

<b>Meeting:</b>	<b>Argyll &amp; Bute Integrated Joint Board</b>
<b>Meeting date:</b>	<b>15<sup>th</sup> September 2021</b>
<b>Title:</b>	<b>Quarterly Whistleblowing Standards Reporting</b>
<b>Responsible Executive/Non-Executive:</b>	<b>Fiona Hogg, Director of People &amp; Culture</b>
<b>Report Author:</b>	<b>Fiona Hogg, Director of People &amp; Culture</b>

## 1 Purpose

**This is presented to the Committee for:**

- Discussion

**This report relates to a:**

- Legal requirement

**This aligns to the following NHS Scotland quality ambition(s):**

- Safe
- Effective
- Person Centred

## 2 Report summary

### 2.1 Situation

Attached is the first quarterly Whistleblowing Standards report for NHS Highland, covering the period 1 April 2021 – 30 June 2021 for review and feedback from the committee.

### 2.2 Background

All NHS Scotland organisations are required to follow the National Whistleblowing Principles and Standards with effect from 1 April 2021. Any organisation providing an NHS service should have procedures in place that enable their staff, students, volunteers and others delivering health services, to access the National Whistleblowing Standards.

As part of these requirements, a report is required to be presented to the Board on a quarterly basis, as per the extract below from the INWO website.

### ***“Monitoring***

*The number of concerns raised by staff will be reported to a public meeting of the board on a quarterly basis. It is the board’s responsibility to ensure this reporting is on time and accurate. The analysis should highlight issues that may cut across services and those that can inform wider decision-making. Board members should show interest in what this information is saying about issues in service delivery as well as organisational culture. This may mean on occasions that board members challenge the information being presented or seek additional supporting evidence of outcomes and improvements. They should also explore the reasons behind lower than expected numbers of concerns being raised, based on trend analysis and benchmarking data.”*

The Argyll & Bute Integrated Joint Board also have a responsibility as set out below

*“JBs and other monitoring arrangements must ensure that all HSCP staff, across both the local authority and the NHS, as well as any students, trainees, agency staff or volunteers, are able to raise a concern through this procedure. It is, therefore, more important than ever that senior managers in HSCPs and the integration joint board (IJB) itself promote a culture that encourages staff to raise issues or concerns at the earliest opportunity.”*

Therefore, NHS Highland will present their monitoring report to the IJB on a quarterly basis going forward, in addition to the NHS Highland Board.

## **2.3 Assessment**

The Argyll & Bute Integrated Joint Board plays a critical role in ensuring the Whistleblowing Standards are adhered to in respect of any service delivered on behalf of NHS Highland, including through ensuring quarterly reporting is presented and robust challenge and interrogation of this takes place.

The Guardian Service, as our Whistleblowing Standards confidential contacts carry out the recording and reporting of concerns and possible concerns. Along with the INWO Liaison officer for the Board, Fiona Hogg, the HR Lead, Gaye Boyd and the Whistleblowing Non-Executive Director, Bert Donald, the Guardian Service have compiled the attached report.

This report will also be presented to the NHS Highland Board on 28<sup>th</sup> September, 2021. It should be noted that as this is the first period of reporting, and there are only two actual Whistleblowing Concerns, both of which are still being investigated and have not concluded, it is not possible to include all of the detail that will be expected in future reports.

It should be noted that both of the open NHS Highland Whistleblowing cases relate to Argyll & Bute and further details on the cases will be provided in the next Quarterly monitoring report when these will have concluded. One is being managed by Fiona

Davies, Interim Chief Officer and one by Bob Summer, Head of Occupational Health and Safety.

### **2.3.1 Quality/ Patient Care**

The Whistleblowing Standards are designed to support timely and appropriate reporting of concerns in relation to Quality and Patient Care and ensure we take action to address and resolve these.

### **2.3.2 Workforce**

Our workforce has additional protection in place under these standards.

### **2.3.3 Financial**

The Whistleblowing Standards also offer another route for addressing allegations of a financial nature.

### **2.3.4 Risk Assessment/Management**

The risks of the implementation have been assessed and included. Consideration is being given to where this would sit on our operational and board level risks.

### **2.3.5 Equality and Diversity, including health inequalities**

No specific impacts

### **2.3.6 Other impacts**

None

### **2.3.7 Communication, involvement, engagement and consultation**

Duties to involve and engage external stakeholders are carried out where appropriate:

### **2.3.8 Route to the Meeting**

The report is presented for review and feedback.

## **2.4 Recommendation**

- **Discussion** – Examine the draft report and consider any additional information or revisions that may be appropriate

## **2.5 Appendices**

- Appendix 1 – Whistleblowing Report (Quarter 1 - 1st April to 30th June 2021)