NHS Board Meeting 26 January 2022

Lanarkshire NHS Board Kirklands Fallside Road Bothwell G71 8BB



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### SUBJECT: WHISTLEBLOWING QUARTER 2 REPORT

#### 1. PURPOSE

| The nu | rpose of | this pap | er is to | provide | Board | Members | with |
|--------|----------|----------|----------|---------|-------|---------|------|
|        |          |          |          |         |       |         |      |

| For approval |  | For Assurance | $\boxtimes$ | For Information |  |  |
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|--------------|--|---------------|-------------|-----------------|--|--|

#### 2. ROUTE TO THE BOARD

This paper has been prepared by Kay Sandilands, Director of Human Resources and Ms Lesley McDonald, Non Executive Board Member / Whistleblowing Champion.

#### 3. SUMMARY OF KEY ISSUES

The National Whistleblowing Standards and Once for Scotland whistleblowing policy (the Standards) were introduced on 1 April 2021. It is a requirement of the Standards to report whistleblowing performance to the NHS Board on a quarterly and an annual basis.

Appendix 1 would normally provide details of whistleblowing concerns raised across the organisation by staff and those who provide services on behalf of NHS Lanarkshire, demonstrating our performance in key areas of whistleblowing handling, as well as highlighting outcomes and providing more detail on Whistleblowing themes. Over time, this approach will illustrate trends in key areas and more importantly, allow us to evidence necessary improvement and learning in response to the trends and themes demonstrated. There were no whistleblowing concerns raised during July, August and September 2021 and the attached report was discussed at the Staff Governance Committee meeting held on 29th November 2021.

#### 4. STRATEGIC CONTEXT

This paper links to the following:

| Corporate objectives     | X   AOP               | ☐ Government policy |  |
|--------------------------|-----------------------|---------------------|--|
| Government directive     | Statutory requirement | AHF/local policy    |  |
| Urgent operational issue | Other                 |                     |  |

## 5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

## Three Quality Ambitions:

| Safe |  | Effective |  | Person Centred |  |
|------|--|-----------|--|----------------|--|
|------|--|-----------|--|----------------|--|

### Six Quality Outcomes:

| Everyone has the best start in life and is able to live longer healthier lives; (Effective) |  |
|---|--|
| People are able to live well at home or in the community; (Person Centred)                  |  |
| Everyone has a positive experience of healthcare; (Person Centred)                          |  |
| Staff feel supported and engaged; (Effective)   |  |
| Healthcare is safe for every person, every time; (Safe)                                     |  |
| Best use is made of available resources. (Effective)  |  |

#### 6. MEASURES FOR IMPROVEMENT

These are set out in the Appendix.

#### 7. FINANCIAL IMPLICATIONS

None.

# 8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

If staff do not have confidence in the fairness of the procedures through which their concerns are raised, or do not feel assured that concerns raised will be acted upon, there is a risk that they will not raise valid concerns about quality, safety or malpractice. The opportunity to investigate and address these concerns will have been lost, with potentially adverse impact on quality, safety and effectiveness of services. There is also a wider risk to organisational integrity and reputation, if staff do not believe they will be listened to and do not feel senior leaders in NHS Lanarkshire are fulfilling the organisation's values and promoting a culture of psychological safety.

### 9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

| Vision and leadership | Effective partnerships | Governance and |  |
|-----------------------|------------------------|----------------|--|
|                       |                        | accountability |  |
| Use of resources      | Performance            | Equality       |  |
|                       | Management             |                |  |
| Sustainability        |                        |                |  |
| Management            |                        |                |  |

## 10. EQUALITY IMPACT ASSESSMENT / FAIRER SCOTLAND DUTY

Not Applicable.

## 11. CONSULTATION AND ENGAGEMENT

Not Applicable.

### 12. ACTIONS FOR THE BOARD

| Approve Approve Accept the assurance provided Note the information provided | led 🔲 |
|---|-------|
|---|-------|

The Board is asked to

- 1. Note the implementation update;
- 2. Note the performance report in relation to concerns raised in Quarter 2 (July September 2021); and
- 3. Receive assurance that whistleblowing standards are being followed and learning shared.

# 13. FURTHER INFORMATION

For further information about any aspect of this paper, please contact:

Kay Sandilands Director of Human Resources