

Whistleblowing Alert and Advice Services for NHSScotland

**Six-month review
(1 November 2019 – 30 April 2020)**

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Protect
The Green House
244 - 254 Cambridge Heath Road
London E2 9DA
Tel: 020 3117 2520
Email: whistle@protect-advice.org.uk
www.protect-advice.org.uk

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Whistleblowing Alert and Advice Services for NHSScotland Six-month review (1 November 2019 – 30 April 2020)

We are pleased to provide NHSScotland with this six-month report as part of our contract to operate the NHSScotland Whistleblowing Alert and Advice Line. As part of this evaluation we will also provide NHSScotland with a summary report on information sent to the NHSScotland Health Boards in relation to whistleblowing cases that have been raised via the Alert and Advice Line.

Alert and Advice Line overview

In the above review period we were contacted by 32 individuals who identified to one of our advisers that they work for NHSScotland.

30 of these 32 cases involved a public interest or whistleblowing concern, namely one in which the interests of others, colleagues, the public or the organisation itself were at risk. Of the 30, 2 were what Protect classifies as 'Public N/A' meaning that the caller had a public interest concern but was not an NHS Scotland staff member. 2 cases related to private matters, namely where the issue involved an employment or HR matter or was a patient complaint about an issue affecting only the patient.

NHSScotland workers will typically contact the Alert and Advice Line in one of two ways:

- via the dedicated Freephone number (0800 0086112) and email facility (alertline@protect-advice.org.uk) for the NHSScotland Alert and Advice Line
- via Protect general advice line number 020 7404 6609 / helpline@protect-advice.org.uk (through an independent web search)

For the purposes of the Alert and Advice Line we operate a Freephone number. We received 91 calls to the Alert and Advice Line Freephone number during the period covered. Please note these are call numbers as opposed to individual cases. This may include callers who identify as working for NHSScotland, callers who do not tell us who they work for, and multiple calls from individuals. This figure is noticeably higher than the previous report, however it is a shorter reporting period (by three months) and we saw an increase in calls to our advice line at the start of the Covid19 pandemic.

Identification

When providing advice, it is not a requirement for the caller to provide the name of their employer to Protect advisers. The starting point for our advisers will be what the concern is; to identify the risk; what may be preventing the individual from raising the concern; and, to assist or advise them in how best to raise the concern. The caller may not wish to provide the name of their employer. With this in mind when contacting us, staff may:

- Provide their name only
- Identify themselves as working for NHSScotland with or without their name
- Not provide any information as to their identity or their employer

Out of the 30 public interest cases, 21 provided us with their name and/or contact details, though this is not a prerequisite for seeking advice from Protect. As is the case on the Protect advice line generally, callers may choose to remain anonymous and/or not to leave contact information. In some cases this may be because the individual has contacted us with a very specific query that we were able to deal with in the initial call. In these cases there is no case work element and the individual may feel that it is not necessary to leave their name and/or contact information. In cases where the individual is satisfied with the advice they have been given and is content to leave things there, they will always be informed of the name of their adviser and their ability to call back should they need further advice at a later date.

Job position of the caller

We have provided data on the roles of the callers to the Alert and Advice Line on Whistleblowing matters for both this six-month reporting period and the previous nine-month period. These are as follows:¹

Position	1 November 2019 – 30 April 2020 (current reporting period)		1 February 2019 – 31 October 2019	
	Count	Percentage	Count	Percentage
Admin/Clerical	2	7.1%	2	8.0%
Carer	1	3.6%	0	0.0%
Doctor	1	3.6%	2	8.0%
Engineer	0	0.0%	0	0.0%
Executive	0	0.0%	0	12.0%
Management	3	10.7%	1	8.0%
Nurse	7	25.0%	7	0.0%
Other	5	17.9%	6	28.0%
Pharmacist	0	0.0%	0	0.0%
Skilled	0	0.0%	2	0.0%
Unknown	9	32.1%	3	0.0%
Unskilled	0	0.0%	2	24.0%
Total	28¹	100.0%	25²	100.0%

Consistent with previous reports, nurses were the largest group of workers to seek advice from the Alert and Advice Line in the reporting period; it should be noted that they are also the largest group of workers in NHSScotland. In comparison with the previous nine-month report, there was an increase in calls from other professionals, management and carers.

¹ This figure does not include the Public N/A cases.

² This figure does not include the Public N/A cases.

Please note that we classify positions as unskilled where no formal training or qualifications are required to perform the role. In an NHS context this could include support staff such as cleaners or porters. Skilled positions are those which require some formal training or qualification but which are not covered by one of our other professional categories; this could include tradespeople or drivers.

Types of concerns raised

We provide below an overview of the types of concerns that were raised during this and the previous review period.

Type of suspected wrongdoing	1 November 2019 – 30 April 2020 (current reporting period)		1 February 2019 – 31 October 2019	
	Count	Percentage	Count	Percentage
Abuse of a vulnerable person	1	2.9%	1	4.2%
Crime	0	0.0%	1	4.2%
Ethical	6	17.1%	3	12.5%
Financial malpractice	0	0.0%	2	8.3%
Patient safety	8	22.9%	13	37.5%
COVID-19	18	51.4%	0	0.0%
Working Practices	2	5.7%	7	16.7%
Work safety	0	0.0%	3	8.3%
Other	0	0.0%	1	0.0%
Unknown	0	0.0%	2	8.3%
Total	35³	100.0%	33	100%

COVID-19 related issues were the predominant concerns raised with the alert line which is to be expected given the current climate and the nature of work NHSScotland workers undertake. The most common type of COVID-19 concerns include lack of PPE, breach of government social distancing guidelines and incorrect classification of individuals as “key workers”. We also received a significant number of patient safety concerns. This has been a consistent trend across the previous reports provided in 2015, 2016, 2017, 2018 and 2019.

Of the total 28 public cases⁴, 14 callers had already raised their concern before contacting the Alert Line. This coincides with general trends we have seen in previous reports and largely reflects the majority of calls we receive to the advice line generally. In many cases individuals are contacting us because they have already raised their concern and feel it is being ignored and would like further advice on options for escalation or they feel they have experienced victimisation due to raising an issue.

³ Some cases had multiple concerns.

⁴ Does not include Public N/A cases.

Of the callers who had already raised their concern before contacting the Alert and Advice Line, these were raised with:

Where raised the concern	1 November 2019 – 30 April 2020 (current reporting period)		1 February 2019 – 31 October 2019	
	Count	Percentage	Count	Percentage
Manager	4	28.6%	16	72.7%
Senior Management/Executive	5	35.7%	4	18.2%
Prescribed Regulator/scrutiny body	1	7.1%	1	4.5%
Multiple	2	14.3%	1	4.5%
Other	0	0.0%	0	0%
Unknown	2	14.3%	0	0%
Total	14	100.0%	22	100.0%

This reporting period is consistent with previous reporting periods in that Managers and Senior Management are the most common avenues used by individuals who raise concerns before calling the Alert and Advice Line.

Response to concern at point of contact

The table below sets out the response the callers indicated they received to their concern prior to contacting us.

Response to concern	1 November 2019 – 30 April 2020 (current reporting period)		1 February 2019 – 31 October 2019	
	Incident rate	Percentage	Incident rate	Percentage
Admitted ⁵	3	21.4%	2	9.1%
Denied	3	21.4%	3	13.6%
Ignored	3	21.4%	11	50.0%
Unknown	1	7.1%	2	9.1%
Under investigation	4	28.6%	0	0.0%
Resolved	0	0.0%	4	18.2%
Total	14	100.0%	22	100.0%

Of the 14 individuals who had raised their concerns, 3 stated their concern had been ignored, a sharp decrease from the previous report. There was also a major increase in the number of callers who said that their concerns were under investigation.

⁵ Admitted would apply where the organisation accepted that the concern was valid, i.e. accepted immediately or after an investigation.

Advice from Protect

We cannot provide specific detail about the advice given by us on the advice line as legal professional privilege applies. We can only provide non-identifying information where this does not breach confidentiality. Set out below is data on where we advised individuals to raise a matter.

The data below reflects the various options provided to callers about where they might raise a concern and/or what they should do. In some cases we provide callers with multiple options to raise concerns.

- 2 cases were advised to raise with their line manager
- 2 cases were advised to raise with a senior manager
- 7 cases were advised to speak to contact their trust's designated whistleblowing contact
- 8 cases were advised to speak with their trade union
- 4 cases were advised to speak to an external regulator

(Note that in some cases, we would advise callers to speak to more than one body)

In five of these cases we were not able to provide direct advice. This could be for a variety of reasons, such as lacking details about the concerns, the call ending before we could advise them or the advisor not being sure if they could give appropriate advice.

There were no cases in which we passed the information on to a contact within a Health Board on the individual's behalf. We will only make such direct referrals where we have the individual's express consent to do so. This type of request is usually made when an individual is worried about their position and would prefer for us to contact the Health Board.

There were two cases in which we found it necessary or appropriate to encourage callers to engage with an internal investigation process. Where we encourage callers to co-operate, it may occur in cases when an individual has already raised their concern internally and has been told there is an investigation ongoing but is unclear on the process or might be seeking advice on escalating the matter prematurely. In some cases, this can be triggered by a lack of clarity provided to the whistleblower about the next steps for investigation and/or where the individual feels that the initial recipient of the information did not appear to take the concern very seriously. Where the individual is informed that the matter will be looked into, we encourage them to feed into that process in order to ensure the organisation has all of the relevant information. It is best to wait until there is some feedback on outcomes before escalating the matter as to do so too early may undermine the ability of line management to investigate issues and may lead to additional senior resources being diverted to a matter that is already being considered elsewhere in the organisation.

Health Boards

We also provide information on the numbers of whistleblowing concerns raised in each Health Board during this reporting period where we have this information and the individual cannot be identified. This information is sent to Health Boards directly by way of a short 6 monthly report. It is not a requirement for an individual to provide the name of the Health Board they are employed by in order to obtain our advice and as such these figures should be seen as indicative only as we may have received additional calls from individuals who do not identify their Health Board.

Of the 28 public cases from NHS Scotland staff, 16 of these identified the organisation they worked for. There were 6 Health Boards identified. Due to the low numbers of calls received for the Health Boards listed below (between 1-5 calls), where the information could potentially identify a caller, we are unable to report on the exact number of cases from any of these Health Boards. The breakdown of self-identified calls was as follows:

NHS 24	1-5
NHS Greater Glasgow and Clyde	1-5
NHS Highlands	1-5
NHS Lanarkshire	1-5
NHS Lothian	1-5
NHS Tayside	1-5

Running Totals: Public cases

The running totals of the number of public interest concerns received to the advice line for NHSScotland during this six-month period are shown in the following table:

NHSSCOTLAND PUBLIC INTEREST CONCERNS (2019-2020) ⁶	Running Total (February 19- October 19)							Running Total (November 19- April 20)
		Nov	Dec	Jan	Feb	Mar	Apr	
Patient Safety	13	2	2	2	0	1	1	8
Ethical concerns	3	3	1	1	1	0	0	6
Working practices	7	1	0	0	0	0	1	2
Abuse of vulnerable person	1	0	0	0	1	0	0	1
Work Safety	3	0	0	0	0	0	0	0
Crime	1	0	0	0	0	0	0	0
Financial malpractice	2	0	0	0	0	0	0	0
Unknown	2	0	0	0	0	0	0	0
COVID-19	0	0	0	0	0	4	14	18
Total Public Interest Concerns	32	6	3	3	2	5	16	35

⁶ This table represents the number of concerns rather than advice line cases. As such, there may be occasions where individuals raise multiple concerns.

Caller Feedback on the Alert Line Service

Previously Protect has attempted to contact those callers that left contact details in order to ask for their feedback on the service. This however has proved difficult due to the small size of the group identifying themselves as NHS Scotland workers, making contact, or drawing any meaningful data from such as small group. Protect regularly conducts as standard a feedback survey to all callers to our advice line services to gain feedback, and the results of the most recent survey are below. This will include any NHS Scotland workers who Protect were able to contact.

Based on 2019 feedback gathered:

- 100% of callers found the advice clear and easy to understand
- 100% found the advice helpful
- 89% followed the advice
- 100% would recommend the charity

I hope you have found this report useful and we look forward to continuing to support NHS Scotland and its workforce. If you have any questions please don't hesitate to contact me.

Yours sincerely,

Jon Cunningham
Business Development Director
Protect

ⁱ All percentages have been rounded to one decimal place, meaning totals of the percentage columns may fall between 99-102%.



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