

Trust Board Meeting: Wednesday 10 July 2013

TB2013.89

Title	Raising Concerns (Whistleblowing) Policy
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Status	For approval
History	The revised policy has had extensive consultation throughout the Trust and at the key Committees including Trust Management Executive, Joint Personnel Committee, Workforce Committee, Clinical Governance Committee, Joint Staff Consultation & Negotiating Committee, Joint Union Committee.

Board Lead(s)	Sue Donaldson, Director of Workforce			
Key purpose	Strategy	Assurance	Policy	Performance

Executive Summary

1.	The current Raising Concerns Policy was approved by Trust Board on 7 April 2011 with a review date of 7 April 2013.
2.	The policy has been under review since December 2012 and was therefore being actively considered at the time the Francis Report was published. The timing of the review has enabled the Trust to incorporate recommendations from the Francis Report in to the revised policy and to raise the profile of the consultation across the organisation.
3.	The policy has also been revised taking into account benchmarking, particularly across the Shelford Group, and changes in legislation.
4.	General consultation across the Trust took place during March-June 2013 and the policy has been to the following Committees for detailed discussion and feedback: <ul style="list-style-type: none"> 4.1. Workforce Committee – 26 March and 9 May 2013 4.2. Joint Staff Consultation & Negotiating Committee – 1 May 2013 4.3. Clinical Governance Committee – 19 June 2013 4.4. Trust Management Executive – 20 June 2013 4.5. Joint Personnel Committee – 26 June 2013
5.	This paper attempts to consolidate the feedback and build on the learning from the application of the previous policy.
Recommendation	
The Trust Board is asked to approve the revised policy.	

Raising Concerns (Whistleblowing) Policy

1. Purpose

- 1.1. This paper outlines a comprehensive review of the Raising Concerns Policy following extensive consultation throughout the Trust.
- 1.2. The recent Francis Report and the reported failings of Mid-Staffordshire NHS Foundation Trust have heightened the need to have an effective whistleblowing policy in place.
- 1.3. The Raising Concerns Policy is assigned to the Human Resources Directorate to administer. Accountability sits with the Director of Workforce.
- 1.4. Detailed communication will take place, once the policy is agreed, to raise awareness across the Trust.
- 1.5. Trust Board is asked to approve the revised policy set out at Appendix A.

2. Background

- 2.1. The Trust is committed to achieving the highest possible standards of service for the benefit of patients, staff, others working at Trust premises, service users and visitors. Where standards are not met, staff are expected to raise any concerns, make improvements and address issues.
- 2.2. Members of staff should feel able to raise issues with line managers directly or through mainstream Trust procedures. Where this is not the case, or where no action has happened and there is still a concern, the Raising Concerns Policy should provide another avenue for staff to raise issues.
- 2.3. Staff should feel empowered to raise a concern (which may be done anonymously); that their concern will be investigated and raised to an appropriate level within the Trust; that appropriate action will be taken as a result and there will be no personal repercussions for raising a concern.
- 2.4. The current Raising Concerns Policy was approved by Trust Board on 7 April 2011 with a review date of 7 April 2013.

3. Review

- 3.1. The Raising Concerns Policy has been under review since December 2012 and this has enabled the incorporation of recommendations from the Francis Report, which has also raised interest during consultation across the Trust.
- 3.2. Benchmarking has also taken place, including members of the Shelford Group, e.g. Cambridge, King's College, Guy's and Thomas', Newcastle and Birmingham. The revised documentation incorporates shared learning and best practice.
- 3.3. General consultation across the Trust on the revised policy was undertaken during March-June 2013 and the draft documentation has been to the following Committees for detailed discussion and feedback:
 - 3.3.1. Workforce Committee – 26 March and 9 May 2013

- 3.3.2. Joint Staff Consultation & Negotiating Committee – 1 May 2013
 - 3.3.3. Clinical Governance Committee – 19 June 2013
 - 3.3.4. Trust Management Executive – 20 June 2013
 - 3.3.5. Joint Personnel Committee – 26 June 2013
- 3.4. In addition to the above Committees, all Divisional Directors, General Managers and Senior Managers have been encouraged to discuss the revised draft policy at Divisional/Departmental meetings and provide feedback.
4. **Key changes proposed**
- 4.1. The main changes to the policy as a result of consultation are detailed below:
 - 4.1.1. The policy should be widely communicated to ensure all staff are aware of it and know when to use it.
 - 4.1.2. Publicity regarding the use of the policy should take place where appropriate to encourage confidence in how concerns are addressed.
 - 4.1.3. The scope should be expanded to be as inclusive as possible. The new document specifically includes students; work experience; and holders of honorary, observer and research contracts.
 - 4.1.4. The number of steps/stages in the procedure has been increased from two to three, with more visible involvement of the Trust Board members.
 - 4.1.5. A process map should be included to provide a simple overview of how the procedure operates. Please see Appendix B.
 - 4.1.6. Staff should be encouraged to raise concerns with the Trust however significant and regardless of whether they have chosen to report to an external body.
 - 4.1.7. Reporting and monitoring should be improved. Raising concerns issues which are raised through other routes, e.g. directly with a Director, should be channelled through the Raising Concerns Policy and process.
 - 4.1.8. A number of different types of issues are raised under the Raising Concerns Policy and not all fall under the Public Disclosures Act definition. In future it is proposed that concerns raised will be filtered and employees re-directed, as appropriate, to other procedures to address issues, e.g. Grievance, Bullying & Harassment. In reality staff will not always be aware of this re-direction as the pertinent issue is that concerns are dealt with appropriately.
 - 4.1.9. Where the person raising the concern is known to the Administrator, but wishes to remain anonymous to others within the Trust, this request should be respected in full.

- 4.1.10. The maximum timeframe for investigations should be increased from two weeks to one month to ensure comprehensive reviews are undertaken.
 - 4.1.11. During the investigation it may be appropriate to encourage additional feedback from more staff in the area. This could be achieved by using the Listening into Action methodology.
 - 4.1.12. Although all issues raised as a Raising Concern issue will be recorded; only those which fall under the definition of the Public Disclosures Act will be investigated using the Raising Concern procedure.
 - 4.1.13. Requirements of the Bribery Act and recent changes to the Public Interest Disclosure Act should be included.
- 4.2. The draft policy has been amended to accommodate the Trust policy template and the terminology has been made more explicit. Changes have also been made to various contact details, including the reference to external bodies to whom whistleblowing complaints can be made.
5. **Communication**
- 5.1. Preparation is underway in respect of communicating and promoting the new policy. The focus will be on Sections 18-38 as these are the most relevant to staff who want to raise a concern. Emphasis is being placed on posters; OUH News; team briefs and other medium rather than the traditional reliance on cascading a policy document.
6. **Conclusion**
- 6.1. The policy has been revised taking into account benchmarking, the Francis Report, changes in legislation; learning from benchmarking and detailed feedback received through consultation.
7. **Recommendation**
- 7.1. The Trust Board is asked to approve the revised policy.

Vicki Parsons
HR Manager

Sue Donaldson
Director of Workforce
July 2013

Appendix A

**DRAFT 1.8 - Raising Concerns (Whistleblowing) Policy**

Category:	Policy and Procedure
Summary:	This document aims to outline the policy and procedure for employees and anyone working at the Trust to raise concerns (whistleblowing) and the protection they are entitled to under the Public Interest Disclosure Act 1998.
Equality Analysis undertaken:	25 June 2013
Valid From:	
Date of Next Review:	10 July 2016
Approval Date/ Via:	Trust Board (Consultation through Workforce Committee, Joint Staff Consultation & Negotiating Committee, Joint Personnel Committee, Clinical Governance Committee, TME and Trust-wide)
Distribution:	Trust-wide
Related Documents:	Bullying and Harassment Procedure Complaints Policy and Procedure Conduct/Disciplinary Action Procedure Counter Fraud Policies and Procedures Grievance Procedure Incident Reporting and Investigation Policy
Author(s):	HR Manager (Workforce Strategy)
Further Information:	HR Department
This Document replaces:	Whistle Blowing (Raising Concerns) Procedure (NOC) and Raising Concerns at Work Policy – Trust Policy No. 5 (ORH)

Lead Director: Director of Workforce

Issue Date:

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Introduction

1. Oxford University Hospitals (OUH) NHS Trust is committed to achieving the highest possible standards of service for the benefit of patients, employees, others working at Trust premises, service users and visitors. Where standards are not as would be expected employees are expected to learn and make improvements to address issues.
2. The Trust is supportive of colleagues who have concerns over possible danger, risk, wrongdoing or malpractice and encourages all employees to act promptly and report their concern appropriately. When a concern has been raised in good faith, employees should ensure the Trust values e.g. respect, are adhered to. The Trust Values follow six themes: excellence, compassion, respect, learning, delivery and improvement.
3. These Values are underpinned by Trust Behaviours. Following the Trust Values and Behaviours will enable concerns to be raised and addressed appropriately to the benefit of patients and employees.
4. Where an employee or other worker at the Trust identifies an issue it is the duty of that employee to raise the matter appropriately so that it can be addressed and improvements can be made. There are a number of different procedures for raising concerns within the Trust. Where the issue can be described as a 'qualifying disclosure' the Raising Concerns (Whistleblowing) Policy should be applied.



Qualifying Disclosures

5. Qualifying disclosures are disclosures of information where the worker reasonably believes one or more of the following matters is either happening, has taken place, or is likely to happen in the future:
 - A danger to the health and safety of any individual, or group of individuals, whether employees, patient or anyone on Trust premises
 - A criminal offence
 - The breach of a legal obligation
 - A miscarriage of justice
 - Damage to the environment
 - Deliberate attempt to conceal any of the above.
6. The Raising Concerns (Whistleblowing) Policy should not be used to address all concerns an employee or worker at the Trust may have. Only qualifying disclosures should be addressed using this policy. Where the issue is not a qualifying disclosure, the person raising the concern will be advised of this and another Trust policy or procedure should be considered e.g. *Grievance Procedure, Addressing Bullying and Harassment Procedure, Incident Reporting and Investigation Policy etc.*

Scope

7. This policy applies to: - all employees; Retention of Employment employees; third party contractors; voluntary workers; students on placement or work experience; locums; holders of honorary, observer, research or fixed term contracts; agency employees; secondees and employees employed at retail outlets at OUH sites. There are no exceptions.

8. Should a patient or other member of the public wish to raise a concern, the Trust has in place a *Complaints Policy and Procedure*. This is overseen and administered by the Patient Advice and Liaison Service (PALS).

Aim

9. The Trust aims to ensure that concerns raised through the Raising Concerns (Whistleblowing) Policy,
 - 9.1. can be raised easily and anonymously as appropriate;
 - 9.2. can be directed to senior management to ensure a comprehensive investigation is undertaken and action followed;
 - 9.3. are investigated and addressed in a timely manner; and
 - 9.4. are monitored, with an annual report being reviewed by Trust Board.

Responsibilities

10. The **Trust Board** has overall responsibility for ensuring Raising Concerns (Whistleblowing) cases are dealt with appropriately within the Trust.
11. The **Director of Workforce** is responsible for the Raising Concerns (Whistleblowing) Policy and ensuring appropriate administration, recording, monitoring, analysis and reporting on Raising Concerns (Whistleblowing) cases.
12. All **Directors and Senior Managers** are required to,
 - 12.1. ensure a timely investigation takes place into the concern and issues raised;
 - 12.2. where appropriate, implement actions/recommendations resulting from the investigation;
 - 12.3. provide a report to the Administrator for the Raising Concerns (Whistleblowing) policy;
 - 12.4. ensure that, where the complainant is known (or suspected), there is no victimisation of the complainant or suspected complainant; and
 - 12.5. ensure any matter raised directly with them, which falls within the definition of a “qualifying disclosure” under the Public Interest Disclosure Act, is dealt with using this policy and that the Administrator is notified to enable the case to be appropriately recorded and reported.
13. All **members of the workforce**,
 - 13.1. have a duty to raise concerns which impact on the treatment and care of patients and health and well-being of employees;
 - 13.2. must ensure that colleagues who have raised a concern are not victimised for doing so; and
 - 13.3. are required to fully participate in any investigation and provide accurate and complete information to the Investigator.
14. The **Investigator** will,
 - 14.1. be assigned by the relevant senior manager responsible for the case;
 - 14.2. ensure the investigation is completed within the allocated timescales, providing the relevant senior manager with recommendations regarding the case;
 - 14.3. provide regular feedback to the senior manager and administrator (as appropriate)

- 14.4. maintain confidentiality and ensure the Trust Values and Behaviours are considered during the investigation; and
 - 14.5. liaise with the appropriate line manager for the area where the concern is located, to ensure any members of employees accused, or implicated, in any potential wrong doing are appropriately supported during the investigation.
15. The **Administrator** of the Raising Concerns (Whistleblowing) policy will,
- 15.1. liaise with the colleague who has raised the concern to ensure this is the most appropriate mechanism to address the matter (i.e. that it falls within the definition of a “qualifying disclosure” under the Public Interest Disclosure Act) or whether it should be referred to another procedure e.g. grievance, bullying & harassment;
 - 15.2. liaise with the Director of Workforce to ensure the concern is passed to an appropriate Director(s) and seek agreement that this falls within the definition of a “qualifying disclosure” under the Public Interest Disclosure Act;
 - 15.3. offer advice regarding the policy and process;
 - 15.4. maintain timely contact with the complainant, ideally fortnightly;
 - 15.5. keep records of the concern and any resulting actions for feedback to the complainant;
 - 15.6. use internal mechanisms to promote the policy within the Trust. This may include publicising examples of some of the more general concerns raised and resulting actions taken;
 - 15.7. keep all information confidential and respect any requests for anonymity during the process; and
 - 15.8. prepare an annual report for Trust Board.

Support for employees wishing to raise a concern

16. Support for employees who wish to raise a concern may be available from,
- Divisional HR Consultants and other members of the HR team
 - Trade Union representatives or Professional Organisations. Details of all recognised trade union representatives are available on the intranet,
 - Statutory Body e.g. Nursing and Midwifery Council (NMC), General Medical Council (GMC),
 - Employee Assistance Programme (currently available at the NOC),
 - Whistleblowing Helpline (NHS & Royal Mencap Society) on 08000 724 725,
 - Public Concern at Work on 0207 404 6609, www.pcaaw.co.uk, and
 - Advisory, Conciliation and Arbitration Service (ACAS) on 0845 747 4747
17. Further details regarding the support available can be found on the intranet under Human Resources/Raising Concerns (Whistleblowing).

How to Raise a Concern

18. You do not need to have firm evidence before raising a concern, however, we do ask that you explain as fully as you can the information or circumstances that gave rise to your concern, including,
- 18.1. dates, times and location of the matter of concern,

- 18.2. if the concern is about another person, (e.g. an employee) their name, job title, employee group, employer,
 - 18.3. details of other employees who were present and may have been witnesses, and
 - 18.4. how you think the matter might best be resolved.
19. There are a number of different people and ways of raising your concern which are outlined in the three steps below and other contacts who you may wish to contact with specific concerns.

Step One

20. 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 or lead clinician. This may be done verbally or in writing.
21. If you are a line manager who has received a concern which meets the criteria of a “qualifying disclosure”, guidance is available in Appendix 1.

Step Two

22. If you feel unable to raise your concern with your line manager or lead clinician, for whatever reason, please raise the matter by contacting either the,
 - 22.1. Internal confidential email address: raiseconcerns@ouh.nhs.uk
 - 22.2. Designated postal address: Raising Concerns Administrator, c/o Human Resources Department, Carillion Building, Block 229, Headley Way, Oxford, OX3 9DU. A form is available in Appendix 2.
 - 22.3. Confidential telephone number: 01865 (2)28720
23. Your concern can be raised anonymously using any of the above.
24. If your concern falls within the definition of a “qualifying disclosure” it will be forwarded to the appropriate Senior Manager, who will often be an Executive Director. They will nominate an appropriate Investigator to undertake the investigation on their behalf, into the concerns you have raised. Note, concerns raised regarding patient safety and/or quality of service, will be reported to the Clinical Governance Committee.
25. If your concern does not fall within the definition of a “qualifying disclosure” you will be advised of this and directed to a more appropriate Trust policy or procedure with which to address your concerns.

Step Three

26. If the above channels have been followed and you still have concerns, or you feel that the matter is so serious that you cannot discuss it with any of the above please contact, either the;
 - 26.1. Chief Executive,
 - 26.2. Medical Director, or
 - 26.3. Chief Nurse.Details can be found on the internet, <http://www.ouh.nhs.uk/about/trust-board/directors.aspx>.
27. Your concern can be raised anonymously at this step.
28. The Board Member you contact will nominate an appropriate Investigator to undertake the investigation on their behalf, into the concern you have raised.

29. Some details of your concern will be forwarded to the Raising Concerns Administrator in Human Resources, to ensure the concern can be appropriately logged and monitored.

Other Contacts for Raising a Concern

30. For suspected financial malpractice the Trust's Counter Fraud Department should be contacted on 01993 811634 or 07779 030920. The reporting of potential acts of bribery should be done through this route. For NHS advice in reporting a concern regarding potential bribery contact generalenquiries@nhsprotect.gsi.gov.uk.
31. You may wish to raise a health and safety matter directly with the Corporate Risk Team on 01865 222566.
32. If you wish to report a concern out of office hours you can contact the Duty Executive on-call, by calling the hospital's main switchboard on either,
 - 32.1. John Radcliffe 01865 741166
 - 32.2. Churchill 01865 741841
 - 32.3. Horton 01295 275500
 - 32.4. NOC 01865 741155
33. We recognise that there may be circumstances where you can properly report a concern to an outside body. We would rather you raised a matter with the appropriate regulator than not at all. This may include, the Care Quality Commission (0300 0616161), Department of Health (0207 210 4850), NHS Counter Fraud Line (0800 028 4060), Audit Commission (0844 798 3131). Further details for each organisation can be found on the internet.

The investigation and Feedback

34. If you have provided your name and contact details the Investigator may wish to ask you some questions regarding your concerns.
35. During the investigation other members of the team may be approached to provide additional information. In some circumstances it may be beneficial to use Listening into Action (LiA) methodology to encourage feedback and resolution of the concerns.
36. The investigation is expected to take no more than one month, though in exceptional circumstances may take longer depending on the nature of the concern.
37. Where the investigation identifies that this concern has already been considered or addressed e.g. through a quality impact assessment, this may be sufficient and you will be advised if this is the case.
38. You should be given feedback promptly following completion of the investigation detailing any actions taken as a result of your concern. If the investigation is taking longer than one month or if there is a prolonged delay in addressing the matter concerned, you should be kept informed of this.

Victimisation

39. Staff must be protected from victimisation for raising a concern, or being involved in any subsequent investigation. Any victimisation resulting from the above procedures will be dealt with quickly and may result in formal action under the Conduct/Disciplinary Action Procedure.

Protection

40. The Public Interest Disclosure Act (1998) provides protection to people who raise a "qualifying disclosure" (see definition above); the main protection being that those

raising a qualifying disclosure should not be victimised or suffer any detriment for raising their concerns. A worker who believes they had been victimised for whistleblowing (i.e. raising a qualifying disclosure) could ultimately seek remedy through the legal system.

41. For your disclosure to be protected by the law it should be made to the right person and in the right way. As well as the issue raised being a qualifying disclosure, the worker raising it must:
- reasonably believe that making the disclosure is in the public interest;
 - reasonably believe that the information is substantially true; and
 - reasonably believe they are making the disclosure to the right ‘prescribed person’

Recording Concerns Raised

42. The Trust aims to record all “qualifying disclosures” raised through the procedure.
43. Concerns raised at Step 2 and Step 3 of the procedure will be recorded on a database administered by Human Resources, to enable the monitoring of concerns raised at these levels.

Confidentiality

44. The confidentiality of any person raising a concern through this process will be maintained.

Impartiality

45. The concern raised will be assigned to a Senior Manager (often a Director) to ensure it is investigated by an appropriate person and ensure impartiality during the investigation.

Failure to Raise Concerns

46. All staff have a duty to raise concerns they have to protect patients and other employees from poor practices, however there are some professional positions, where failure to report a serious issue may have further consequences, both internally within the Trust and externally with the relevant professional or statutory body.
47. Most professional and statutory bodies will have a code of practice for their members. Further information can be obtained from the relevant professional or statutory body. Some, but not necessarily all these obligations, may also be explicit within the job/role description.

Inappropriate Use of the Procedure

48. If, during the process of investigating a concern under the Raising Concerns (Whistleblowing) Policy, it becomes apparent that the concern is unfounded and that it has been made with malicious/vexatious intent, then this itself will be treated as a disciplinary matter in accordance with the Trust’s *Conduct/Disciplinary Action Procedure*.

‘Gagging Clauses’

49. All employees may raise concerns about patient care and safety, or anything that could be in the wider public interest. Any confidentiality clauses (“gagging clauses”), whether within the Contract of Employment or any other legal document with the Trust, will not prevent the person from speaking out about concerns of patient safety or anything that could be in the wider public interest.

Training

50. There is no specific training in place regarding this procedure. Any queries should be directed to the Divisional HR Consultant or Raising Concerns Administrator.

Monitoring Compliance

51. Compliance with the policy will be monitored in the following ways. All reports will maintain confidentiality and will not report individual identifiable data.

Aspect of compliance or effectiveness being monitored	Monitoring method	Responsibility for monitoring (job title)	Frequency of monitoring	Group or Committee that will review the findings and monitor completion of any resulting action plan
Effectiveness of the policy and procedure	Raising Concerns database	Administrator	Annual	Trust Board, Clinical Governance Committee and Workforce Committee
Overall performance of the Trust in adhering to the timescales referred to in the procedure	Raising Concerns database	Administrator	Annual	Trust Board, Clinical Governance Committee and Workforce Committee
Perception of employees in being able to raise a concern	Staff Survey	Administrator	Annual	Trust Board, Clinical Governance Committee and Workforce Committee

52. In addition to the monitoring arrangements described above, the Trust may undertake additional monitoring of this procedure as a response to the identification of any gaps or as a result of the identification of risks, arising from the procedure, prompted by incident review, external reviews, or other sources of information and advice. This monitoring could include:

- Commissioned audits and reviews
- Detailed data analysis
- Other focused studies

Results of this monitoring will be reported to the nominated Committee.

53. Information regarding the Trust's current performance on raising concerns can be found on the OUH intranet webpage under Human Resources/Raising Concerns (Whistleblowing).

Failure to Comply

54. Where inappropriate behaviour or action, or failure of appropriate action, by an individual member of the workforce, has taken place in relation to Raising Concerns (Whistleblowing), this may be investigated and addressed using the *Conduct/Disciplinary Action policy*. External employers e.g. third party contractors will be required to address such matters appropriately using their own internal procedures.

Review

55. This policy will be reviewed in 3 years, as set out in the Policy for the Development and Implementation of Procedural Documents. The Trust Board has delegated authority to the Workforce Committee for the approval of any further supporting or associated documents.

References

56. The most significant piece of legislation connected with this policy is the Public Interest Disclosure Act (1998) and associated the British Standards Institution (BSI) Whistleblowing Arrangements Code of Practice. Information regarding the Act and Code of Practice is available on the internet.
57. The General Medical Council has produced guidance for doctors (http://www.gmc-uk.org/guidance/ethical_guidance/raising_concerns.asp) on raising and acting on concerns about patient safety (revised in 2012).

Equality Analysis

58. An equality analysis has been undertaken for this policy (see Appendix 3). There should be no negative equality impact in the application of this procedure.

Further Information

59. Further information on Raising Concerns (Whistleblowing) at the Trust can be found on the OUH intranet site under Human Resources/Raising Concerns (Whistleblowing). This includes
- 59.1. Process flow chart
 - 59.2. Guidance for Investigators

Document History

Date of revision	Version number	Reason for review or update
13 February 2013	Draft 1.0	Review of procedure due.
18 March 2013	Draft 1.1	Review of draft in light of the Francis Report. Draft to be submitted to Workforce Committee for initial consideration prior to consultation.
19 April 2013	Draft 1.2	Revised following feedback from Workforce Committee and some Senior Managers.
2 May 2013	Draft 1.3	Feedback from JSCNC incorporated.
9 May 2013	Draft 1.4	Feedback from Workforce Committee incorporated.
4 June 2013	Draft 1.5	Bribery Act requirements added and contact details.

18 June 2013	Draft 1.6	Equality Analysis finalised.
25 June 2013	Draft 1.7	Change in legislation - the worker raising the concern must have a reasonable belief that making the disclosure is in the public interest and protection under the act does not require the concern to have been raised in good faith.
1 July 2013	Draft 1.8	Include feedback from TME.

Appendix 1: Guidance for Managers to Whom a Concern has been reported

1. As a manager employees may approach you to report concerns about wrongdoing within the workplace. Below are some tips to help you deal with a whistleblowing situation should it arise.
2. In all situations you should:
 - 2.1. Thank the employee for telling you.
 - 2.2. Take the employee's concern seriously.
 - 2.3. Recognise that raising a concern can be a difficult experience for certain employees and offer them appropriate support.
 - 2.4. Ensure that the concern is being reported under the correct procedure and should not be referred to another process such as the Grievance and Collective Disputes Policy.
 - 2.5. Inform the employee how you will progress their concern and discuss reasonable timeframes for feedback.
 - 2.6. Respect the confidentiality of the individual if they have requested this.
 - 2.7. Determine whether there are serious grounds for concern and investigate as soon as possible and within the given timeframe of one month wherever possible.
 - 2.8. Consider who should handle the investigation and appoint an Investigator; if the concern is very serious or wide reaching ensure an appropriate level of seniority for the investigating officer. Know when to ask for help or advice from your own management structure.
 - 2.9. Take prompt action to resolve the concern or refer it on to the appropriate person for action.
 - 2.10. Keep the employee informed of the progress if there are delays in the investigative stage.
 - 2.11. Monitor and review the situation.
 - 2.12. Ensure appropriate feedback is given to the employee raising the concern, with due care not to infringe the rights or duties owed to other parties.
 - 2.13. Ensure employees reporting genuine concerns are not penalised in any way.
 - 2.14. Consider reporting to the Trust Board and/or an appropriate regulator the outcome of any genuine concern where malpractice or a serious safety risk was identified and addressed.
 - 2.15. Provide a record of the concern raised and actions taken to address the concern to the Human Resources Department to be held on the central record of concerns raised under the Raising Concerns at Work Procedure. Appendix 2 can be used for this purpose.

Appendix 2: Raising Concerns (Whistleblowing) Disclosure Form

The content of this report will be used by the person with whom your concern is being raised to help them decide on the most appropriate form of action. The Investigator will receive a copy of this report.

You do not have to give your name or state where you work if you wish to remain anonymous.

Your name:

..... Department:

..... Date concern raised:

.....

Name of person/persons you are raising a concern about (if applicable):

.....

.....

Details of your concern. You should include dates, times, details of any witnesses and what happened. Please feel free to attach additional sheets.

Signature:

Date:.....

The following section is to be completed by the person with whom the concern is raised:

Discussion held on:.....

Actions agreed:

Date feedback provided:

Name:

Department:.....

Date:.....

Appendix 3: Equality Analysis

Policy proposal name: Raising Concerns (Whistleblowing) Policy and Procedure														
Date of Policy: 10 th July 2013														
Date due for review: 10 th July 2016														
Lead person for policy and equality analysis: Vicki Parsons, HR Manager														
Does the policy /proposal relate to people? YES														
<p>1. Identify the main aim and objectives and intended outcomes of the policy</p> <p>The policy should benefit all people who are connected with Oxford University Hospitals NHS Trust including employees, patients, visitors, contractors and third party suppliers.</p> <p>The policy should assist in</p> <ul style="list-style-type: none"> • Providing a mechanism for concerns to be raised, where another forum is not available, or where another procedure has failed to address the issue. • Improving patient care and safety • Improving employee and workers experience at work • Improving the quality of services provided • Ensuring legal compliance within the Trust • Ensure “qualifying disclosures” are dealt with appropriately 														
<p>2. Involvement of stakeholders</p> <p>The policy has been developed and reviewed taking into account the current legislation; the Trust Values, standards and behaviours and the Trust’s commitment to delivering compassionate excellence.</p> <p>The draft document has been sent for consultation to all recognised Trade Unions, the BME Network and colleagues operating the LGBT e-mail address. The draft policy has been available for all employees to comment on during the consultation period.</p>														
<p>3. Evidence General</p> <p>The demographic profile of the Trust’s staff regarding some of the protected characteristics when compared to the population of Oxfordshire is detailed below. The staff information comes from the Electronic Staff Record (ESR) system on 31st December 2012.</p> <table border="1"> <thead> <tr> <th>Protected Characteristic</th> <th>Group</th> <th>Trust Staff Profile</th> <th>Oxfordshire Profile</th> </tr> </thead> <tbody> <tr> <td rowspan="2">Race</td> <td>White British</td> <td>64%</td> <td>84%</td> </tr> <tr> <td>White (other groups)</td> <td>8%</td> <td>7%</td> </tr> </tbody> </table>				Protected Characteristic	Group	Trust Staff Profile	Oxfordshire Profile	Race	White British	64%	84%	White (other groups)	8%	7%
Protected Characteristic	Group	Trust Staff Profile	Oxfordshire Profile											
Race	White British	64%	84%											
	White (other groups)	8%	7%											

	BME groups	19%	9%
	Undisclosed	9%	0%
Disability	Yes	3% - ESR *13% - Staff Survey	6%
Religion	Christian	40%	60%
	No religion or belief	8%	28%
	All other religions/beliefs	8%	4%
	Undisclosed	44%	8%
Sexual Orientation	Heterosexual	55%	Unknown
	LGB (All other groups)	2%	Unknown
	Undisclosed	43%	Unknown
Sex (gender)	Male	23%	50%
	Female	77%	50%

Note:-

*Disability within the Staff Survey includes a wide definition as follows: - long-standing illness, health problem or disability. 13% of staff completing the anonymous Staff Survey 2012 responded that they fell within this definition.

Disability

The policy should benefit all employees and workers at the Trust, in being able to raise concerns related to protected characteristics where other procedures have failed. This can also be done anonymously, ensuring the individual raising the concern feels protected from any potential victimisation.

Access to the policy: - the policy has only been produced in one format and consideration to be given to producing this document in an easy read format and large print. It is also possible for an employee (e.g. staff side representative) to raise an issue using the procedure on behalf of another employee.

Sex

The policy should benefit all employees and workers at the Trust, in being able to raise concerns related to protected characteristics where other procedures have failed. This can also be done anonymously, ensuring the individual raising the concern feels protected from any potential victimisation. It is therefore also possible for an employee (e.g. staff side representative) to raise an issue using the procedure on behalf of another member of staff.

Age

The policy should benefit all employees and workers at the Trust, in being able to raise concerns related to protected characteristics where other procedures have failed. This can also be done anonymously, ensuring the individual raising the concern feels protected from any potential victimisation. It is therefore also possible for an employee (e.g. staff side

representative) to raise an issue using the procedure on behalf of another member of staff.

Race

The policy should benefit all employees and workers at the Trust, in being able to raise concerns related to protected characteristics where other procedures have failed. This can also be done anonymously, ensuring the individual raising the concern feels protected from any potential victimisation.

Access to the policy: - the policy has only been produced in one language (English) and consideration is to be given to producing this document in other languages. It is also possible for an employee (e.g. staff side representative) to raise an issue using the procedure on behalf of another member of staff.

Sexual orientation

The policy should benefit all employees and workers at the Trust, in being able to raise concerns related to protected characteristics where other procedures have failed. This can also be done anonymously, ensuring the individual raising the concern feels protected from any potential victimisation. It is therefore also possible for an employee (e.g. staff side representative) to raise an issue using the procedure on behalf of another member of staff.

Pregnancy and maternity

The policy should benefit all employees and workers at the Trust, in being able to raise concerns related to protected characteristics where other procedures have failed. This can also be done anonymously, ensuring the individual raising the concern feels protected from any potential victimisation. It is therefore also possible for an employee (e.g. staff side representative) to raise an issue using the procedure on behalf of another member of staff.

Religion or belief

The policy should benefit all employees and workers at the Trust, in being able to raise concerns related to protected characteristics where other procedures have failed. This can also be done anonymously, ensuring the individual raising the concern feels protected from any potential victimisation. It is therefore also possible for an employee (e.g. staff side representative) to raise an issue using the procedure on behalf of another member of staff.

Gender re-assignment

The policy should benefit all employees and workers at the Trust, in being able to raise concerns related to protected characteristics where other procedures have failed. This can also be done anonymously, ensuring the individual raising the concern feels protected from any potential victimisation. It is therefore also possible for an employee (e.g. staff side representative) to raise an issue using the procedure on behalf of another member of staff.

Marriage or civil partnerships

The policy should benefit all employees and workers at the Trust, in being able to raise concerns related to protected characteristics where other procedures have failed. This can also be done anonymously, ensuring the individual raising the concern feels protected from any potential victimisation. It is therefore also possible for an employee (e.g. staff side representative) to raise an issue using the procedure on behalf of another member of staff.

Other potential impacts e.g. culture, human rights, socio economic e.g. homeless people

Whilst the legislation concentrates on 9 protected characteristics the Trust's procedures aim to have a broader and more inclusive reach when considering equality and diversity.

The policy should benefit people from all backgrounds and in all situations.

4. Summary of Analysis**Does the evidence show any potential to discriminate? How will any negative impacts be reduced?**

The policy should benefit all employees and workers at the Trust, in being able to raise a variety of potential concerns including those related to protected characteristics where other procedures have failed. This can also be done anonymously, ensuring the individual raising the concern feels protected from any potential victimisation. It is therefore also possible for an employee (e.g. staff side representative) to raise an issue using the procedure on behalf of another member of staff.

How does the policy advance equality of opportunity?

The policy empowers employees and worker at the Trust to raise concerns where other means of raising such concerns have not been fruitful. It also provides employees and workers with the confidentiality and protection they may need in raising an issue, which can be done anonymously.

The policy provides an opportunity to raise concerns at the highest level within the Trust.

How does the policy promote good relations between groups?

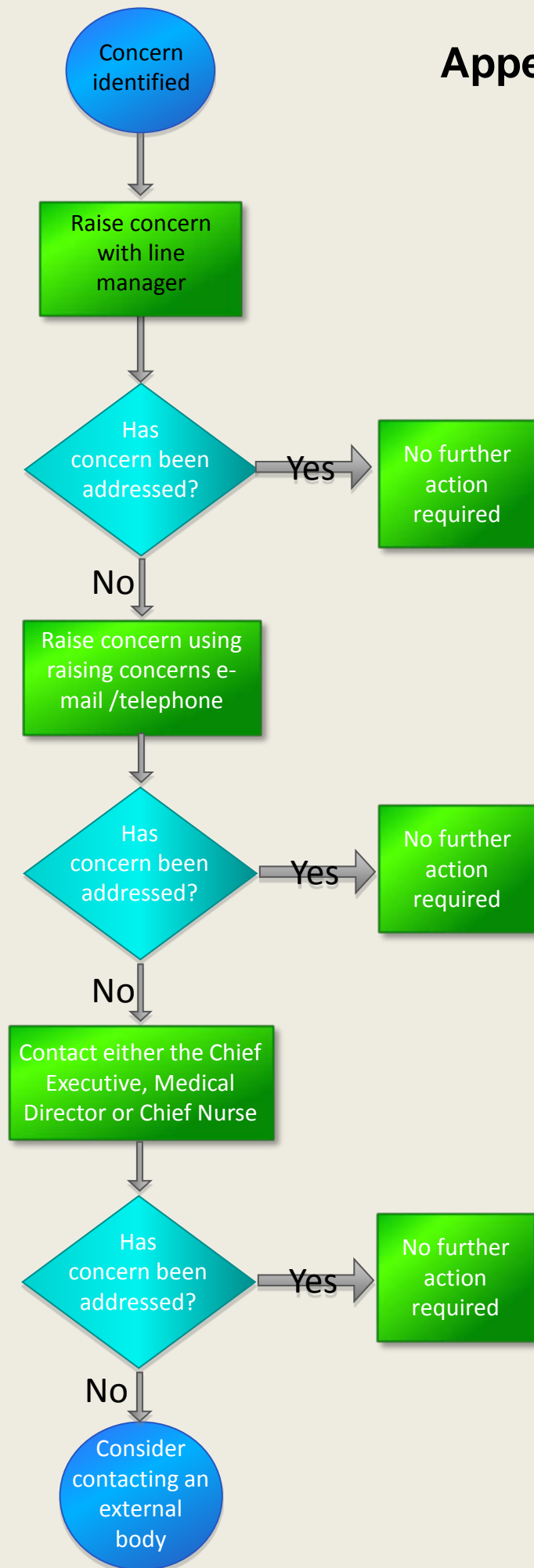
Concerns which are raised are investigated and action taken. When an issue is raised which relates to protected characteristics/groups, it is an opportunity for the matter to be fully investigated, addressed and employees to learn and improve relations between groups.

Raising Concerns (Whistleblowing) Stages

Appendix B

Raising concerns
e-mail address:
[raiseconcerns@
ouh.nhs.uk](mailto:raiseconcerns@ouh.nhs.uk)

Confidential
telephone no.:
01865 (2)28720



Raising Concerns (Whistleblowing) Investigating & Reporting at Stage 2 & 3

The investigation should take less than 1 month.

Feedback should be available fortnightly.

