

Compliance Team – Health Records

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FOI REQUEST NUMBER 192-2015

Initial Request and Response:

I write to ask if Norfolk and Suffolk NHS Foundation Trust has applied NHS good guidance practice on monitoring whistleblowing governance, as laid out in the 2010 document "Speak Up for A Healthy NHS. How to implement and review whistleblowing arrangements in your organisation" [1].

This guidance suggests that NHS organisations should refresh their whistleblowing arrangements annually. To this end, it specifically advises that organisations should monitor and audit their whistleblowing arrangements based on the parameters below:

- 1) "Collect data on the nature and number of concerns raised" – **the concerns raised via the PIDA policy are maintained by the Safeguarding Lead. The policy was updated in 2015.**

- 2) "Is there evidence of constructive and timely feedback?" – **There is evidence to support that feedback is constructive, there is some work to do to ensure this is delivered in a timely way. To this end the trust is employing a Freedom Guardian (Freedom to Speak Up Review 2015) who will oversee all issues related to raising concerns including providing feedback.**

- 3) "Have there been any difficulties with confidentiality?" – **Those who raise concerns are afforded confidentiality as far as the organisation is able to do so. Those staff who have attempted to use the PIDA to raise bullying concerns have not been afforded confidentiality due to 'natural justice' issues and employment rights. Staff are encouraged to raise such concerns in line with the Trust's Harassment and Bullying at Work (Dignity at Work) Policy with ultimate recourse via the trust's Grievance Policy.**

- 4) "Have any events come to the board's attention that might indicate that a staff member has not been fairly treated as a result of raising a concern?" - **Both individuals and a group has reported concerns to the Board or to individual Board members. The issues could have been dealt with at a local level to the satisfaction of the person raising them. The fact that they came to the attention of Board members suggests that this process doesn't always work effectively. However, when they come to the attention of the Board, we look at the issue itself and how it came to board level – what could have been done to resolve earlier.**

5) "Could the issues have been picked up or resolved earlier? If so, why weren't they?" – **Some yes, but not all.**

6) "Information from exit interviews" - **There is no evidence of concerns raised regarding 'whistle blowing' from exit interviews.**

7) "Information from...PIDA or other legal claims" – **as 6.**

8) Survey staff experience, using these questions: - **The staff survey addresses these questions annually.**

"Suggested survey questions for staff

- Have you been troubled about some malpractice in the past three years? If so, did you raise the concern, and with what result?
- How aware are you of the whistleblowing arrangements?
- How likely are you to raise a whistleblowing concern with your manager and with senior managers?
- How confident are you that there will be no negative repercussions for raising the matter with your manager and those above?
- How confident are you that the matter will be addressed properly by your manager and those above?
- How likely is it that your colleagues would raise a whistleblowing concern with their manager or with senior managers?"

The following are from recent Staff Surveys:

**% of staff agreeing they would feel secure raising concerns about workforce practice:
2014 62% (Average 69%)
No equivalent question 2013**

**Fairness and effectiveness of incident reporting procedures:
2013 Rating of 3.35 (scale of 0-5 with 5 being best) (Mental health average 3.52)
2014 Rating of 3.33 (Mental health average 3.52)**

**% of staff reporting errors, near misses or incidents witnessed in the last month:
2014 88% (Mental Health average 92%)
2013 90% (Mental Health average 92%).**

I would be grateful to know if your organisation has collected this data, either fully or in part. If it has collected part of this data, please could you indicate which of the above parameters have been monitored.

If your organisation has monitored whether staff have "not been fairly treated as a result of raising a concern?", please could you advise what data parameters are used, and specifically whether disciplinary action, suspensions and dismissals of staff, subsequent to their raising of concerns, are monitored.- **There have been no disciplinary actions subsequent to concerns being raised**

under the PIDA policy.

If your organisation has collected the above recommended data, whether in full or partially, and or if it has collected other monitoring data on whistleblowing governance, please could you share all your data for years 2013 and 2014.

Finally, please note that the legal definition of whistleblowing is the raising of qualifying disclosures under PIDA, whether internally within an organisation or via external reporting routes. This applies whether or not staff explicitly raises a concern under an organisation's whistleblowing policy. If your organisation applies a different definition of whistleblowing when collecting the above data, please could you advise what definition is used.

The Trust provides a complaints procedure to deal with complaints about the Trust's handling of requests for information. If you feel you need to make a complaint, in the first instance, you should contact a Non-Executive Director via the Chair of the Trust. If you feel you have exhausted our internal complaints procedure, you also have the right and may feel you wish to write to the Information Commissioner who can be contacted on telephone number 01625 545740 or at www.ico.gov.uk.

Additional Request and Response:

(1). Please could NSFT provide the data collected in 2013 and 2014 on the number and nature of concerns raised.

Concern meeting PIDA criteria	2013	2014
Impact of organisational change on patient safety; CAMHS, Eating Disorder Team	4	0
Health and Safety of staff and patients; inpatient area	0	2
Lack of training in additional observations; inpatient area	1	0
Fraud (passed to Counter fraud)	1	0
Low staffing; inpatient area	1	0
Failure to carry out assessments within the timeframe; community	1	0
Lack of inpatient beds	1	2
Bullying and Harassment by senior staff	0	1
Restraint; inpatient area	0	1
Lack of Tier 4 CAMHS beds (national)	0	1
Unallocated cases; community	0	1
Total	9	8

You have provided national NHS staff survey results but my request was for results of local staff surveys. **N/A – the Trust have not undertaken a local staff survey to cover the questions specifically outlined below.**

(2) Please could NSFT advise whether it has conducted local staff surveys as recommended by the government, using these recommended questions: **N/A**

- Have you been troubled about some malpractice in the past three years? If so, did you raise the concern, and with what result?

- How aware are you of the whistleblowing arrangements?
- How likely are you to raise a whistleblowing concern with your manager and with senior managers?
- How confident are you that there will be no negative repercussions for raising the matter with your manager and those above?
- How confident are you that the matter will be addressed properly by your manager and those above?
- How likely is it that your colleagues would raise a whistleblowing concern with their manager or with senior managers?"

If NSFT has conducted local staff surveys, could it please provide local survey data collected in years 2013 and 2014. – [N/A](#)

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