# King's College Hospital NHS Foundation Trust

## Policy on Raising Concerns (Whistleblowing)

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Responsible Director:	Angela Huxham, Director of Workforce			
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#### **Document History**

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#### Consultation distribution (before ratification)

Sent to	Version	Date	Actions taken as a result
JCC	2.0	April 2011	UKCC changed to NMC
Staff Committee Chairs	2.0	April 2011	Adult safeguarding statement added

#### **Reviews and updates**

Date New Summa version no.		Summary of Changes	Major change/s (must go to KE) or	Author of change/s
			minor change/s	
June 2004	1.0	New Policy	Major	Marion Lorman
April 2006	1.0	Updated	Minor	Marion Lorman
December 2007	1.1	1 <sup>st</sup> Revision	Minor	Marion Lorman
May 2011	2.0	Three yearly review Policy updated to reflect guidance in Policy on Policies	Minor	Gemma Glanville
January 2012	2.1	NHS Whistleblowing Helpline Number Added	Minor	Gemma Glanville

#### **Dissemination schedule (after ratification)**

Target audience(s)		Person responsible
All staff	As only minor changes, will be stored on a Trust wide drive	Gemma Glanville

## 1. INTRODUCTION

- 2. PURPOSE AND PRINCIPLES
- 3. SCOPE
- 4. PROCEDURE FOR RAISING CONCERNS
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- 6. EXTERNAL CONTACTS
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**Appendix 1: Equality Impact Assessment** 

#### 1. INTRODUCTION

- 1.1 This Policy has been developed in response to the Public Interest Disclosure Act 1998, and brings together existing guidelines to set out the responsibilities of staff and other workers and the procedures to be used when raising particular issues of concern. Its purpose is to enable staff to raise concerns about malpractice and to ensure that they are promptly and properly investigated and dealt with appropriately.
- 1.2 The Policy complements various professional or ethical guidelines and codes of conduct or freedom of speech and is not intended to restrict the publication of clinical or scientific research findings, although the Trust expects it to be made clear that any comments in this respect represent a personal view and not the views of King's College Hospital NHS Foundation Trust.
- 1.3 This Policy should be read in conjunction with other Trust policies and procedures and in particular the <u>Adverse Incidents Policy</u> and <u>Media Handling</u> <u>Policy</u>. Further advice on other relevant guidelines and policies is given at the end of this document
- 1.4 This Policy does not apply to accredited Trades Union or Professional Association representatives undertaking duties within the industrial relations guidelines and agreed procedures.
- 1.5 This Policy is intended to address concerns where the interests of others or the Trust itself are at risk. It is not designed for raising every day concerns with management and it does not address individual or collective issues which are more properly dealt with under the Trust's Staff Complaints (Grievance) Resolution Procedure.

## 2. PURPOSE AND PRINCIPLES

- 2.1 The Trust is committed to encouraging a policy of openness and participation in all aspects of our work and services. However, this must be exercised with proper regard to individuals' rights to confidentiality in all matters personal to themselves, and to the proper use of appropriate channels of communication. It must also take full account of the requirements of patient confidentiality.
- 2.2 As part of the Trust's commitment to a policy of openness, we will support members of staff raising a genuine concern under this Policy.
- 2.3 The Trust expects individuals to respect this commitment by observing the appropriate procedure for raising such concerns and guidance is offered in this document.
- 2.4 When a member of staff raises a concern they should disclose any personal interest they may have in the matter, or in the particular concern, from the outset.

- 2.5 If a member of staff acts in good faith and reasonably believes their concern to be true, it does not matter if they are subsequently found to be mistaken. Therefore, staff should feel able to raise genuine concerns without a fear of retribution.
- 2.6 To obtain protection under the Public Disclosure Act 1998 staff must demonstrate that they have acted reasonably and responsibly, genuinely believing that a wrongdoing has occurred, is occurring or is likely to occur again.
- 2.7 The Trust also recognises that there may still be situations where staff wish to raise a concern in confidence. If a member of staff asks for their identity to be protected, the Trust will not reveal it without their consent. However, there may be situations where the Trust cannot proceed any further without doing so, and staff may not unreasonably refuse to co-operate in this respect.
- 2.8 Whilst the Trust acknowledges that some individuals may wish to remain anonymous when raising concerns it may make it much more difficult to investigate the matter if their identity is not revealed and this may impact on public or staff safety. Whilst anonymous reports will be looked into, this Policy does not therefore apply in such circumstances.
- 2.9 Staff will not be at risk of dismissal or any other form of retribution as a result of raising genuine concerns. This assurance does not cover those who raise a matter through malicious intent and/or which they know to be untrue, and formal disciplinary action may be taken in such circumstances.
- 2.10 Staff are reminded of their duties of confidentiality and loyalty to the Trust. Whilst areas of concern may be raised with external bodies without first raising them with the Trust, if it is not justified under the Public Interest Disclosure Act, this could be regarded as a breach of duty and may lead to disciplinary action. Staff are encouraged to raise concerns in line with this Policy.
- 2.11 Deterring someone from using this Policy, or victimising someone who does, will be regarded as a disciplinary issue.
- 2.12 It is important that when raising concerns, all NHS staff remember they have a duty of confidentiality to patients. Unauthorised disclosure of personal information about any patient may be regarded as breach of confidentiality and managed in line with the Trust Disciplinary Policy. Staff raising concerns should anonymise details so that patient identifiable information is not released. Staff can contact the Caldicott Guardian for advice.

## 3. SCOPE

## 3.1 WHO MAY RAISE CONCERNS UNDER THIS POLICY?

- All employees of the Trust whether temporary or subject to fixed term contracts, whether full-time or part-time, including trainees, and research staff
- NHS Professionals or Bank Staff

- Agency workers working at the Trust whether under contracts with, or employed by, the Trust or an Agency
- Any other workers who undertake work for the Trust but who are not necessarily employed by the Trust, such as contractors and their staff, or those holding honorary contracts

Although the Act does not specifically cover volunteers and independent consultants, we would encourage individuals to raise any concerns with a relevant employee of the Trust should they have cause to suspect, or evidence of, any malpractice.

## 3.2 WHAT ISSUES OF CONCERN DOES THIS POLICY COVER?

- Health care matters including suspected mistreatment or abuse of patients and/or issues relating to the quality of care provided
- Health and safety issues which affect patients, visitors or staff
- Suspicion or knowledge of theft, fraud, corruption, bribery or other financial malpractice
- Concerns about the professional or clinical practice or competence of colleagues or other members of staff
- The treatment of other staff, including suspected bullying, harassment or discrimination
- Employment standards and/or working practices
- Concern that the environment is, or is likely to be, endangered
- Failure to comply with any other legal obligation
- Information which may show that any of the above matters is being, or is likely to be, deliberately concealed
- Concerns about staff exploitation by extremists or radicalisers

## 4. PROCEDURE FOR RAISING CONCERNS

## 4.1 WHEN SHOULD I RAISE CONCERNS?

4.1.1 All staff have a duty to raise any concerns which they may have as soon as possible, as any delay could result in something happening again and/or make investigations more difficult. Examples of concerns which should be discussed are shown in Section 3.2.

## 4.2 TO WHOM SHOULD I TALK?

4.2.1 You should initially raise any concerns with your immediate line manager if you are employed or managed by the Trust. If you feel unable to do this for whatever reason you should discuss your concerns with your Departmental Head/Divisional Manager/Clinical Director, as appropriate. Junior Medical and Dental staff should raise any concerns with their Consultant, their Clinical Director or their Educational Supervisor. Nursing staff should speak with their Service Manager or appropriate Professional Head. <u>However, concerns relating to potential fraud must be raised with the Trust's Counter Fraud Specialist on telephone extension 6110 in the first instance.</u>

- 4.2.2 If you have spoken to these people and your concerns still continue, or if you feel that you would prefer to talk to someone outside your department, this is acceptable (see Section 5).
- 4.2.3 If you are an employee of a contractor you can contact the Chief Executive, Chief Financial Officer, or the Executive Director of Workforce Development to raise your concerns.
- 4.2.4 Staff may also choose to raise concerns through their local representative of an accredited trades union or professional association.

## 4.3 WHAT WILL HAPPEN WHEN I HAVE SPOKEN TO SOMEONE?

- 4.3.1 It is the responsibility of managers and senior clinicians to ensure that they are accessible to staff wishing to express their concerns, which should be dealt with thoroughly, fairly and promptly.
- 4.3.2 The Trust recognises that raising a concern can be a difficult experience. Genuine concerns will be listened to and taken seriously by managers and senior clinicians. Once a concern has been raised, the Trust will:-
  - Respond to you in writing summarising the issues which you have raised.
  - Consider it fully, fairly and sympathetically, and assess what steps need to be taken.
  - Ensure that the matter is investigated as appropriate to the situation.
  - Inform the individual raising the concern of the name of the person handling the matter and how they can be contacted.
  - Provide feedback to the individual as far as is reasonable. The Trust is not able to disclose information, or details of the precise action taken, where this would infringe confidentiality owed to others, such as other staff or patients.
  - Consider what further assistance you may be able to provide with the investigation.
- 4.3.3 Although it is important that reasonable time is allowed for a full investigation, it is expected that managers will consider the issue and respond to the person raising the concern as soon as possible, and within 10 working days of the matter being brought to their attention. Where this is not possible they should contact the member of staff to give reasons and an expected date for reply.
- 4.3.4 Where concerns are raised about an employee's conduct, the manager will bring this to their attention at the earliest opportunity.

## 5. WHAT CAN I DO IF I REMAIN DISSATISFIED?

5.1 Where local discussion has not allayed your concerns or resolved the issues staff should seek further help and guidance:-

**Medical Staff** should approach the Executive Medical Director or Executive Director of Operations (if they have not already done so).

Other Clinical Staff should approach their appropriate professional head.

Other Staff should approach the Head of their Directorate or Division...

5.2 **All Staff** are free to approach any member of the Trust's Executive or Board, the relevant specialist adviser(s) or any member of the Human Resources Department where they have been unable to address their concern through normal channels, or would prefer not to do so.

## 6. EXTERNAL CONTACTS

6.1 This Policy is intended to provide reassurance that matters raised internally will be dealt with swiftly and appropriately. Whilst the Trust would encourage you to raise your concerns through the internal process, you may also contact the following:-

#### 6.2 <u>Professional, Representative and Regulatory Organisations</u>

All staff retain the right to consult, seek guidance and support from their professional organisation or trades union, and from statutory bodies such as the NMC or the GMC. Staff are encouraged to consult with the appropriate body if an issue seems likely to remain unresolved locally, and have an obligation to comply with the codes of practice of their relevant professional body.

#### 6.3 <u>The Health Service Ombudsman</u>

The Ombudsman may look into complaints by staff on behalf of a patient, provided that they are satisfied that there is no-one more appropriate to act on a patient's behalf, such as the immediate relative. Information leaflets about the Ombudsman's role and the procedures for reference are available from the Patient Liaison Office or The Parliamentary and Health Service Ombudsman, Millbank Tower, Millbank, London, SW1P 4QP. Website http://www.ombudsman.org.uk/

#### 6.4 NHS Fraud and Corruption Reporting Line

Employees can also call the NHS Fraud and Corruption Reporting Line on freephone 0800 028 40 60. This provides an easily accessible route for the reporting of genuine suspicions of fraud within or affecting the NHS. It allows NHS staff who are unsure of internal reporting procedures to report their concerns in the strictest confidence. All calls are dealt with by experienced trained staff and any caller who wishes to remain anonymous may do so.

#### 6.5 <u>The National Clinical Assessment Service (NCAS)</u> For medical and dental staff concerns.

☎ 020 7062 1620 (switchboard) OR ☎ 020 7062 1655 (advice line)

<u>http://www.ncas.npsa.nhs.uk/</u>

#### 6.6 <u>Public Concern at Work</u>

This Charity also operates a confidential service who will advise you about raising concerns externally. Their Helpline number is 020 7404 6609. Website <u>http://www.pcaw.co.uk/</u> or email <u>helpline@pcaw.co.uk</u>

6.7 NHS Whistleblowing Helpline, (provided by Royal Mencap Society): 08000 724 725. The helpline provides confidential advice to individuals on how to report. It operates on weekdays between 08.00 and 18.00 with an out-of-hours answering service available at weekends and on public holidays.

#### 6.8 Other External Contacts

Whilst there are other external contacts who may be approached, the Trust would expect you to raise your concerns in accordance with this policy before doing so. It may not necessarily be reasonable to disclose a matter to external parties if internal channels have not first been used. In any event you are advised in all cases to consult in confidence a member of the Human Resources department before raising any concerns outside the Trust.

#### 7. RAISING CONCERNS ABOUT YOURSELF

- 7.1 You may have anxieties about your own work performance or conduct. These may stem from concerns, for instance, about:
  - Your health.
  - Events in your home life.
  - A drink, drugs or other substance habit.
  - Lack of confidence about your ability to do the job in the manner or to the standard required.
  - Mistakes, errors or near misses for which you feel a responsibility.
  - Inability to get along with one or more work colleagues.

The Trust would encourage you to share these concerns with an appropriate person, who will help you resolve the source of your concern.

#### 7.2 Who should I raise my personal concerns with?

Depending on the nature of your concerns, you should raise the matter with your immediate supervisor or manager, who may wish to involve professional help, through Occupational Health, the Education and Development Team or Human Resources Departments. This is particularly important if the safety of patients or other staff is at risk.

If you feel uncomfortable about raising your concerns with your line manager, then you are free to self-refer yourself to Occupational Health, a professional counsellor within Occupational Health, your Human Resources manager or even your manager's manager. You can get support and guidance from Workplace Options on 0800 243 458 or by email: assistance@workplaceoptions.com, via the website: www.workplaceoptions.com - Log in: KCH password: employee (needed if entering the website outside of the Trust) or on +44(0)208987 6550 (outside of the UK). MINICOM 020 8987 6574.

#### 7.3 <u>Will I be jeopardising my employment by raising such issues?</u>

The Trust will respect the fact that you have volunteered your concerns and will do everything practical to assist you resolve these in ways that protect your employment with the Trust. In dealing with the particular issues, you may wish to seek the support of a friend or trade union colleague or prefer to deal with the matter in a low-key, informal way. The Trust will respect your wishes on this matter.

In determining the best way to deal with the issues, appropriate Trust policies and procedures will be followed wherever appropriate.

## 8. GENERAL STATEMENT

King's College Hospital NHS Foundation Trust has in place a range of policies, procedures and protocols to support and encourage staff to raise concerns, which may include concerns about themselves. These include a process for individual performance appraisal and policies to encourage reporting of untoward incidents. Policies are also in place to allow staff to raise concerns around bullying and harassment, as well as issues relating to their personal capability and/or difficulties such as health, or alcohol and substance abuse. Staff are advised to access the relevant policy for detailed guidance, all of which are available in the human resources x-drive folder.

The Trust will provide support and advice to staff involved in traumatic or stressful incidents, including cases in which staff are subject to allegations of unfair or inappropriate treatment from patients, colleagues or managers. Line managers will listen carefully to concerns; will provide advice and indicate additional sources of support. The Occupational Health Department has a key role in providing support to help staff get through difficult periods. Managers should be sensitive to either the need to refer staff to the Occupational Health Department or alternatively to the need to suggest staff self refer to either Occupational Health or the Trust's staff counselling service. For more information please see Trust guidance on The Role of Occupational Health in Supporting Staff during times of difficulty.

## 9. MONITORING ARRANGEMENTS

Measurable policy objectives i.e. what will be monitored	Monitoring/ audit method	Frequency of monitoring	Responsibility for performing the monitoring	Monitoring reported to groups/committee s, inc responsibility for action plans
Monitor via grievance cases, disciplinary's and ET's for cases reported under Public Disclosure Act	Monitor ER cases through the annual ER data	Annual	Associate Director of Human Resources	JCC Workforce Diversity Group HR Department

## 10. REFERENCES

Adverse Incidents Policy Alcohol & Drugs Policy Children's Safeguards Capability Policy and Procedure - Medical & Dental Staff Clear Sexual Boundaries Between Healthcare Professionals and Patients **Counter Fraud and Corruption Policy** EL(93)51 - Guidance for Staff on Relations with the Public and Media EL(95)42 - Code of Practice on Openness in the NHS EL(95)60 - Detailed Guidance on Code of Practice on Openness in the NHS GMC Guidelines on Confidentiality **Intimate Care and Sensitive Situations** Media Handling Policy NAHAT "Protecting Patients" - guidelines for handling staff complaints about patient care - 1985 NMC Code of Conduct Public Interest Disclosure Act 1998 Sickness Absence Staff Complaints (Grievance) Resolution Procedure.

## King's College Hospital NHS Foundation Trust

## 1. EQUALITY IMPACT ASSESSMENT FORM – INITIAL SCREENING

Service/Function/Policy	Directorate / Department	Assessor(s)	New or Existing Service	Date of Assessment	
Raising Concerns	Human Resources	Gemma Glanville	or Policy? Existing	March 2011	
(Whistleblowing)					
	this service / function / polic	•			
	ent (Marion Lorman/Gemma G	1			
	of the service / function / poli				
	aff, and also temporary staff a				
	ilities of staff and other worker				
	ise concerns about malpract			investigated and dealt with	
appropriately. It also include	s some appropriate external b	odies who may provide advic	e and support.		
1.2 Are there any accepted		ing Franciscular National Transfer			
	ed objectives? E.g. National Servite Dublic Interact Disclosure		Legislation		
	with Public Interest Disclosure				
	e or detract from achieving in		linguage to raise metters of as	20072	
	Staff aware of responsibilities y / function / have an impac				
[see Screening Assessment Guida		t in terms of race, disability	, gender, sexual orientation,	age and religion? Details:	
	erns and will be properly supp	orted Policy reassures that s	taff will not be victimised or ex	perience less favourable	
treatment.					
	current or planned activities	to address the impact.			
	new measures which would				
Make policy readily accessible to all staff via X drive and knowledge of policy discussed at local induction.					
Ensure all managers and staff are aware of their responsibilities within the policy.					
Promote policy changes via HR Brief and KWIKI/KingsWeb.					
1.8 Equality Impact Rating [low, medium, high*]:					
Race Age Disability Gender Religion Sexual Orientation					
*If you have rated the policy, service or function as having a high impact for any of these equality dimensions, it is necessary to carry					
out a detailed assessment and then complete section 2 of this form					
1.9 Date for next review: 2014					