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May 2024	Fayzur Baksh	Sarit Patel	

FREEDOM TO SPEAK UP POLICY

Introduction

Policy statement

All staff and patients should feel comfortable to raise concerns and be confident they will be acted on appropriately. Therefore, it is important to St.Katharine Docks Practice that any fraud, misconduct or wrongdoing conducted by employees, partners or others who work in the organisation is reported and properly dealt with. St.Katharine Docks Practice encourages all individuals to raise any concerns that they may have about the conduct of others within the organisation or the way in which the organisation is run.

This policy sets out the way in which individuals may raise any concerns that they have and how those concerns will be dealt with in conjunction with the [Freedom to Speak Up Policy for the NHS](#) (version 2 updated Nov 22) and should be read in conjunction with [CQC Mythbuster No 87: Freedom to speak up.](#)

Status

The organisation aims to design and implement policies and procedures that meet the diverse needs of our service and workforce, ensuring that none are placed at a disadvantage over others, in accordance with the [Equality Act 2010](#).

Consideration has been given to the impact this policy might have regarding the individual protected characteristics of those to whom it applies.

Speaking up

Freedom to Speak Up is about encouraging a positive culture where people feel they can speak up, their voices will be heard, and their concerns and suggestions acted on with no retribution.

St.Katharine Docks Practice recognises there are times when speaking up issues are overly complex and do not always bring the resolution desired. From experience, it is recognised that these issues can impact on workers and organisations.

All NHS organisations are encouraged to ensure:

The partners, practice manager and their Freedom to Speak Up Guardian are all aware of the national Speaking Up Support Scheme offer

Their policies and processes reflect the principles in the [guide for leaders in the NHS and organisations delivering NHS services](#)

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Workers have easy access to information on how to speak up and the Speaking Up Support Scheme as detailed at [Section 5](#) and actively refer individuals to the scheme.

They are mindful of those workers who may have cultural barriers to speaking up or who are in lower paid roles and less confident to do so, and those who work unsociable hours and may not always be aware of or have access to the policy or processes supporting speaking up.

They communicate with all their workers by identifying the best channels to do so.

They reflect on any learning to build healthy cultures in which everyone feels safe to speak up.

Further reading on ‘what will happen when I speak up’ can be found at Appendix A of the [Freedom to Speak Up Policy for the NHS](#) (version 2 updated Nov 22).

Freedom to Speak Up Guardian

At St.Katharine Docks Practice, the Freedom to Speak Up Guardian is Fayzur Baksh, practice manager and Salma Hussain, practice administrator; they will:

- Understand and promote their organisation’s speaking-up culture to enable speaking-up processes and strategies to work well
- Work in partnership with senior leadership, but maintain their ability to challenge poor practice and act where quality of services and worker experience do not meet expected standards
- Respond to members of staff who want to speak up, and manage each case
- Examine and address any barriers to speaking up
- Ensure there is appropriate training on how to speak up
- Produce regular reports for the senior team or board, where needed

The FSUG will need to undertake the [National Guardian’s Office’s](#) (NGO) programme of training on appointment and throughout their tenure. The NGO leads, trains and supports a network of FSUGs in England and conducts speaking up reviews to identify learning and support the improvement of the speaking up culture of the healthcare sector.

The NGO provides learning and resources on their website, including the provision of a [job description](#) for this role. Training will include the 5 elements to managing the Freedom to Speak Up process, which include:

- Recognising something is wrong
- Speaking up
- Thanking the person who raises the concern
- Undertaking the necessary actions to remedy

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- Providing support to the member of staff throughout the process.

It should be noted that whilst CQC advise that there are no specific regulations governing any practice's freedom to speak up arrangements, should a practice not be able to provide evidence when asked, the practice may risk breaching the following overarching regulations:

[Regulation 12 \(Safe care and treatment\)](#)

[Regulation 13 \(Safeguarding service users from abuse and improper treatment and improper treatment\)](#)

[Regulation 16 \(Receiving and acting on complaints\)](#)

[Regulation 17 \(Good Governance\)](#)

[Regulation 20 \(Duty of Candour\)](#)

Further details in relation to regulatory requirements can be sought within the [GP Mythbuster 87: Freedom to speak up.](#)

What is a qualifying disclosure?

Qualifying disclosures (also known as protected disclosures) are legitimate concerns that any member of the organisation raises about specified matters and which are reasonably believed to be in the public interest (this means it affects others, for example the general public and is not a personal grievance).

These are covered under the [Public Interest Disclosure Act 1998](#).

A qualifying disclosure is one made in the public interest by any member of the organisation who has a reasonable belief that any of the following is being, has been, or is likely to be, committed:

A criminal offence

A miscarriage of justice

An act creating risk to health and safety

An act causing damage to the environment

A breach of any other legal obligation

Concealment of any of the above

Further reading on making a protected disclosure can be found at Appendix B of the [Freedom to Speak Up Policy for the NHS](#) (version 2 updated Nov 22)

Who can speak up

Any worker in NHS healthcare may become a [whistleblower](#) and they can speak up to report certain types of wrongdoing, usually something they have seen at work. This can be in person, by phone or in writing (including email).

Workers should speak up about anything that affects patient care or their working life. This may be something which does not feel right, e.g., a way of working or a process that is not being followed, when the worker feels they are being discriminated against, or they feel the behaviour of others is affecting their wellbeing or that of their colleagues or patients.

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This may include:

- Unsafe patient care
- Unsafe working conditions
- Inadequate induction or training for staff
- Lack of, or poor response to, a reported patient safety incident
- Suspicions of fraud, financial irregularity, dishonesty
- A bullying culture (across a team or the organisation rather than individual instances of bullying)
- Malpractice, corruption, bribery
- Unethical conduct
- Medical or prescribing errors

Speaking up captures a range of issues, some of which may be appropriate for other existing processes (HR, patient safety or quality). The organisation will listen and work with the employee to identify the most appropriate way of responding to the issue raised. The most important aspect of speaking up is the information provided, not the identity of the person providing it.

Individuals have a choice about how they speak up:

Openly

They are happy that the person they will speak up to will know their identity and that they can share this with anyone else involved in responding

Confidentially

They are happy to reveal their identity to the person they choose to speak up to on the condition that they will not share this without their consent

Anonymously

They do not want to reveal their identity to anyone. This can make it difficult for others to ask for further information about the matter and may make it more complicated to act to resolve the issue. It also means that the worker might not be able to access any extra support they may need or receive any feedback on the outcome

In all circumstances, workers should be ready to explain as fully as they can the information and circumstances that prompted them to speak up.

Reporting a concern

Initial concerns

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If any member of the organisation is unsure whether to raise a concern, in the first instance they should discuss the issue with their line manager, the organisation manager, the FSUG or one of the organisations listed in [Section 4.5 Reporting outside the organisation](#).

However, St.Katharine Docks Practice encourages workers to raise their concerns under their organisational procedure in the first instance using the process below.

Stage 1: Notification

Unless the reporter reasonably believes the organisation manager to be involved in the wrongdoing, any concerns should be raised with the organisation manager. If they believe the organisation manager to be involved, or for any reason they do not wish to approach them, then they should proceed directly to Stage 3.

The matter for review may be best considered under a specific existing policy/process, e.g., the organisational process for dealing with bullying and harassment. If so, this will be discussed with the reporter. If the issue does not fall into a HR or patient safety incident process, then the matter will be addressed under this policy.

When the organisation is made aware of a concern, it will be recorded, and the reporter will receive an acknowledgement within two working days. It is important that the organisation takes action to resolve the issue wherever possible. In most cases, it is important that the opportunity is fully explored which may be facilitated by conversations and/or mediation.

Stage 2: Resolution and investigation

Where an investigation is needed, this will be objective and conducted by someone who is suitably independent (this may be someone outside of the organisation or from a different part of the organisation) and trained in investigations.

The organisation manager will undertake appropriate arrangements to investigate the matter or immediately pass the issue to someone in a more senior position.

The investigation will be documented and may entail the reporter, and any other individuals involved providing a written statement. The statement will be considered, and the reporter will be asked to comment on any additional evidence obtained.

The organisation will inform the reporter:

- How long they expect the investigation will take
- Agree how to keep them up to date with progress
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Stage 3: Conclusion and communicating the outcome

A conclusion will be reached within a reasonable timescale (which the reporter will be notified of) and a report will be produced that identifies any issues to prevent problems recurring. Any

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employment issues that have implications for the reporter or their capability or conduct identified during the investigation must be considered separately.

The practice manager will also report to the senior partner who will take any necessary action including reporting the matter to any appropriate government department or regulatory agency.

Where possible, the organisation will share the full investigation report with the reporter (while respecting the confidentiality of others and recognising that some matters may be strictly confidential). Where the outcome identifies improvements that can be made, the organisation will ensure necessary changes are made and are working effectively. Lessons will be shared with teams across the organisation or more widely as appropriate.

If disciplinary action is required, the organisation manager (or the person who conducted the investigation) will report the matter to the senior partner who will instigate the disciplinary procedure.

If the worker is concerned that the organisation has failed to make a proper investigation or has failed to report the outcome of the investigation to the senior partner, they should contact the [FSUG](#), who will arrange to review the investigation that was undertaken, make any necessary enquiries and make his/her own report to the senior partner as in Stage 2 above.

Reporting outside the organisation

If, on conclusion of Stages 1, 2 and 3, the worker does not reasonably believe that the appropriate action has been taken or they wish to speak to someone outside of the organisation, they should approach:

[Care Quality Commission \(CQC\)](#) for quality and safety concerns about the services it regulates using its [online form](#), [email](#) or the details on their [contact us](#) page

[NHS England](#) who may decide to investigate concerns itself, ask the organisation or another appropriate organisation to investigate (usually with its oversight) and/or use the information provided by the worker to inform its oversight. The precise action it takes will depend on the nature of the concern and how it relates to various roles

[NHS Counter Fraud Agency](#) for concerns about fraud and corruption using its [online reporting form](#) or calling its freephone line 0800 028 4060

[ACAS for advice and assistance including on early conciliation regarding employment disputes](#)

[Protect](#) which is a whistleblowing charity

The worker's trade union

If the worker's concern is about the conduct of a member of staff or malpractice, there are several organisations, known as prescribed persons, to report concerns to, other than the employer. These include, but are not limited to:

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[NHS Improvement](#) for concerns about regulation and performance

[Healthwatch England](#), part of the CQC, however disclosures can be made directly to Healthwatch if wished

[National Guardian's Office](#) for concerns regarding freedom to speak up and cultures in the NHS in England

[General Medical Council](#)

[Nursing and Midwifery Council](#)

[Health and Care Professions Council](#)

[Health Education England](#) for education and training in the NHS

[Healthcare Improvement Scotland](#) for matters relating to safety or quality of healthcare in Scotland

[Welsh Ministers](#) for the review of, and investigation into, the provision of healthcare by and for Welsh NHS bodies and independent healthcare providers in Wales

This list of prescribed persons and bodies is updated on a regular basis at www.gov.uk.

Support for those who speak up

The Speaking Up Support Scheme

The Speaking Up Support Scheme provides a range of support for past and present NHS workers who have experienced a significant adverse impact on both their professional and personal lives to move forward following a formal speak up process.

Workers must meet the eligibility criteria for the support scheme and:

Be a present NHS worker or a past NHS worker who has previously worked for the NHS within the last three years

Have been through a formal process of raising concerns in the NHS and suffered significant adverse impact as a result

Have been through the formal processes of raising concerns in the NHS which potentially impacted on safety, posed a risk or presented as malpractice or wrongdoing

Have made reasonable attempts with their organisation to resolve matters

Can demonstrate how the scheme will benefit them to move on personally and professionally

Be open to participate in all the scheme aspects

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Must not have taken part in any previous related NHS whistleblowing support schemes including the pilot scheme

The scheme enables access to a structured programme of support which includes:

- Health and wellbeing assessment
- One to one psychological wellbeing support
- Career coaching
- Personal development workshops
- A range of practical support through group sessions

The support is delivered online via virtual platforms such as MS Teams or Zoom by specialists in wellbeing and coaching support.

Other sources of advice and support are available, including:

[Speak Up Direct](#) – providing free, independent, confidential advice on the speaking up process

[NHS Employers Health and Wellbeing](#)

[Support available for our NHS people](#) – providing a confidential text support service accessed by texting FRONTLINE to 85258 for support 24/7.

[Practitioner Health](#)