

**APPENDICES 1 and 4 TO BE ADDED TO LATER**

## Freedom to Speak Up: Raising Concerns and Whistleblowing Policy

Document Change History (changes from previous issues of policy (if appropriate):

Version num	Page	Changes made with rationale and impact on practice	Date
1		Policy reformatted as per LUHFT template – no content changes	Aug 2020
2		Policy reformatted as per LUHFT template and in line with the 2022 version of the NHSE policy template and content.	May 2023

### Contents

1. Introduction .....	2
2. Purpose .....	2
3. Flow Chart.....	3
4. Speaking Up Process.....	4
What can I speak up about? .....	4
We want you to feel safe to speak up .....	4
Who can speak up? .....	4
Who can I speak up to? .....	4
How should I speak up? .....	6
What will we do? .....	7
5. Advice and support .....	8
6. Exceptions .....	9
7. Monitoring of Compliance.....	9
8. Equality, Diversity and Human Right Statement .....	9
9. Legal Requirements.....	9
Appendix 1: Contact details – who to speak up to & escalation route.....	11
Appendix 2: LUHFT Speaking Up Model .....	13
Appendix 3: Training.....	13
Appendix 4: Glossary of terms.....	14
Appendix 5:Control front sheet .....	15
Appendix 6: Equality Impact Assessment.....	16
Appendix 7: Roles and Responsibilities.....	20

## 1. Introduction – Speak up, we will listen

We welcome speaking up and we will listen. By speaking up at work you will be playing a vital role in helping us to keep improving our services for all patients and the working environment for our staff.

This policy is for all our workers. The NHS People Promise commits to ensuring that “we each have a voice that counts, that we all feel safe and confident to speak up, and take the time to really listen to understand the hopes and fears that lie behind the words”.

We want to hear about any concerns you have, whichever part of the organisation you work in. We know some groups in our workforce feel they are seldom heard or are reluctant to speak up. You could be an agency worker, bank worker, locum or student. We also know that workers with disabilities, or from a minority ethnic background or the LGBTQ+ community do not always feel able to speak up.

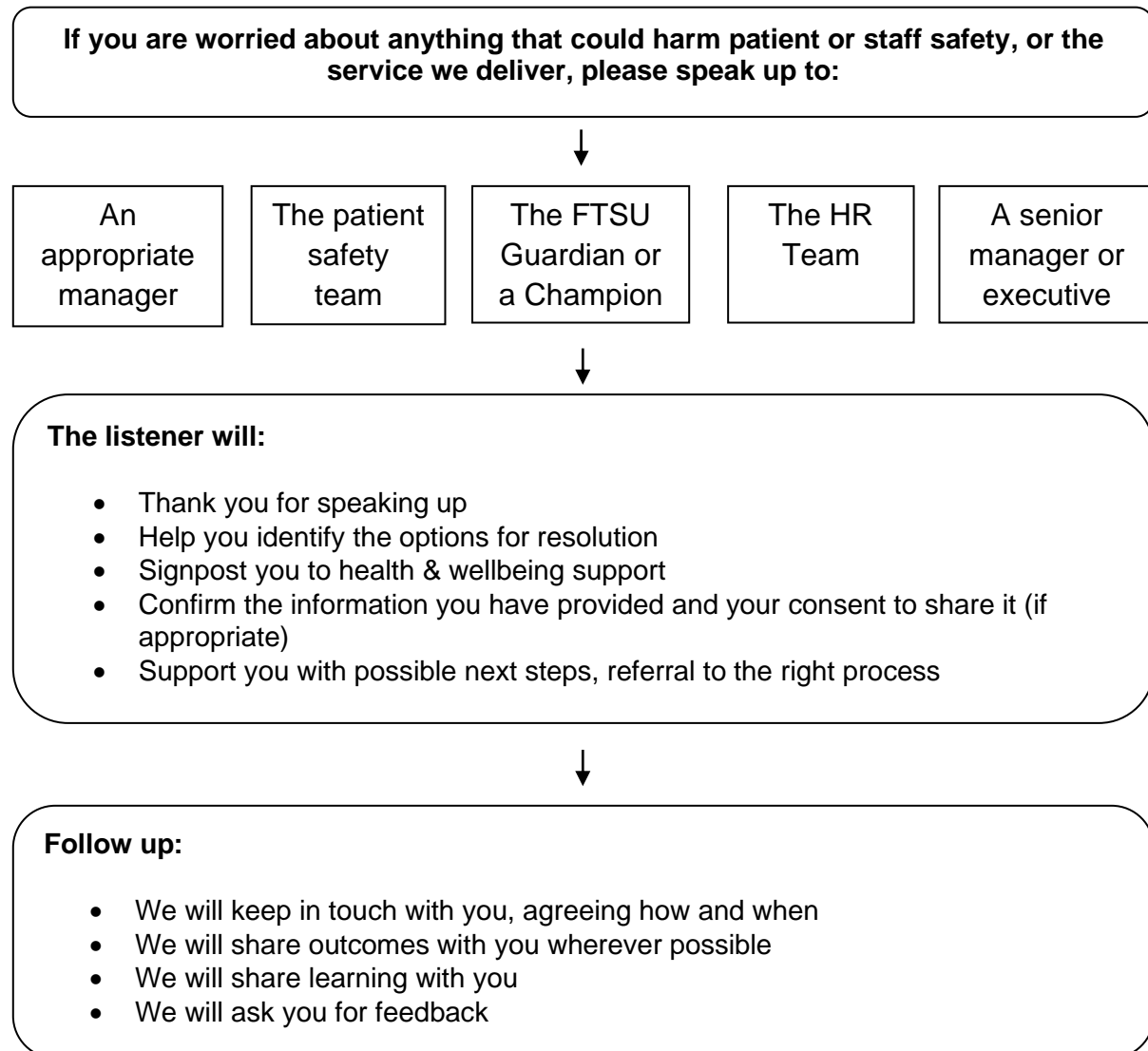
This policy is for all workers and we want to hear all our workers’ concerns.

We ask all our workers to complete the Freedom to Speak Up awareness role-specific training.

## 2. Purpose of this policy

All NHS organisations in England are required to adopt this national policy as a minimum standard to help normalise speaking up for the benefit of patients and workers. Its aim is to ensure all matters raised are captured and considered appropriately.

### 3. Flow Chart – What will happen when I speak up?



## 4. The speaking up process

### What can I speak up about?

You can speak up about anything that gets in the way of patient care or affects your working life. That could be something which doesn't feel right to you: for example, a way of working or a process that isn't being followed; you feel you are being discriminated against; or you feel the behaviours of others is affecting your wellbeing, or that of your colleagues or patients.

Speaking up is about all of these things.

Speaking up, therefore, captures a range of issues, some of which may be appropriate for other existing processes (for example, HR or patient safety/quality) That's fine. As an organisation, we will listen and work with you to identify the most appropriate way of responding to the issue you raise.

### We want you to feel safe to speak up

Your speaking up to us is a gift because it helps us identify opportunities for improvement that we might not otherwise know about.

We will not tolerate anyone being prevented or deterred from speaking up or being mistreated because they have spoken up.

### Who can speak up?

Anyone who works in NHS healthcare, including pharmacy, optometry and dentistry. This encompasses any healthcare professionals, non-clinical workers, receptionists, directors, managers, contractors, volunteers, students, trainees, junior doctors, locum, bank and agency workers, and former workers.

### Who can I speak up to?

#### Speaking up internally

Most speaking up happens through conversations with supervisors and line managers where challenges are raised and resolved quickly. We strive for a culture where that is normal, everyday practice and encourage you to explore this option – it may well be the easiest and simplest way of resolving matters.

However, you have other options in terms of who you can speak up to, depending on what feels most appropriate to you. These may include the following: (Contact details can be found in Appendix 1):

- **Senior manager or director** with responsibility for the subject matter you are speaking up about.
- **The patient safety team** or **clinical governance team** (where concerns relate to patient safety or wider quality).
- Local **counter fraud team** (where concerns relate to fraud).
- Our **Freedom to Speak Up Guardian** who can support you to speak up if you feel unable to do so by other routes. The guardian will ensure that people who speak up are thanked for doing so, that the issues they raise are responded to, and that the person speaking up receives feedback on the actions taken.
- A **Freedom to Speak Up Champion** who can listen to your concerns and questions and sign-post you to the most appropriate internal person or process that will help you to speak up. Champions are voluntary and work across the Trust. Check your dept for a local Speak Up Champion or find details of all the Champions [here](#).
- Our **HR team**
- Our **executive lead** responsible for Freedom to Speak Up they provide senior support for our speaking-up guardian and are responsible for reviewing the effectiveness of our FTSU arrangements.
- Our **non-executive lead** responsible for Freedom to Speak Up. This role is specific to organisations with boards and can provide more independent support for the guardian, provide a fresh pair of eyes to ensure that investigations are conducted with rigor, and help escalate issues where needed.

### Speaking up externally

If you do not want to speak up to someone within your organisation you can speak up externally to:

- Care Quality Commission (CQC) for quality and safety concerns about the services it regulates – you can find out more about how the CQC handles concerns [here](#).
- NHS England for concerns about:
  - GP surgeries
  - dental practices

- optometrists
- pharmacies
- how NHS trusts and foundation trusts are being run (this includes ambulance trusts and community and mental health trusts)
- NHS procurement and patient choice
- the national tariff.

NHS England may decide to investigate your concern themselves, ask your employer or another appropriate organisation to investigate (usually with their oversight) and/or use the information you provide to inform their oversight of the relevant organisation. The precise action they take will depend on the nature of your concern and how it relates to their various roles.

Please note that neither the Care Quality Commission nor NHS England can get involved in individual employment matters, such as a concern from an individual about feeling bullied.

- NHS Counter Fraud Agency for concerns about fraud and corruption, using their online reporting form or calling their freephone line 0800 028 4060.

If you would like to speak up about the conduct of a member of staff, you can do this by contacting the relevant professional body such as the General Medical Council, Nursing and Midwifery Council, Health & Care Professions Council, General Dental Council, General Optical Council or General Pharmaceutical Council.

### **Making a 'protected disclosure'**

A protected disclosure is defined in the Public Interest Disclosure Act 1998. This legislation allows certain categories of worker to lodge a claim for compensation with an employment tribunal if they suffer as a result of speaking up. The legislation is complex and to qualify for protection under it, very specific criteria must be met in relation to who is speaking up, about what and to whom. To help you consider whether you might meet these criteria, please seek independent advice from the Protect or a legal representative.

### **How should I speak up?**

You can speak up to any of the people listed above in person, by phone or in writing (including email).

The most important aspect of your speaking up is the information you can provide, not your identity.

You have a choice about how you speak up:

- **Openly:** you are happy that the person you speak up to knows your identity and that they can share this with anyone else involved in responding.
- **Confidentially:** you are happy to reveal your identity to the person you choose to speak up to on the condition that they will not share this without your consent.
- **Anonymously:** you do not want to reveal your identity to anyone. This can make it difficult for others to ask you for further information about the matter and may make it more complicated to act to resolve the issue. It also means that you might not be able to access any extra support you need and receive any feedback on the outcome.

In all circumstances, please be ready to explain as fully as you can the information and circumstances that prompted you to speak up

## What will we do?

The matter you are speaking up about may be best considered under a specific existing policy/process; for example, our process for dealing with bullying and harassment. If so, we will discuss that with you. If you speak up about something that does not fall into an HR or patient safety incident process, this policy ensures that the matter is still addressed.

What you can expect to happen after speaking up is shown in **Section 3. Flow Chart** on page 4.

## Resolution and investigation

We support our managers/supervisors to listen to the issue you raise and take action to resolve it wherever possible. In most cases, it's important that this opportunity is fully explored, which may be with facilitated conversations and/or mediation.

Where an investigation is needed, this will be objective and conducted by someone who is suitably independent (this might be someone outside your organisation or from a different part of the organisation) and trained in investigations. It will reach a conclusion within a reasonable timescale (which we will notify you of), and a report will be produced that identifies any issues to prevent problems recurring.

Any employment issues that have implications for you/your capability or conduct identified during the investigation will be considered separately.

## Communicating with you

We will treat you with respect at all times and will thank you for speaking up. We will discuss the issues with you to ensure we understand exactly what you are worried

about. If we decide to investigate, we will tell you how long we expect the investigation to take and agree with you how to keep you up to date with its progress. Wherever possible, we will share the full investigation report with you (while respecting the confidentiality of others and recognising that some matters may be strictly confidential; as such it may be that we cannot even share the outcome with you). Where appropriate an executive summary may be provided, however if there is no case to answer in an HR investigation, no report can be shared.

### How we learn from your speaking up

We want speaking up to improve the services we provide for patients and the environment our staff work in. Where it identifies improvements that can be made, we will ensure necessary changes are made, and are working effectively. Lessons will be shared with teams across the organisation, or more widely, as appropriate.

### Review

We will seek feedback from workers about their experience of speaking up. We will review the effectiveness of this policy and our local process annually, with the outcome published and changes made as appropriate.

### Senior leaders' oversight

Our most senior leaders will receive a report quarterly at public board meeting, providing a thematic overview of speaking up by our staff to our FTSU guardian.

## 5. Advice and support

You can find out about the local support available to you in our Life at LUHFT support pack [here](#). Your local staff networks can also be a valuable source of support.

You can also access a range of health and wellbeing support via NHS England:

- [Support available for our NHS people.](#)
- [Looking after you: confidential coaching and support for the primary care workforce.](#)
- NHS England has a [Speak Up Support Scheme](#) that you can apply to for support. You can also contact the following organisations:
- [Speak Up Direct](#) provides free, independent, confidential advice on the speaking up process.
- The charity [Protect](#) provides confidential and legal advice on speaking up.
- The [Trades Union Congress](#) provides information on how to join a trade union.
- [The Law Society](#) may be able to point you to other sources of advice and support.



- [The Advisory, Conciliation and Arbitration Service](#) gives advice and assistance, including on early conciliation regarding employment disputes.
- If a line manager, or a member of HR staff supporting a line manager, becomes aware of a concern raised regarding suspected misappropriation of controlled drugs, they should report this immediately to the Chief Pharmacist / Controlled Drugs Accountable Officer (CDAO) via the Medicines Safety Officer email at [luhft.mso@liverpoolft.nhs.uk](mailto:luhft.mso@liverpoolft.nhs.uk). Put “Potential CD Diversion” in the subject title. This should include suspected but unconfirmed theft of controlled drugs. Do not wait until an investigation has taken place.

## 6. Exceptions

No exceptions

## 7. Monitoring of Compliance

Minimum requirement to be monitored	Process for monitoring e.g. audit/ review of incidents/ performance management	Job title of individual(s) responsible for monitoring and developing action plan	Minimum frequency of monitoring	Name of committee responsible for review of results and action plan	Job title of individual/ committee responsible for monitoring implementation of action plan
Report providing assurance on the process and controls set out in the policy	Review of compliance against policy procedures together with MIAA guidance for Audit Committees	Chief People Officer	Annual	Audit Committee	Audit Committee
Report provided details of activity associated with the Trust's FTSUG service	Quarterly update of activity and assurance associated with the Trust's Freedom to Speak Up (FTSU) Service	Chief People Officer	Quarterly	Board of Directors	Board of Directors

## 8. Equality, Diversity and Human Right Statement

The Trust is committed to an environment that promotes equality and embraces diversity in its performance both as a service provider and employer. It will adhere to legal and performance requirements and will mainstream Equality, Diversity and Human Rights

principles through its policies, procedures, service development and engagement processes. This SOP should be implemented with due regard to this commitment.

## 9. Legal Requirements

This document meets legal and statutory requirements of the EU General Data Protection Regulation (EU 2016/679) and all subsequent and prevailing legislation. It is consistent with the requirements of the NHS Executive set out in Information Security Management: NHS Code of Practice (2007) and builds upon the general requirements published by NHS Digital/Connecting for Health (CfH).

## Appendices

### Appendix 1: Who to speak up to contact details, and escalation route

Our Director of Patient Safety is:

Neal Jones

Tel: 0151 7064058

Email: [Neal.Jones@liverpoolft.nhs.uk](mailto:Neal.Jones@liverpoolft.nhs.uk)

Our Director of Quality Governance is:

Claire Alexander

Tel: 0151 7062285

Email: [Claire.Alexander@liverpoolft.nhs.uk](mailto:Claire.Alexander@liverpoolft.nhs.uk)

Our Anti-Fraud Specialist, provided through MIAA (Mersey Internal Audit Agency), is

Phillip Leong

Tel: 07721237352

Email: [Phillip.Leong@miaa.nhs.uk](mailto:Phillip.Leong@miaa.nhs.uk)

Our Freedom to Speak Up Guardian is:

Lorraine Heaton

Tel: 07794071021 or 0151 7062843

Email: [lorraine.heaton@liverpoolft.nhs.uk](mailto:lorraine.heaton@liverpoolft.nhs.uk)

You can find out more about the FTSU guardian and Champions roles in the Freedom to Speak Up intranet page or by clicking [here](#).

Our HR Team can be reached on Tel: 0151 529 3539

Our Executive FTSU Lead is:

Heather Barnett – Chief People Officer

Email: [Heather.Barnett@liverpoolft.nhs.uk](mailto:Heather.Barnett@liverpoolft.nhs.uk)

Our Non-Executive FTSU Lead is:

Ibrahim Ismail

Email: [Ibrahim.Ismail@liverpoolft.nhs.uk](mailto:Ibrahim.Ismail@liverpoolft.nhs.uk)

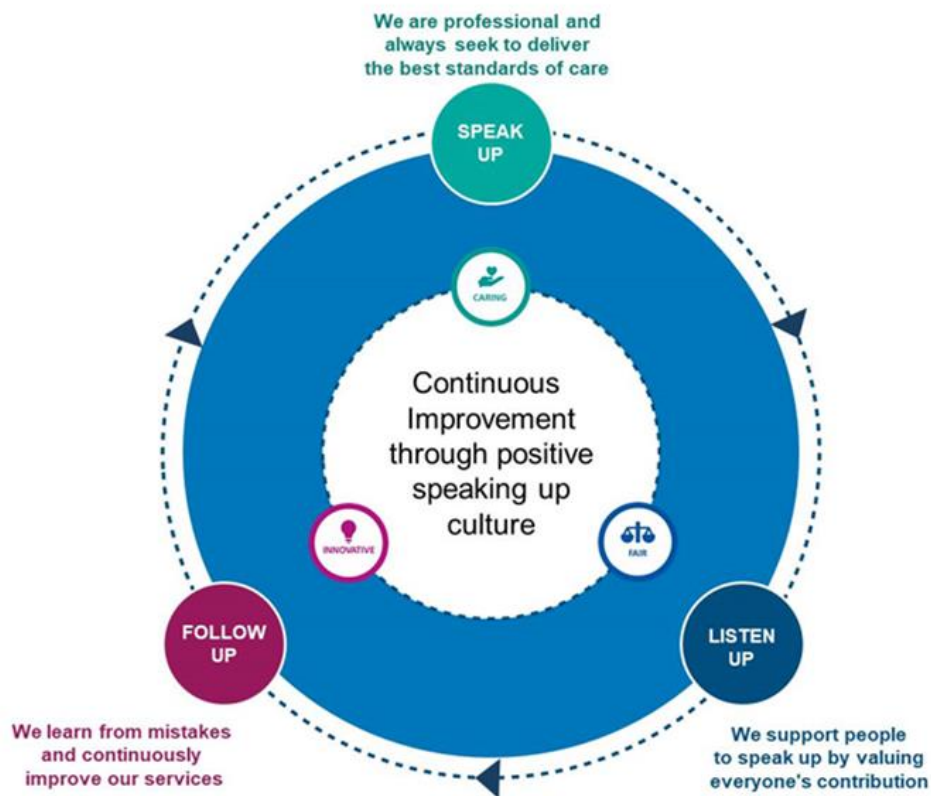


**Escalation infographic**

To be added later

## Appendix 2: LUHFT speaking up model

A safe and effective speaking up culture depends upon us all behaving in a way that befits our Trust values when speaking up, listening up and following up. The Trust describes it's vision for continuous improvement through speaking up as follows:



## Appendix 3: Training

The Freedom to Speak Up Guardian is trained by and registered with the National Guardians Office.

Freedom to Speak Up Champions are trained by the Freedom to Speak Up Guardian.

All Trust workers must do the Freedom to Speak Up awareness training module via their ESR. This is based upon the National Guardians Office 'Speak Up' training. Learners at the Trust, as well as new employees receive this training as part of their Induction and on-boarding.

The National Guardians Office has developed online training modules available via <https://www.e-lfh.org.uk> as follows:

- Speak Up (equivalent to the Trust awareness training)
- Listen Up – specifically for managers
- Follow Up – specifically for senior leaders

#### Appendix 4: Glossary of Terms

To be added later

### Appendix 5: Control Front Sheet

<b>Author with contact details</b>	Freedom to Speak Up Guardian Lorraine Heaton, <a href="mailto:lorraine.heaton@liverpoolft.nhs.uk">lorraine.heaton@liverpoolft.nhs.uk</a> , 07794 071021		
<b>Lead Executive/ Senior Manager</b>	Chief People Officer Heather Barnett, <a href="mailto:heather.barnett@liverpoolft.nhs.uk">heather.barnett@liverpoolft.nhs.uk</a>		
<b>Original Issue date</b>	HR colleagues, please complete		
<b>Issue Date:</b>			
<b>Approval Group</b>			
<b>Consultation</b>			
<b>Location of Staff applicable to</b>	All staff across LUHFT	<b>Staff groups applicable to</b>	All Staff, students, contractors to Trust
<b>Equality, Diversity And Human Right Statement</b>	The Trust is committed to an environment that promotes equality and embraces diversity in its performance both as a service provider and employer. It will adhere to legal and performance requirements and will mainstream Equality, Diversity and Human Rights principles through its policies, procedures, service development and engagement processes. This procedure should be implemented with due regard to this commitment.		
<b>To be read In conjunction with / Associated Documents:</b>	<ul style="list-style-type: none"> <li>▪ Bullying &amp; Harassment Policy</li> <li>▪ Disciplinary Policy</li> <li>▪ Grievance Policy &amp; Procedure</li> <li>▪ Ant-Fraud, Bribery &amp; Corruption Policy</li> </ul>	<b>Information Classification Label</b>	<input type="checkbox"/> <b>NHS Confidential</b> <input type="checkbox"/> <b>NHS Protect</b> <input checked="" type="checkbox"/> <b>Unclassified</b>

<b>Access to Information</b>	To access this document in another language or format please contact the policy author.
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### Appendix 6: Equality Impact Assessment

<b>Title</b>	
<b>Strategy/Policy/Standard Operating Procedure</b>	
<b>Service change (Inc. organisational change/QEP/ Business case/Project)</b>	
<b>Completed by</b>	
<b>Date Completed</b>	

<b>Description</b> <i>(provide a short overview of the principle aims/objectives of what is being proposed/changed/introduced and the impact of this to the organisation)</i>

<b>Who will be affected</b> <i>(Staff, patients, visitors, wider community including numbers?)</i>

The Equality Analysis template should be completed in the following circumstances:

- **Considering developing a new policy, strategy, function/service or project(Inc. organisational change/Business case/ QEP Scheme);**
- **Reviewing or changing an existing policy, strategy, function/service or project (Inc. organisational change/Business case/ QEP Scheme):**



- If no or minor changes are made to any of the above and an EIA has already been completed then a further EIA is not required and the EIA review date should be set at the date for the next policy review;
- If no or minor changes are made to any of the above and an EIA has NOT previously been completed then a new EIA is required;
- Where significant changes have been made that do affect the implementation or process then a new EIA is required.

Please note the results of this Equality Analysis will be published on the Trust website in accordance with the Equality Act 2010 duties for public sector organisations

Section 1 should be completed to analyse whether any aspect of your paper/policy has any impact (positive, negative or neutral) on groups from any of the protected characteristics listed below.

*When considering any potential impact you should use available data to inform your analysis such as PALS/Complaints data, Patient or Staff satisfaction surveys, staff numbers and demographics, local consultations or direct engagement activity. You should also consult available published research to support your analysis.*

### Section 1 – Initial analysis

Equality Group	Any potential impact?  Positive, negative or neutral	Evidence  <i>(For any positive or negative impact please provide a short commentary on how you have reached this conclusion)</i>
<b>Age</b> <i>(Consider any benefits or opportunities to advance equality as well as barriers across age ranges. This can include safeguarding consent, care of the elderly and child welfare)</i>		
<b>Disability</b> <i>(Consider any benefits or opportunities to advance equality as well as impact on attitudinal, physical and social barriers)</i>		
<b>Gender Reassignment</b> <i>(Consider any benefits or opportunities to advance equality as well as any impact on transgender or transsexual people. This can include issues relating to privacy of data)</i>		
<b>Marriage &amp; Civil Partnership</b> <i>(Consider any benefits or opportunities to advance equality as well as any barriers impacting on same sex couples)</i>		

<p><b>Pregnancy &amp; Maternity</b> <i>(Consider any benefits or opportunities to advance equality as well as impact on working arrangements, part time or flexible working)</i></p>		
<p><b>Race</b> <i>(Consider any benefits or opportunities to advance equality as well as any barriers impacting on ethnic groups including language)</i></p>		
<p><b>Religion or belief</b> <i>(Consider any benefits or opportunities to advance equality as well as any barriers effecting people of different religions, belief or no belief)</i></p>		
<p><b>Sex</b> <i>(Consider any benefits or opportunities to advance equality as well as any barriers relating to men and women e.g.: same sex accommodation)</i></p>		
<p><b>Sexual Orientation</b> <i>(Consider any benefits or opportunities to advance equality as well as barriers affecting heterosexual people as well as Lesbian, Gay or Bisexual)</i></p>		

If you have identified any **positive** or **neutral** impact then no further action is required, you should submit this document with your paper/policy in accordance with the governance structure.

You should also send a copy of this document to the equality impact assessment email address

If you have identified any **negative** impact you should consider whether you can make any changes immediately to minimise any risk. This should be clearly documented on your paper cover sheet/Project Initiation Documents/Business case/policy document detailing what the negative impact is and what changes have been or can be made.

**If you have identified any negative impact that has a high risk of adversely affecting any groups defined as having a protected characteristic then please continue to section 2.**

## Section 2 – Full analysis

If you have identified that there are potentially detrimental effects on certain protected groups, you need to consult with staff, representative bodies, local interest groups and customers that belong to these groups to analyse the effect of this impact and how it can be negated or minimised. There may also be published information available which will help with your analysis.

Is what you are proposing subject to the requirements of the <a href="#">Code of Practice on Consultation</a> ?	Y/N
Is what you are proposing subject to the requirements of the Trust's Workforce Change Policy?	Y/N
Who and how have you engaged to gather evidence to complete your full analysis? (List)	
What are the main outcomes of your engagement activity?	
What is your overall analysis based on your engagement activity?	

### Section 3 – Action Plan

You should detail any actions arising from your full analysis in the following table; all actions should be added to the Risk Register for monitoring.

Action required	Lead name	Target date for completion	How will you measure outcomes

Following completion of the full analysis you should submit this document with your paper/policy in accordance with the governance structure.

You should also send a copy of this document to the equality impact assessment email address

### Section 4 – Organisation Sign Off

Name and Designation	Signature	Date
Individual who reviewed the Analysis		
Chair of Board/Group approving/rejecting proposal		
Individual recording EA on central record		

## Appendix 7: Roles and Responsibility

Role	Responsibility
<b>Board</b>	<p>The Chief Executive Officer has overall accountability. They, along with the Executive and Non-Executive Lead are committed to setting the highest standards of quality, probity, openness and accountability. In demonstrating this commitment, they encourage members of staff who have serious concerns about any part of their work to come forward and speak up to them.</p> <p>The Board is responsible for monitoring this procedure and the concerns/issues that are raised as a result.</p>
<b>Freedom to Speak Up Guardian</b>	<p>To ensure appropriate systems and processes are in place for staff to speak up safely.</p> <p>To ensure application of and compliance with this policy.</p> <p>To develop appropriate data to report and provide assurance to Board.</p> <p>To meet regularly with the Chief Executive, Executive Lead and Senior Independent Director to highlight good practice and risks associated with the FTSU of staff in the organisation.</p> <p>To guide staff as to how to speak up safely and to ensure the route for concerns to be explored is followed.</p>
<b>Managers and Leaders</b>	<p>To take swift and appropriate action if a concern is raised. All serious concerns that require investigation will be escalated by managers to the relevant executive director and, where appropriate, recorded on datix. HR will also be notified if the nature of the concern requires it.</p>
<b>Staff</b>	<p>Have the professional responsibility to report any legitimate concerns to managers about malpractice or concerns.</p> <p>If you are unsure if this is appropriate policy, please seek advice from your manager, the Freedom to Speak Up Guardian, a Speak Up Champion, or a Trade Union Representative.</p>
<b>Business Human Resources Service</b>	<p>Has the responsibility to monitor the implementation of the policy and to ensure that procedures are managed fairly and consistently across the Trust.</p> <p>Will provide advice, guidance and support to line managers on the operation of this policy.</p>
<b>Trade Union Representatives</b>	<p>To advise the employee of the options open to them and the relevant policy to follow.</p>

	<p>To support the employee who wishes to raise a concern or a whistleblowing complaint to the attention of the Trust.</p> <p>In the event that an employee wishes to remain anonymous, the representative may act as an advocate in the first instance if appropriate. Staffside representatives will be afforded the same protection as the staff they are supporting.</p> <p>When receiving information that has legal implications for the Trust, to report in a timely manner to a senior manager of the Trust.</p>
<p><b>National Guardian</b></p>	<p>Independently review how staff have been treated having raised a concern, where NHS Trusts may have failed to follow good practice, working with some of the bodies listed above to take action where needed.</p>