SPEAK UP POLICY
(PREVIOUSLY RAISING CONCERNS AT WORK POLICY AND PROCEDURE)

<table>
<thead>
<tr>
<th>Version:</th>
<th>1.1</th>
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<tbody>
<tr>
<td>Ratified by:</td>
<td>Chair’s Action</td>
</tr>
<tr>
<td>Date ratified:</td>
<td>26 September 2012</td>
</tr>
<tr>
<td>Approving Committee/Group (Date):</td>
<td>None</td>
</tr>
<tr>
<td>Date Approved by Medicines Management Committee: (NB: All Procedural Documents which include details of drugs or their management must be approved by the Medicines Management Committee)</td>
<td>N/A</td>
</tr>
<tr>
<td>Name and Title of originator/author:</td>
<td>Martin Knight, HR Business Partner</td>
</tr>
<tr>
<td>Date issued:</td>
<td>October 2012</td>
</tr>
<tr>
<td>Review due date:</td>
<td>September 2015</td>
</tr>
<tr>
<td>Target audience:</td>
<td>All Staff</td>
</tr>
<tr>
<td>Superseded documents:</td>
<td>Raising Concerns at Work Policy and Procedure v1</td>
</tr>
<tr>
<td>Relevant Standards(e.g. NHSLA, CQC, HSE):</td>
<td>NHSLA Standard 2.2</td>
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<td>Acknowledgements</td>
<td>None</td>
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<tr>
<td>Key Words</td>
<td>Speak up, whistle blowing, raising concerns</td>
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1 INTRODUCTION

All of us at one time or another have concerns about what is happening at work. Usually these are easily resolved. However, when the concern feels serious because it is about a possible danger, professional misconduct or financial malpractice that might affect patients (and in particular our five promises to patients in our “Here for You” Standards Handbook), colleagues or the Trust itself, it can be difficult to know what to do.

You may be worried about raising such an issue and may think it best to keep it to yourself, perhaps feeling it is none of your business or that it is only a suspicion. You may feel that raising the matter would be disloyal to colleagues, to managers or to the organisation. You may have said something but found that you have spoken to the wrong person or raised the issue in the wrong way and are not sure what to do next.

The Board of Croydon Health Services is committed to running the organisation in the best way possible and to do so we need your help. We have updated this policy to reassure you that it is safe and acceptable to speak up and to enable you to raise any concern you may have at an early stage and in the right way.

In September 2010 the NHS Staff Council agreed a new contractual right and duty for NHS staff to raise concerns about serious risks at work that are considered to be in the public interest. This new right, which is now part of the NHS Terms and Conditions of Service Handbook (Section 21), reinforces the existing duty for NHS Staff to raise any serious concerns they have with their employer.

The Trust’s Promises to the People of Croydon

This duty agreed by the NHS Staff Council is in line with our promises to the people of Croydon detailed in our “Here for you” Standards Handbook:

- You feel cared for by helpful welcoming staff, who respect you as an individual
- You feel in safe hands with highly professional staff who work well together in clean clinics and hospitals
- You feel confident in your treatment from skilled teams of compassionate clinicians who listen to you
- You feel we value your time with convenient appointments, minimal waiting and care closer to home
- You feel it’s getting better all the time, as we continue to improve our services

Our “here for you” standards apply to every one of us, in everything we do, for the people we serve, with colleagues and are incorporated into everything we do from recruitment, training and development to business planning, measurement and staff awards.

It is the responsibility of all staff to speak up to ensure we keep these promises to the people we serve. If you see or personally experience a member of staff acting in any way that is not in line with these promises then it is your responsibility to speak up about this. Examples include being unwelcoming, rude, impatient, uncaring, unhelpful, or lacking compassion and sensitivity, being unfriendly and not treating patients with dignity and respect.

Patients, or visitors to any of the Trust bases (including the hospital setting, community clinics, health centres or patient homes) who wish to raise a concern should address any concerns to the Patient Advisory Liaison Service (PALS) office, contact 020 8401 3210.
Under the Public Interest Disclosure Act 1998 (www.pcaw.co.uk/law/uklegislation.htm) employees who raise concerns because they honestly and reasonably suspect that corruption and malpractice has occurred, or is likely to occur, have statutory protection against victimisation and dismissal.

If something is troubling you that you think we should know about or look into, please use this policy and procedure. If, however, you wish to make a complaint about a personal issue concerning your employment or how you have been treated, please use the Grievance Policy or Dignity at Work Policy (see 2.0 below).

This policy is intended to complement professional and ethical guidelines of bodies such as the NMC, GMC and HPC, as well as other professional organisations.

2 PURPOSE

The purpose of this policy is to encourage and provide the means for all employees, students, contractors, bank, agency workers and volunteers to raise and discuss genuine concerns about possible wrongdoing, corruption, malpractice and danger that is actually happening, took place in the past, or is likely to happen in the future. The following list is not exhaustive but gives examples for illustration:

- A breach of the five patient promises
- A criminal offence has been, is being, or is likely to be committed including fraudulent activity or financial / clinical malpractice
- A breach of legal obligations
- A miscarriage of justice has occurred
- There is a risk to the health and safety of an individual
- Either environmental damage or a risk of such damage
- Information about any of the above has been or is likely to be deliberately concealed.

This policy is concerned with risks, malpractice or wrongdoing that affects others. It could be something which adversely affects patients, the public, other staff or the organisation itself. A grievance on the other hand, is a personal complaint about an individual’s own employment situation (ie in line with this policy an individual raises a concern as a witness, whereas a grievance is where the individual is a complainant).

There may be areas of concern not covered above which should be raised under the policy.

This procedure excludes issues covered by separate procedures/policies, including the:

- Grievance Policy
  To be used when members of staff feel unfairly treated within the workplace by a manager or colleagues
- Dignity at Work Policy
  To be used when staff perceive they are being bullied or harassed by a manager or colleagues
- Incident Reporting policy
  To be used when actual or potential (“Near Misses”) accidents or incidents occur in the workplace
It may be appropriate to use the Speak Up Policy if, after having made use of the above polices, issues are identified that would be more appropriately dealt with under this policy.

**Assurance to Staff**

The Trust will take seriously any concerns raised by an employee and other groups listed above, in good faith, and aim to investigate the concern in the shortest time possible.

The employee raising the concern will be protected from potential reprisals or victimisation. This may require temporary relocation of either the member of staff raising concerns or a member of staff being investigated. Any evidence that harassment or victimisation is occurring will be considered a serious disciplinary offence and will be dealt with under the appropriate policy.

The employee speaking up to raise a concern will be made aware of the arrangements for the investigation. They will be provided with support, as appropriate (e.g. counselling, 1:1 time with a manager or HR); will be kept regularly updated of progress, and wherever possible will be informed of the resolution.

Any employee participating in the investigation may be accompanied or represented by his or her trade union / professional organisation representative or a work colleague / Respect Adviser. It will be the employee's responsibility to contact their representative and ensure their attendance at interviews, etc.

Employees participating in the investigation will be expected to maintain confidentiality regarding the investigation.

In extreme circumstances (e.g. ongoing fraud) the Trust reserves the right not to inform the employee/s being investigated until absolutely necessary.

**Confidentiality Issues when raising concerns**

Employees have a duty of confidentiality to patients and clients. Unauthorised disclosure of personal information about any patient or client will be regarded as an extremely serious matter, which potentially warrants disciplinary action.

An employee will be protected under this policy and the Public Interest Disclosure Act 1998 if they have an honest and reasonable suspicion that malpractice has occurred and/or is occurring or is likely to occur.

All staff involved in the investigation will be required to maintain confidentiality in relation to the issues being raised.

Deliberate abuse of this policy through the raising of concerns falsely and maliciously could result in disciplinary action.

**Disclosure of Concerns to the Media or the Public**

Disclosures to the Media or Public should only be considered when all other channels outlined in this policy have been exhausted. It is essential that members of staff pursue their concerns internally first and seek to achieve a satisfactory resolution. This ensures that patients and confidentiality can be maintained and issues are dealt with constructively.

The Public Interest Disclosure Act directs the worker towards raising the matter internally in the first place and where there is an internal raising concern procedure, to use it. If this procedure is not used in the first place it may result in disciplinary action. However the Act will protect workers where they make external disclosures in a range of circumstances. If a worker chooses to disclose
information in a way that is not covered by the Act, they will lose their protection.

Unauthorised disclosure of information about any patient or staff member will be regarded as misconduct and may result in disciplinary action being taken.

Please also refer to the Media and E-Media Policy

**Independent Advice and Support**

Staff who are unsure whether to use this policy or want independent advice at any stage, may contact:

- The independent charity Public Concern at Work on 020 7404 6609. There are lawyers available who can give free confidential advice at any stage about how to raise a serious concern.
- Their union/professional association

Staff can also contact the Trust staff counselling service on 020 8401 3105 for confidential support.

**3 DEFINITIONS**

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>NMC</td>
<td>Nursing and Midwifery Council</td>
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<tr>
<td>GMC</td>
<td>General medical Council</td>
</tr>
<tr>
<td>HPC</td>
<td>Health Professionals Council</td>
</tr>
<tr>
<td>DM</td>
<td>Designated Manager (Director of HR and OD)</td>
</tr>
<tr>
<td>I.O</td>
<td>Investigating Officer</td>
</tr>
<tr>
<td>HRBP</td>
<td>Human Resources Business Partner</td>
</tr>
</tbody>
</table>

**4 ACCOUNTABILITIES AND RESPONSIBILITIES**

**Employee:** All staff have a duty to raise any serious concerns they have with their employer.

**Line Manager:** To ensure that matters raised by a member of their staff is actioned promptly and appropriately in line with the timescales set out in this policy

**Human Resources:** To access the Speak Up email on a weekly basis and to log all issues and concerns raised and actions taken.

**Designated Manager:** See section 5.7

**TMG/POD:** To formally review the operation of this policy on a 6 monthly basis to ensure concerns raised are being managed appropriately and that lessons learnt have been incorporated into the daily workings of the Trust.

**5 PROCEDURE/COURSE OF ACTION REQUIRED**

**5.1 How to Raise a Concern**

Using the Informal Procedure

In line with the Trust’s five promises to the people of Croydon, when a member of staff witnesses poor behaviours, practice or attitudes towards patients or staff they may wish to challenge the
individual themselves and / or report it to their line manager (where this is appropriate). Inappropriate behaviour includes being unwelcoming, rude, impatient, uncaring, unhelpful, lacking compassion and sensitivity, unfriendly and not treating patients with dignity and respect.

It is expected that most issues will be dealt with informally, ie by speaking to the employee themselves and / or raising it with their line manager.

If no satisfactory response is received from their line manager then they should raise the matter with their line manager’s manager.

If the staff member feels that the issue is of a highly sensitive and/or serious nature or that the manager is personally involved or implicated in the issue of concern, or no satisfactory response is received from their line manager / line managers manager then the approach should be made as a formal procedure (see below).

5.2 Using the Formal Procedure

Examples include fraudulent use of resources, clinical or financial malpractice or abuse of patients.

The formal procedure should be used if:

- On raising the concern with the line manager / line managers manager, no satisfactory action is taken
- The employee believes the manager is involved in the issue being raised
- The issues is of a highly sensitive or serious nature
- The person raising the concern is not directly employed by the Trust e.g. contractors.

To report an issue of concern under the formal procedure, members of staff should contact the “Designated Manager” (Director of Human Resources & Organisation Development) using one of the following methods:

- By Email – speakuppolicy@mayday.nhs.uk
- By Telephone – 020 8401 3363
- By Letter – Speak Up Policy – Private & Confidential
  Director of Human Resources & Organisation Development
  Mayday House
  Croydon Health Services NHS Trust
  London Road
  Croydon
  CR7 7YE

The email address will be accessed regularly by designated staff within the HR Department as agreed by the Director of HR and OD. A log will be kept of all issues and concerns raised and actions taken.

See 5.3 below re anonymous calls, emails or letters received.

5.3 Raising Concerns in Confidence

Staff who raise a concern under this policy may not want their identity to be disclosed. If the concern cannot be explored and dealt with without revealing the staff member’s identity, consent for disclosure would precede further investigation.

Concerns raised anonymously make it difficult to investigate therefore anonymous calls and emails received will be forwarded to the Director of Governance for logging and review at the Trust Management Group.
5.4 Raising Concerns with External Bodies

Whilst the policy provides reassurance that concerns can be raised internally, the Trust would rather staff raised concerns with an appropriate regulator or body than not at all. Provided staff are acting in good faith and have evidence to back up their concern, they can also contact:

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Phone Number</th>
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<tbody>
<tr>
<td>Public Concern at Work</td>
<td>020 7404 6609</td>
</tr>
<tr>
<td>Audit Commission</td>
<td>020 7828 1212</td>
</tr>
<tr>
<td>Care Quality Commission</td>
<td>020 7448 9200</td>
</tr>
<tr>
<td>NHS Counter Fraud and Security Management Services (CFSMS)</td>
<td>020 7895 4500</td>
</tr>
<tr>
<td>Local Counter Fraud Specialist</td>
<td>020 7351 8887</td>
</tr>
<tr>
<td>Monitor</td>
<td>020 7340 2400</td>
</tr>
<tr>
<td>National Patient Safety Agency (NPSA)</td>
<td>020 7062 1620</td>
</tr>
<tr>
<td>Environment Agency</td>
<td>0800 807 060</td>
</tr>
<tr>
<td>Health &amp; Safety Executive</td>
<td>0845 345 0055</td>
</tr>
<tr>
<td>Health Professions Council</td>
<td>020 7840 9802</td>
</tr>
<tr>
<td>Nursing &amp; midwifery Council</td>
<td>020 7637 7181</td>
</tr>
<tr>
<td>General Medical Council</td>
<td>0161 923 6602</td>
</tr>
<tr>
<td>General Dental Council</td>
<td>020 7887 3800</td>
</tr>
<tr>
<td>General Optical Council</td>
<td>020 7580 3898</td>
</tr>
<tr>
<td>General Chiropractic Council</td>
<td>020 7713 5155</td>
</tr>
<tr>
<td>General Osteopathic Council</td>
<td>020 7357 6655</td>
</tr>
<tr>
<td>Royal Pharmaceutical Society</td>
<td>020 7735 9141</td>
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5.5 Investigation Under the Informal Procedure (See Appendix B)

Should a line manager receive an issue of concern from a member of staff under the informal procedure of this policy, they are required to:

- Acknowledge receipt of the concern raised through meeting with the member of staff to communicate the Trust’s commitment to tackling issues of concern and gain additional information if required. This should be followed up in writing, normally within 5 working days.

- Investigate the issue of concern in a timely, sensitive, confidential and thorough manner.

- Report back to the member of staff who raised the issue of concern, detailing the findings of the investigation and what action will be taken if any (where appropriate).

5.5.1 Appeal

If the member of staff who raised a concern is unhappy with the response, they may appeal to their line manager’s manager or raise the issue through the formal process.

If the manager feels that they are unable to carry out the investigation they should contact the Designated Manager (see section 5.6 below) as soon as is practical, with the member of staff’s consent.

At all stages written records of the investigation process and any communication relating to it should be kept.

In case of suspected fraud, the Director of Finance must be made aware of the concern and they will contact the Local Counter Fraud Specialist to ensure that the investigation complies with the provisions of the Directorate of Counter Fraud. If the Director of Finance is involved or suspected to be involved the NHS Counter Fraud and Security Management Services / Local Counter Fraud
Specialist must be contacted directly by the manager (contact details on page 9).

5.6 Investigation Under the Formal Procedure (See Appendix C)

The Designated Manager will arrange for any concerns raised to be formally investigated appropriately.

Receipt of concerns raised, will be responded to, in writing, within five working days.

The Designated Manager, should inform the Local Counter Fraud Specialist of any allegations that concern improper or unauthorised use of public or other funds, fraud or financial irregularity to ensure that the investigation is undertaken in line with the provisions of the Directorate of Counter Fraud. If the designated manager is involved or is suspected to be involved, the investigating officer must inform the Local Counter Fraud Specialist.

The Designated Manager will inform the Medical Director, Director of Nursing or the appropriate Head of Department, of allegations that concern professional conduct.

The Designated Manager will inform the relevant Director, Associate Director Operations/ Associate Director of Nursing & Midwifery of the concern raised (if appropriate).

At the outset of the investigation an investigating officer, Associate Director, Directorate Manager or Matron level, who is from a different directorate from the area being investigated, will be appointed along side a Human Resources Business Partner / Advisor, and made known to the person raising the concern.

The investigating officer will be responsible for conducting any investigation under this policy in an appropriate, timely and sensitive manner. The officer will be required to establish the facts in an impartial and independent way.

At all stages written records of the investigation process and any communication relating to it should be kept.

The investigating officer and HR Business Partner / Advisor will meet with the member of staff raising the concern, in private, as soon as possible. The purpose of this meeting will be to convey the Trust’s commitment to fully exploring the concerns raised; supporting the individual who might find it a difficult experience, and to start the exploration of the concerns. Individuals’ raising concerns are entitled, at all times, to be accompanied by a trade union / professional organisation representative or a work colleague/Respect Adviser.

Depending on the nature of the issue raised expert advice may be needed. This could for example involve members of professional bodies or experts in specialist fields from other NHS organisations.

If the concern raised transpires to be about an external organisation, the investigating officer should consult with the Designated Manager regarding the action to be taken.

The investigating officer will keep an individual who raises a concern appraised of progress, including delays. At the end of the investigation a written response detailing the action to be taken will be given. If required the written response should be followed up by a meeting between the investigating officer, HR Business Partner / Advisor and the member of staff raising the concern to ensure the proposed action is understood and any learning extracted from the whole process.

On completion of all preliminary interviews the investigating officer will send the final draft report to the Designated Manager.

On completion of the investigation, the Designated Manager will consider the investigating officer’s
report. Action that could be considered following this may include:

- Disciplinary action, where there is sufficient evidence to support such action
- Clinical Audit
- Risk assessment

Where there is evidence of criminal activity, the police will normally be informed.

5.6.1 Appeals

If the member of staff who raised a concern is unhappy with the Trust’s response, appeals may be made to the Chief Executive in the first instance.

Staff members should lodge appeals in writing within 15 working days of receipt of written confirmation of the outcome. The reason for the appeal must be clear and must be submitted in writing to the Chief Executive within this period of time.

5.7 Role of the Designated Manager

The role of the Designated Manager will be to:

- Act as a point of contact for employees seeking advice and support in relation to raising concerns under this policy and be impartial and capable of taking an independent view of the concern raised.
- Oversee the operation of this policy
- Maintain records of any complaints brought under this policy
- Monitor any trends
- Ensure recommendations are implemented and carried through
- Make judgements on the involvement of external bodies e.g. Care Quality Commission/Counter Fraud/ etc, where necessary
- Ensure staff raising concerns are protected from possible reprisals or victimisation.
- Advise managers on how to take forward concerns that involve other organisations. This will entail gathering documentary evidence and contacting appropriate officers within other organisations to ensure concerns raised are dealt with effectively
- Co-ordinate investigations under the formal part of the policy
- Keep the Chief Executive informed of investigations conducted under this policy

6 TRAINING

Awareness of this policy will be included in the Trust induction. HR Advisors/Business Partners will provide briefing sessions and bespoke coaching to line managers and staff on the use of this policy as required.

6.1 Equality Impact Assessment

The Equality Impact Assessment for this policy is attached as Appendix A.

7 MONITORING COMPLIANCE

<table>
<thead>
<tr>
<th>Element to be monitored</th>
<th>Lead</th>
<th>Tool</th>
<th>Frequency</th>
<th>Reporting arrangements</th>
<th>Acting on recommendations and Lead(s)</th>
<th>Change in practice and lessons to be shared</th>
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<tbody>
<tr>
<td>how staff can raise concerns, for example, whistle</td>
<td>Director of HR&amp;OD</td>
<td>Review of the results of the staff</td>
<td>Annual</td>
<td>Patient Safety Group</td>
<td>Head of Department and senior managers</td>
<td>Patient Safety Group will review the report and provide recommendations and actions for</td>
</tr>
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blowing, open disclosure etc. | survey Report from HR detailing the number of staff who raised concerns and a brief outline of the concern |  | improvement to systems and processes where appropriate

8 REFERENCES
Speak up for a Healthy NHS, How to Implement and Review Whistleblowing Arrangements in your Organisation – Social Partnership Forum & Public Concern at Work (2010)
Public Interest Disclosure Act 1998
NHS Terms and Conditions of Service Handbook

9 ASSOCIATED DOCUMENTATION
- Grievance Policy
- Dignity at Work Policy
- Incident Reporting Policy
- Here for You Standards Handbook
- Section 21 of NHS Terms and Conditions of Service Handbook

10 VERSION HISTORY TABLE

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<th>Date</th>
<th>Author</th>
<th>Ratified by</th>
<th>Comment/Reason for change</th>
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<tr>
<td>1.0</td>
<td>27.09.10</td>
<td>Fiona Stirling</td>
<td></td>
<td>Written after integration and replaced the Raising Concerns at Work Policy and Procedure after</td>
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<tr>
<td>1.1</td>
<td>November 2012</td>
<td>Martin Knight</td>
<td>Chair’s Action</td>
<td>Monitoring table updated to meet NHSLA requirements</td>
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### APPENDIX A – EQUALITY IMPACT ASSESSMENT

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<tr>
<td><strong>1.</strong> Does the policy/guidance affect one group less or more favourably than another on the basis of:</td>
<td>Yes/No</td>
<td>Comments</td>
</tr>
<tr>
<td>• Race</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>• Ethnic origins (including gypsies and travellers)</td>
<td>No</td>
<td></td>
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<tr>
<td>• Nationality</td>
<td>No</td>
<td></td>
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<tr>
<td>• Gender</td>
<td>No</td>
<td></td>
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<tr>
<td>• Culture</td>
<td>No</td>
<td></td>
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<tr>
<td>• Religion or belief</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>• Sexual orientation including lesbian, gay and bisexual people</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>• Age</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>• Disability - learning disabilities, physical disability, sensory impairment and mental health problems</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td><strong>2.</strong> Is there any evidence that some groups are affected differently?</td>
<td>No</td>
<td>Policy applies to all Croydon Health Services staff</td>
</tr>
<tr>
<td><strong>3.</strong> If you have identified potential discrimination, are there any exceptions valid, legal and/or justifiable?</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td><strong>4.</strong> Is the impact of the policy/guidance likely to be negative?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td><strong>5.</strong> If so can the impact be avoided?</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td><strong>6.</strong> What alternative are there to achieving the policy/guidance without the impact?</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td><strong>7.</strong> Can we reduce the impact by taking different action?</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>
Employee raises concern to Line Manager

Manager meets with employee & sends

Manager investigates issue of concern

Manager meets with employee and reports back findings of the investigation

Employee satisfied with response

Yes

End of process

No

Employee raises with line manager’s manager

Progress to formal process. See Appendix C
APPENDIX C – FORMAL PROCEDURE

Formal Procedure

Employee raises concern to Designated Manager (DM) (Director of HR & OD)

Acknowledgement sent within 5 days to employee

Investigating officer (I.O) appointed

I.O and HRBP meet with employee if appropriate

I.O sends written report to employee & meets to go through if required

I.O sends written report to DM

DM considers report and takes further action if required