

# Report to the Meeting of the

**BOD 131/2017**

(Agenda item: 8)

# Oxford Health NHS Foundation Trust

# Board of Directors

**25 October 2017**

**Freedom to Speak Up Annual Report 2017**

**For: Information**

**Executive Summary**

This is the annual report to the Trust Board on Freedom to Speak Up in the Trust for the 12 months up until the end of September 2017. The Freedom to Speak Up Guardian is a relatively new role across the NHS and was a recommendation of the Freedom to Speak Up Review by Sir Robert Francis that was published in 2015. This Trust was an early adopter of this initiative and the Freedom to Speak Up Guardian came into post in April 2016. The role of the Freedom to Speak Up Guardian is to provide independent and confidential support to staff that want to raise concerns and promote a culture in which feel staff safe to raise those concerns. Over the past 12 months 86 staff contacted the Guardian with concerns. Most concerns were resolved locally: a small number progressed to formal whistleblowing investigations. In addition, other activities have been undertaken to raise awareness of Freedom to Speak Up and to encourage cultural change in the Trust. The Guardian has also contributed to the national and regional developments in this area. The first two quarters feedback by staff that contacted the Guardian was positive.

**Governance Route/Approval Process**

This is an annual report. This report has not been presented to any committees or groups in the Trust. An interim report was presented to the Well-Led Quality Sub-Committee in June 2017.

**Recommendation**

The Board is asked to note the report.

**Author and Title: Mike Foster, Freedom to Speak Up Guardian**

**Lead Executive Director: Stuart Bell, Chief Executive**

1. *A risk assessment has been undertaken around the legal issues that this report presents and there are no issues that need to be referred to the Trust Solicitors*
2. ***Strategic Objectives*** *– this report relates to or provides assurance and evidence against the following Strategic Objective(s) of the Trust*

*1) Driving Quality Improvement*

*(Goals: patients will be safe from harm; patients will achieve the clinical outcomes they want; and patients and carers will have an excellent experience)*

*2) Delivering Operational Excellence*

*(Goals: our services will be effective and efficient; information will be translated into knowledge; and our planned surplus will be delivered)*

*5) Developing Leadership, People and Culture*

*(Goals: staff satisfaction will be in the top 20% of Trusts nationally; our staff and teams will be high-performing; and we will recruit and retain an excellent workforce)*

**Freedom to Speak Up Annual Report 2017**

**Introduction**

This is the annual report to the Trust Board on Freedom to Speak Up in the Trust for the 12 months up until the end of September 2017. The Freedom to Speak Up Guardian is a relatively new role across the NHS and was a recommendation of the Freedom to Speak Up Review by Sir Robert Francis that was published in 2015. This Trust was an early adopter of this initiative and the Freedom to Speak Up Guardian came into post in April 2016. The role of the Freedom to Speak Up Guardian is to provide independent and confidential support to staff that want to raise concerns and promote a culture in which feel staff safe to raise those concerns. Over the past 12 months, 86 staff contacted the Guardian with concerns. Most concerns were resolved locally: a small number progressed to formal whistleblowing investigations. In addition, other activities have been undertaken to raise awareness of Freedom to Speak Up and to encourage cultural change in the Trust. The Guardian has also contributed to the national and regional developments in this area. The first two quarters feedback by staff that contacted the Guardian was positive.

**Background to Freedom to Speak Up**

Sir Robert Francis, in his Report of the Mid-Staffordshire NHS Foundation Trust Public Inquiry (2013), described the experiences of nurses and doctors who raised whistleblowing concerns about the poor care of some patients at Stafford Hospital. As a result, he was asked to conduct a further review into whistleblowing in the NHS. ‘Freedom to Speak Up – an independent review into creating an open and honest reporting culture in the NHS’ was published in 2015. The report identified a need for culture change, improved handling of cases, measures to support good practice, particular measures for vulnerable groups, and extending the legal protection. Sir Robert Francis identified 20 principles that addressed these themes. In particular, he recommended that all trusts should have a Freedom to Speak Up Guardian to ‘act in a genuinely independent capacity’ and support staff to raise concerns.

In 2016-17 it became a contractual requirement for all NHS provider trusts to have a Freedom to Speak Up Guardian. By the end of the financial year, all trusts in England had made appointments although not all Guardians were in post. Trusts were also expected to adopt a model NHS whistleblowing/raising concerns policy.

**The Role of the Freedom to Speak Up Guardian**

The Freedom to Speak Up Guardian is not part of the management structure of the Trust and is able to act independently in response to the concerns being raised with him. The Guardian reports directly to the Chief Executive, and this gives him access to the executive directors of the Trust. There are two key elements to the role:

• To give independent, safe and confidential advice and support to members of staff who wish to raise concerns that have an impact on patient safety and experience. This is not just for permanent staff members but is also available for temporary or agency staff, trainees or students, volunteers and trust governors. Support from the Guardian is not available to carers and patients as they can raise concerns through the complaints and PALS service.

• To promote a culture where members of staff feel safe to raise concerns and do not fear adverse repercussions as consequence

**Freedom to Speak Up activities in the Trust**

*Raising concerns*

In the last 12 months 86 staff raised concerns with the Guardian.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Month** | **Number of staff** | **Directorate** | | | | **Not Trust** | **Not Known** |
| **Children and Young people** | **Adult** | **Older People** | **Corporate** |
| October 2016 | 9 | 0 | 5 | 2 | 2 | 0 | 0 |
| November | 11 | 0 | 3 | 6 | 1 | 0 | 1 |
| December | 13 | 0 | 0 | 11 | 2 | 0 | 0 |
| January 2017 | 5 | 0 | 1 | 2 | 2 | 0 | 0 |
| February | 7 | 2 | 0 | 2 | 3 | 0 | 0 |
| March | 5 | 1 | 3 | 0 | 1 | 0 | 0 |
| April | 5 | 0 | 1 | 1 | 2 | 1 | 0 |
| May | 10 | 1 | 7 | 1 | 1 | 0 | 0 |
| June | 6 | 0 | 2 | 3 | 1 | 0 | 0 |
| July | 6 | 0 | 4 | 1 | 1 | 0 | 0 |
| August | 3 | 0 | 2 | 1 | 0 | 0 | 0 |
| September | 6 | 0 | 3 | 3 | 0 | 0 | 0 |
| **Totals** | **86** | **4** | **31** | **33** | **16** | **1** | **1** |

A cross-section of the Trust’s staff have contacted the Guardian. These have included unregistered staff (such as healthcare assistants and community support workers) and non-clinical staff (such as administrators and maintenance staff). Registered staff have included nurses (including community psychiatric nurses and district nurses), OTs, psychologists, physiotherapists, consultant psychiatrists. Often staff have been in leadership and management roles and these have included consultant psychiatrists, operational managers, heads of service, clinical development leads, professional leaders, matrons, ward and team managers and service managers.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ***Month*** | ***Number of staff contacts*** | ***Types of action*** | | | | ***Number still open*** |
| ***Clarifying concern*** | ***No action*** | ***Discussion and advice only*** | ***Further action required*** |
| **2016-17** |  |  |  |  |  |  |
| *October* | 9 | 0 | 0 | 0 | 9 | 0 |
| *November* | 11 | 0 | 3 | 4 | 4 | 0 |
| *December* | 13 | 0 | 1 | 2 | 10 | 0 |
| *January 2017* | 5 | 0 | 0 | 1 | 5 | 0 |
| *February* | 7 | 0 | 3 | 1 | 3 | 0 |
| *March* | 5 | 0 | 0 | 4 | 1 | 4 |
| ***2017-18*** |  |  |  |  |  |  |
| *April* | 5 | 0 | 0 | 5 | 0 | 0 |
| *May* | 10 | 0 | 1 | 6 | 3 | 1 |
| *June* | 6 | 0 | 0 | 4 | 2 | 2 |
| *July* | 6 | 0 | 1 | 2 | 3 | 1 |
| *August* | 3 | 0 | 1 | 0 | 2 | 2 |
| *September* | 6 | 4 | 1 | 1 | 0 | 4 |
| ***Totals*** | **86** | **4** | **11** | **30** | **41** | **14** |

The Guardian is still waiting to clarify the concerns of 4 staff who recently contacted him. Where there was no further action that was because the person who contacted did not want any further contact at this time, could not be contacted or had inappropriately contacted the Guardian (for example, when a person’s bike had been stolen). The majority of staff contacted the Guardian by e-mail or telephone but a number were direct contacts as a result of awareness raising activities, drop ins or informal approaches in the canteen or Trust grounds. All staff were offered a face-to-face meeting to discuss and clarify their concerns and agree what steps should be taken. When this was not possible, telephone or e-mail was used. Some staff contacted on behalf of groups and resulted in the Guardian meeting with teams to discuss the concerns that they had. In these cases, there was often a major issue, such as the level of demand, and then other issues, such as the working environment, that are also raised. In some cases, the Guardian agreed the next steps that the staff member concerned could take and had no further direct involvement. In others, the Guardian took the steps on behalf of the staff member: this was particularly so where the staff member did not want to be identified.

Services where there have been concerns raised about include:

1. *Children and Young Peoples:* Eating Disorder Services, Children and Adolescent Mental Health Services (CAMHS).
2. *Adult Services:* Acute Mental Health Wards, Adult Mental Health Teams, Early Intervention Service, Psychological Services, Learning Disabilities, Directorate Management Team.
3. *Older People’s Services:* Urgent Care, Community Hospitals, Community Services (including District Nursing), Community Mental Health Teams, Mental Health Ward, Directorate Management Team.
4. *Corporate Services:* There have been a number of concerns raised about clinical services where corporate staff have responsibilities in the clinical directorates but there have also been concerns raised about the corporate services such as about service re-organization, bullying and harassment and some working practices.

It was not always possible to identify the services that staff came from in reports as that may have resulted in the individual being identified.

The majority of issues raised with the Guardian were not formally investigated and therefore the categorization of the issues of concern was based on the account given by the staff member and was not formally substantiated. The National Guardians Office (NGO) has suggested a number of categories for the types of issues (such as patient safety/quality, behaviour/relationship, senior leadership) but they have not been defined and have limited value at this stage. At the request of the NGO, the Trust’s Guardian has drafted some definitions for the categories and suggested revisions to the categories suggested. The types of issues raised in the Trust with the Guardian can be described as:

1. *Patient safety:* There have been no issues of abuse similar to those seen at Stafford Hospital raised with the Guardian. There have been patient safety issues however, such as confused patients wandering on a community hospital site and medicines management issues, and one issue of safeguarding adults that when reported was already being investigated.
2. *Demand and patient complexity:* Teams described increasing numbers of referrals of more complex patients and having to care for them without an increase in resources: they often had significant numbers of vacancies some covered by agency or bank staff. Often staff worked extra hours to try to meet this demand and would go home worrying about patients that they felt were at risk. This caused them stress and had an impact on their family lives. They were concerned that they could not provide care at the standard that they would like to and some felt that they were compromising their professional standards. These concerns have been reported to the Clinical Advisory Board and Directorate Management Teams
3. *Bullying and harassment:* Whilst bullying may not be endemic in the Trust, it has been reported to the Guardian by staff from across the organisation from senior management and leadership to frontline staff. Staff described distressing situations where they had been victimised by their managers. These included being shouted at, ignored, not given training opportunities, having reasonable requests refused, being treated differently than colleagues and being spoken to or about in derogatory ways. Bullying took place be in 1:1 situations and in more open settings. In a number of cases, several staff from a team contacted the Guardian and in two situations investigations were initiated. Often staff felt very anxious about formalising bullying allegations as they were worried that the situation would be made worse for them. Generally staff described being bullied others more senior than them. However, a small number of managers have with the Guardian and described being bullied by their teams or individual members of their teams. These managers were generally poorly supported in addressing these issues by their line managers.
4. *Service re-organisation:* The Guardian was contacted by a number of staff experiencing a service re-design or re-organisation. This was stressful for staff, particularly when it went on for a long time (as the psychological services review did) or when they felt that it affected their ability to deliver care to patients. Some staff spoke with the Guardian when leaving the Trust following a re-organisation.
5. *Management style and communication:* Staff described some managers as insensitive or lacking in management and leadership knowledge and skills. Others felt that there was a lack of communication when staffing or service changes were being made.
6. *Signposting individuals:* Where a concern did not impact on patient safety or experience the Guardian would offer advice if possible and try to signpost staff to a more appropriate source of support.

The discussions with the Guardian would often lead to the individual developing strategies to address their concerns with their managers or making changes to their own practice. Their concerns about being identified or possible repercussions meant that for some the Guardian was only able to feedback or address their concerns in a general way (for example, discussing management style with the Directorate Management Teams). Changes that were made following involvement with the Guardian included:

* Improved security in a community hospital ward to prevent wandering by confused elderly patients
* Changes in working practices in a community mental health team to make better use of time and improve supervision arrangements
* Increased staffing in the assessment function of an adult mental health team (AMHT)
* Improved medicines management in an AMHT
* Improved communication and clarity of decision making in a service re-design
* Two investigations into systematic bullying in teams being undertaken
* The importance of confidentiality where staff are carers being emphasised in Information Governance training
* Changes being made to data collection in CPA clinical audit in Adult Services
* Improved risk assessment for staff in out of hours service
* Review of medicines management in a residential setting

*Changing the culture*

*Raising awareness:* Freedom to Speak Up is an important part of the patient safety agenda and staff need to know that they can safely raise concerns and how to do so. All new staff are given information about freedom to Speak Up as part of corporate induction. There is a page on the intranet that gives information about the role of the Guardian, how to raise concerns and sources of support for staff. There have been announcements in the weekly communications bulletin and articles on the intranet and in the Insight magazine. The Guardian has visited teams and wards and attended meetings to deliver short presentations to promote Freedom to Speak Up. He has also presented to student nurses and paramedics as part of their introduction to the Trust before starting placements. He also is part of the equality network in the Trust and attends the Trust’s equality groups.

*Staff development:* Unregistered care staff can often find it harder to raise concerns but spend most time in direct contact with our patients. This has been recognised and the Guardian delvers a joint session on the importance of values, what happens when they are not reflected in the care that is given and how to raise concerns. Over a 100 health care assistants and support staff have now received this session. The Guardian has also contributed to development of the leadership development programme and a joint session will be delivered in the Spring as part of preparing managers to be confident in receiving feedback from their staff when they have concerns. He has also been mentoring a staff member as part of her leadership development.

*Influencing cultural change:* The Guardian has met with management and professional leadership groups (such as Directorate Management Teams and the Clinical Advisory Board) and the Quality and Safety Committee of Governors to discuss his role, themes that have emerged from the issues raised by staff and how managers and leaders can be accessible and responsive to staff and the concerns they have. Following discussion at the Well-Led Quality Sub-Committee, a campaign to raise awareness about bullying and harassment and how to combat it will be launched during anti-bullying week in November. This is being led by a working group chaired by the HR Director which is also looking at how best provide staff with the information they need about the staff support services available in the Trust.

*Policy review:* A revised whistleblowing policy, incorporating the national model policy was agreed in February 2017.

*National and Regional Developments*

The National Guardian, Dr Henrietta Hughes, came into post in October 2016 and has been developing her role and the work of the National Guardian’s Office. Training has been provided for new Guardians and guidance has been issued on recording information, case reviews and Freedom to Speak Up and CQC assessments of Trusts. There have been 2 national conferences – in October 2016 and March 2017 – and the Trust’s Guardian has been invited to be a panel member at the next conference in October. A national survey of Freedom to Speak Up Guardians was published in September and makes a number of recommendations the Trust will be considering. From April 2017, the NGO started collecting data quarterly on the work of the Guardians which it publishes. This includes a satisfaction question that Guardians are requested to ask all staff that contact them.

There is a regional network of Freedom to Speak Up Guardians which meets quarterly in the Thames Valley and Wessex area. The Trust’s Guardian is the regional lead.

The Guardian has also contributed to the development of a scheme to support staff members who need to be redeployed having raised concerns in their trusts. This was launched by NHS Improvement in September 2017.

**Effectiveness of Freedom to Speak Up**

The Guardian is managed by the Chief Executive and has regular discussions with the Director of Finance about the raising concerns arrangements in the Trust and current whistleblowing concerns and possible investigations. He provides an annual report to the Trust Board and an interim report to Well-Led Quality Sub-Committee. The same reports are presented to the staff side at the SPNCC.

The national NHS staff survey asks two questions about staff raising concern in their trust. The 2016 staff survey showed small increases from the 2015 survey - from 75% to 76% - in staff feeling secure to raise concerns about unsafe clinical practice (question 13a) and from 62% to 63% in staff feeling confident that the Trust would address those concerns (question 13b). In comparison with other mental health and community trusts, staff confidence and security in reporting unsafe clinical practice was 3.77 compared with 3.71 (out of a possible score of 5).

The number of formal whistleblowing investigations started during the past 12 months were similar to previous years. However, the Care Quality Commission has not notified the Trust of any concerns being raised with them by staff. This was confirmed in a recent discussion by the Trust’s CQC inspector with the Guardian. This is a significant change from previous years and may indicate staff feeling more confident in raising concerns internally.

From April 2017 anonymised feedback has been requested from staff that have contacted the Guardian by asking them to complete a short survey on Survey Monkey. The results of this survey are being collated quarterly and there are now two quarters of responses. In Quarter 1 there were 6 responses: 4 said that given their experience they would contact the Guardian again, 1 said that they would not and 1 said that they might. Generally feedback was positive and comments included: ‘I think this is a valuable service when concerns are not dealt with any other way’ and ‘I was made to feel comfortable to speak and was truly listened to and understood’. In Quarter 2 there were 7 responses and they all said that given their experience, they would contact the Guardian again. Similarly the feedback was generally positive and comments included: ‘Very helpful, knowledgeable, flexible and validating response to my concerns’ and ‘It felt like a very supportive experience, non-judgemental and professional. I felt my concerns were being taken seriously’. The survey includes questions about equality which will enable a picture of the type of staff contacting the Guardian to build up.

As the quarterly collections of data by the NGO develop, they may enable some benchmarking with similar Trust to be undertaken.

**The Objectives for Freedom to Speak Up Guardian 2016-17**

The following objectives were agreed with Chief Executive for 2016-17:

* To raise awareness of the role of the Freedom to Speak Up Guardian with Trust staff.
* To develop an effective system of responding to and monitoring the outcomes of concerns.
* To improve the confidence of managers in responding to concerns raised with them by their staff through the Freedom to Speak Up Guardian contributing to the development and implementation of the Trust’s leadership programme.
* To participate in the development of the role of the Freedom to Speak Up Guardian and the Office of the National Guardian.
* Evaluation of the effectiveness of the Freedom to Speak Up Guardian role in the Trust.

As can be seen from the annual report of the Guardian, these objectives are being worked on or have been met.

The objectives for 2017-18 have not yet been agreed with the Chief Executive.

**Recommendation**

The Trust Board is asked to note the contents of the annual report by the Freedom to Speak Up Guardian.

**Mike Foster, 17th October 2017**