org</a>
Whistleblowing Helpline	08000 724 725	<a href="http://www.wbhelpline.org.uk">www.wbhelpline.org.uk</a>
NMC		<a href="http://www.nmc.org.uk">www.nmc.org.uk</a>
NHS Counter Fraud Authority (NHS CFA)	0800 028 40 60	<a href="http://www.nhsbsa.nhs.uk">www.nhsbsa.nhs.uk</a>

Publications for further information:-

- Raising concerns at Work - Whistleblowing Guidance for Workers and Employers in Health and Social Care: [enquiries@wbhelpline.org.uk](mailto:enquiries@wbhelpline.org.uk)
- The Francis Report (Report of the Mid-Staffordshire NHS Foundation Trust public enquiry) <http://www.health.org.uk/areas-of-work/francis-inquiry/?gclid=CMYKpcmypsACFSoEwwodkg8Auw>

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**APPENDIX C - RAISING CONCERNS DISCLOSURE FORM**

**STRICTLY CONFIDENTIAL**

This form is to be completed by individuals who want to raise a concern under the Public Interest Disclosure Act 1998. Please send when complete to one of the Executive Directors, in an envelope marked Private and Confidential.

**SECTION 1 – DETAILS OF THE PERSON RAISING THE CONCERN**

If you wish to remain anonymous, please go straight to section 2. However please note that whilst such concerns will be given due consideration, as per section 2.2.4 of the Whistleblowing (Raising Concerns in the Public Interest) policy more action is likely and possible if your identity is known when you report something. It will be much more difficult for the Trust to look into the matter or to protect your position or to give you feedback.

Name .....  
Home Address ..... Work Address .....  
.....  
.....  
.....

Home contact number.....  
Work contact number .....

Which address do you wish any correspondence to be sent to?

Home address / Work address (please delete as appropriate)

Date disclosure form submitted .....

**SECTION 2 – DETAILS OF THE DISCLOSURE**

What is your concern about? (please tick)

- Patient/service user care                       Patient/service user safety
- Criminal offence/legal obligation     Professional/clinical practice or competence
- Conduct (including malpractice, unethical conduct)

Other (please state) .....

Who is involved? Please list witnesses and anyone carrying out the act causing your concern, and the date(s), time and place(s) the act occurred:

.....  
.....  
.....  
.....

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Please describe what happened/what you think will happen. Please provide as much detail as you can. (Use additional sheets of paper if required)

.....  
.....  
.....  
.....

**SECTION 3 – PERSONAL INVOLVEMENT/PERSONAL INTEREST**

Please declare any personal interest you may have in this matter (i.e does the outcome of this matter have the potential to affect you personally in any way?)

.....  
.....

Have you personally been involved in this matter previously? Yes  No

If yes, please outline your involvement:

.....

**SECTION 4 – EXPRESSED PREFERENCES**

Do you wish your identity to be kept confidential (bearing in mind that, depending on the nature of the investigation or disclosure, it may become necessary to disclose your identity)? Yes  No

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**APPENDIX D - Speak Up Guardian's – Formal Log of Raised Concerns**

**Case Ref:.....**

<b>Guardian's Name:</b>		
<b>Name of individual raising the concern (Optional):</b>		
<b>Job Title:</b>		
<b>Area of Work:</b>		
<b>Contact Details (phone no/E-mail)</b>		
<b>Date initial concerned raised:</b>		
<b>Category of issue raised:</b>	Malpractice <b>(M)</b> Illegal Acts <b>(IA)</b> Omissions <b>(O)</b> Unsafe Working <b>(UW)</b>	<i>(Please insert in box appropriate letters e.g. GC or BH etc.)</i>
	General Complaint <b>(GC)</b> Patient Safety <b>(PS)</b> Health, Safety & Wellbeing <b>(HSW)</b> Grievance <b>(G)</b> Bullying & Harassment <b>(BH)</b> Occupational Health/PAM Assist <b>(OH/PAM)</b> Environmental, Equipment or Supplies <b>(EES)</b>	
<b><i>A public interest concern could be:</i></b>	<ul style="list-style-type: none"> <li>• Someone's health and/or safety has been put in danger</li> <li>• Due to an action or inaction</li> <li>• Damage has been caused to the environment</li> <li>• A criminal offence has been committed</li> <li>• An employer fails to obey the law</li> <li>• A malpractice or wrongdoing has been covered up</li> </ul>	

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<p><b>Nature of issue raised:</b></p>		
<p><b>Did issue require escalation:</b></p>	<p><u>Yes</u></p>	<p><u>No</u></p>
		<p><u>What advice was given?</u></p>
<p><b>Date issue was escalated:</b></p>		
<p><b>If Yes to whom (Name &amp; Position Title):</b></p>		

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<b>Potential outcome of escalation:</b>	
<b>Any other comments that the Guardian feels need to be highlighted:</b>	
<b>Date completed:</b>	

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**APPENDIX E - RECORD OF CONCERNS**

Please use this form for all concerns that are raised. Completed forms with any attachments should be sent as quickly as possible to an Executive Director and a copy retained in the ward/department.

**Section 1 - Time, Date and Method of Communicating Concern**

--

**Section 2 - Details of Informant**

**NB: This section may be left blank if the Informant wishes absolute confidentiality**

<b>Name and address:</b>	
<b>Contact telephone number: Work:</b>	<b>Status:</b>
<b>Home:</b>	
<b>Informant's views on confidentiality:</b>	

**Section 3 - Details of Concern**

<b>Directorate/Department</b>
<b>Nature of concern:</b> Fraud / Harassment / Clinical Issues / Environmental / Bribery / Other (specify)
<b>Brief details of concern:</b>
<b>Action Informant would like to see taken:</b>
<b>Outline of action promised:</b>

**Section 4 - Action taken**

<b>Outline of action taken:</b> (please date and time events and continue overleaf if necessary)
<b>Feedback to Informant:</b>
<b>Summary:</b>
<b>Date:</b>

**Signed:**

**Date:**

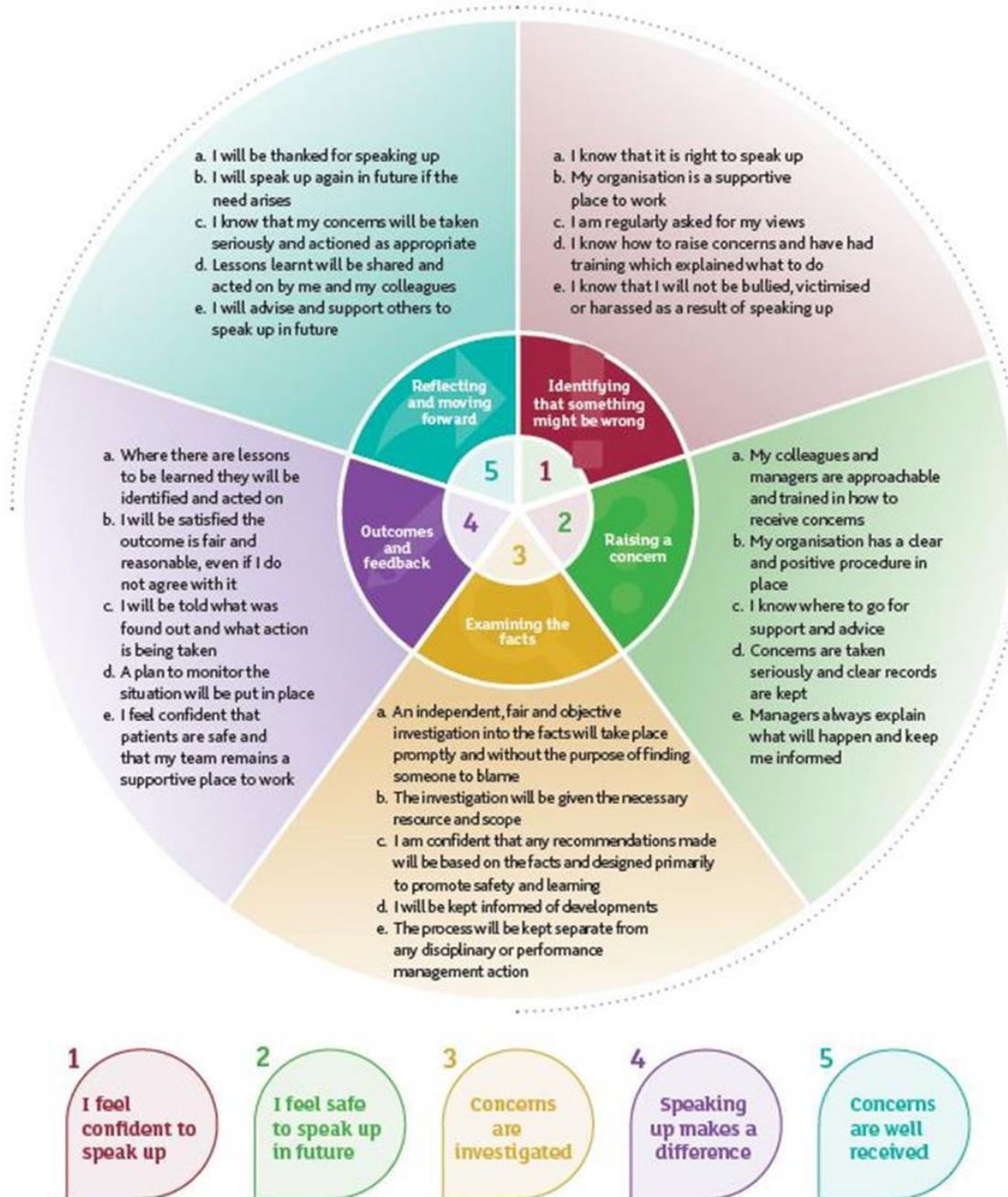
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**APPENDIX F – A VISION FOR RAISING CONCERNS IN THE NHS**



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

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**APPENDIX G – EQUALITY IMPACT ASSESSMENT**

**Policy or function being assessed:** Freedom to Speak Up: Raising Concerns (Whistleblowing) Policy **Department/Service:** Workforce  
**Assessment completed by:** Rachel Nudd, Head of Workforce Operations **Date of assessment:** June 2017

1.	Describe the aim, objective and purpose of this policy or function.	To define the requirements with regard to whistleblowing (Raising Concerns)		
2i.	Who is intended to benefit from the policy or function?	<b>Staff x</b>	<b>Patients x</b>	<b>Public x</b>
			<b>Organisation x</b>	
2ii	How are they likely to benefit?	Encourage staff to raise concerns to support achievement of highest quality of patient care		
2iii	What outcomes are wanted from this policy or function?	To eliminate poor practice		
<b>For Questions 3-11 below, please specify whether the policy/function does or could have an impact in relation to each of the nine equality strand headings:</b>				
3.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their <b>race/ethnicity</b> ?		<b>N</b>	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
4.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their <b>gender</b> ?		<b>N</b>	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
5.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their <b>disability</b> ? Consider Physical, Mental and Social disabilities (e.g. Learning Disability or Autism).		<b>N</b>	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
6.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their <b>sexual orientation</b> ?		<b>N</b>	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
7.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their <b>pregnancy or maternity</b> ?		<b>N</b>	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data

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8.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their <b>religion/belief</b> ?		<b>N</b>	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
9.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their <b>transgender</b> ?		<b>N</b>	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
10.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their <b>age</b> ?		<b>N</b>	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
11.	Are there concerns that the policy/function does or could have a detrimental impact on people due to their <b>marriage or civil partnership</b> ?		<b>N</b>	If yes, what evidence do you have of this? E.g. Complaints/Feedback/Research/Data
12.	Could the impact identified in Q.3-11 above, amount to there being the potential for a disadvantage and/or detrimental impact in this policy/function?		<b>N</b>	<i>Where the detrimental impact is unlawful, the policy/function or the element of it that is unlawful must be changed or abandoned. If a detrimental impact is unavoidable, then it must be justified, as outlined in the question above.</i>
13.	Can this detrimental impact on one or more of the above groups be justified on the grounds of promoting equality of opportunity for another group? Or for any other reason? E.g. providing specific training to a particular group.		<b>N</b>	<i>Where the detrimental impact is unlawful, the policy/function or the element of it that is unlawful must be changed or abandoned. If a detrimental impact is unavoidable, then it must be justified, as outlined in the question above.</i>
<b>14.</b>	<b>Specific Issues Identified</b>			
	Please list the specific issues that have been identified as being discriminatory/promoting detrimental treatment			Page/paragraph/section of policy/function that the issue relates to
<b>17.</b>	<b>Policy/Function Implementation</b>			
	Upon consideration of the information gathered within the equality impact assessment, the Director/Head of Service agrees that the policy/function should be adopted by the Trust.			
	<b>Name of Director/Head of Service:</b> Dawn Cumby	<b>Title:</b> Associate Director of Workforce	<b>Date:</b> June 2017	
	<b>Name of Policy/function Author:</b> Rachel Nudd	<b>Title:</b> Head of Workforce Operations	<b>Date:</b> June 2017	

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<b>18.</b>	<b>Proposed Date for Policy/Function Review</b> September 2019
	Please detail the date for policy/function review (3 yearly): Publication on the quality pages of the Trust's website and as an appendix to the Policy
<b>19.</b>	<b>Explain how you plan to publish the result of the assessment?</b> <i>(Completed E.I.A's must be published on the Equality pages of the Trust's website).</i>
	Standard Trust process
<b>20.</b>	<b>The Trust Values</b>
	<p>In addition to the Equality and Diversity considerations detailed above, I can confirm that the four core Trust Values are embedded in all policies and procedures.</p> <p>They are that all staff intend to do their best by:</p> <p>Putting patients first, and they will:          Provide the best possible care in a safe clean and friendly environment,          Treat everybody with courtesy and respect,          Act appropriately with everyone.</p> <p>Aiming to get it right, and they will:          Commit to their own personal development,          Understand theirs and others roles and responsibilities,          Contribute to the development of services</p> <p>Recognising that everyone counts, and they will:          Value the contribution and skills of others,          Treat everyone fairly,          Support the development of colleagues.</p> <p>Doing everything openly and honestly, and they will:          Be clear about what they are trying to achieve,          Share information appropriately and effectively,          Admit to and learn from mistakes.</p> <p>I confirm that this policy/function does not conflict with these values. <input checked="" type="checkbox"/></p>