

# **Freedom to speak up: raising concerns (whistleblowing) policy**

<b>Policy Title:</b>	Freedom to speak up: raising concerns (whistleblowing) policy
<b>Supersedes:</b>	All previous policies of the same name or similar name held by: Barking and Dagenham, Havering and Redbridge Clinical Commissioning Groups (BHR CCGs), Newham CCG, Tower Hamlets CCG, Waltham Forest CCG (WEL CCGs) and City & Hackney CCG.
<b>Description of Amendment(s):</b>	This new policy reflects the national integrated whistleblowing policy as part of the standardisation across the NHS for supporting staff who raise concerns.
<b>This policy will impact on:</b>	All employees
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#### APPROVAL RECORD

	<u>Committees/Group/Individual</u>	<u>Date</u>
	BHR CCGs' Audit & Governance Committee	7 July 2020

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## **PART ONE: POLICY**

### **1.0 Policy statement**

- 1.1 The CCG is committed to the principle of public accountability. The CCG will investigate any concerns made with reasonable belief expressed by employees and other workers relating to malpractice within the CCG and will ensure that employees and other workers are not discriminated against or suffer a detriment as a result of making such a disclosure, as laid down by the Public Interest Disclosure Act 1998 (PIDA).
- 1.2 Qualifying disclosures are disclosure of information where the individual / worker reasonably believes that making the disclosure is in the public interest and where one or more of the following matters is either happening, has taken place, or is likely to happen in the future:
- Criminal offence
  - Breach of a legal obligation
  - Miscarriage of justice
  - Danger of the health and safety of any individual
  - Danger to the environment
  - Deliberate attempt to conceal the above
  - Concerns about unsafe patient care
  - Unsafe working conditions
  - Inadequate training or induction of an employee
  - Bullying culture
- 1.3 This policy applies to all employees and other workers (staff on secondment, trainees, apprentices, work experience, bank staff, lay members, contractors, consultants, suppliers, service users, employees and committee members of the organisations funded by the CCG, employees and principals of partner organisations, volunteers and agency workers) whilst they are working at the CCG and is in accordance with the CCG's Equality and Diversity policy. This policy also applies to employees from external organisations who may wish to make an allegation about the conduct of the CCG. Employees wishing to make allegations about their own organisation should do so in accordance with their own organisations policies.
- 1.4 If the concern is a personal complaint about the individual's employment that affects only themselves, rather than a concern about something that affects others, then the Grievance Policy should be referred to. If the allegation falls under another policy, then the most appropriate policy will be consulted.
- 1.5 This policy incorporates the requirements of the Public Interest Disclosure Act 1998 (PIDA) and the Bribery Act 2010.

### **Values and behaviours**

- 1.6 The three fundamental public service values underpinning the NHS and all public sector work, specified by the NHS Code of Conduct for Boards are:
- Accountability
  - Probity and
  - Openness

- 1.7 All those who work in the public sector should be aware of, and act in accordance with, these values. Acting with honesty and integrity forms a cornerstone of the public sector values.
- 1.8 The CCG is a public sector body and employees and other workers are required to be honest and impartial in the conduct of their business. All employees and other workers of the CCG should be aware of the Conflicts of Interest Policy which is available to CCG staff internally and published on the CCG's website.
- 1.9 The CCG is absolutely committed to maintaining an honest, open and well-intentioned atmosphere within the organisation.
- 1.10 All employees have a duty to report instances where they witness others failing to demonstrate the expected levels of integrity in their working life at the earliest opportunity. This will include bribery, fraud, corruption or bringing the CCG, the NHS or wider public service in to disrepute.

### Aims and objectives

- 1.11 This policy aims to:
  - Encourage all employees and other workers to feel confident in raising serious / genuine concerns in reasonable belief regarding the practice of the CCG and conduct of employees;
  - Encourage all employees and other workers to feel confident in raising serious concerns regarding the practice of external organisations e.g. customer organisations and conduct of employees;
  - Ensure that expectations about employees / other workers and the duties of the CCG are clear;
  - Ensure that employees and other workers understand how to raise genuine concerns;
  - Provide avenues for employees and other workers to raise those concerns and receive feedback on any action taken;
  - Ensure that employees and other workers receive a response/feedback following the protected disclosure;
  - Re-assure employees and other workers that they will be protected from possible reprisals, subsequent discrimination, victimisation or disadvantage if they make a disclosure based on a reasonable belief;
  - and that this will be maintained to ensure effectiveness of implementation.

## **2.0 Principles**

- 2.1 Any matter raised under this procedure will be investigated thoroughly, promptly and confidentially and the outcome of the investigation reported back to the individual or other worker who raised the issue.
- 2.2 All employees/other workers will be made aware of this policy on joining the CCG and will be encouraged to read and understand its process. All existing employees will be made aware of the policy also by various online and face to face methods.
- 2.3 No individual or other worker will be victimised or suffer a detriment for raising a legitimate concern under this procedure.

- 2.4 In the event that misconduct is discovered as a result of any investigation under this procedure the CCG's disciplinary policy will be invoked in addition to any external measures required.
- 2.5 Where it can be demonstrated that an individual knowingly or maliciously supplied false information when raising a concern, the disciplinary policy will be invoked.
- 2.6 The CCG will treat all disclosures made under this policy in a confidential and sensitive manner. The identity of the individual making the allegation may be kept confidential so long as it does not hinder or frustrate any investigation. However, the investigation process may reveal the source of the information and the individual making the disclosure may need to provide a statement as part of the evidence required.
- 2.7 Support arrangements will be offered to employees raising a concern.
- 2.8 This policy encourages employees to put their name to any disclosures they make. Concerns expressed anonymously are much less credible and may not be advanced further but this will be at the discretion of the CCG.
- 2.9 In exercising this discretion, the factors to be taken into account will include:
- Seriousness of the issues raised;
  - Credibility of the concern;
  - Likelihood of confirming the allegation from attributable sources;
  - Inability to respond to the whistle-blower.

### **3.0 Responsibilities**

#### **3.1 Accountable Officer and Executive Team**

##### **3.1.1 Responsibility and accountability for this policy sits with the Accountable Officer who will, in conjunction with the Executive Team:**

- Demonstrate commitment to developing an open culture within the CCG through actions and strategy;
- Appoint a Freedom to Speak Up (FTSU) Guardian;
- Receive details of any whistle-blowing cases on an exceptional basis;
- Ensure an annual report on cases is reported to the Remuneration and Workforce Committee;
- Include it as part of the staff induction programme.

##### **3.1.2 The FTSU Guardian has lead responsibility for the whistle-blowing process and for dealing with issues raised. They will:**

- Oversee and review the policy and process implementation and practice;
- Raise the profile of raising concerns in the CCG;
- Determine if concern raised falls within the scope of the Public Interest Disclosure Act 1998;
- Seek legal advice where appropriate;
- Provide confidential advice and support to staff in relation to concerns they have about patient safety and/or the way their concern has been handled;
- Appoint an investigation manager for a case where appropriate;

- Ensure cases are progressed in a timely manner;
- Ensure learning from whistle-blowing cases is fed back to the wider CCG;
- Ensure managers are trained in dealing with issues;
- Ensure the process is monitored and improved where required;
- Ensure the Remuneration & Workforce Committee receives an annual report and the Executive Team are apprised of any concerns raised on an on-going basis as necessary.

3.1.3 The FTSU Guardian will not get involved in investigations or complaints, but help to facilitate the process where needed, ensuring organisational policies in relation to raising concerns are followed correctly. The FTSU Guardian is the Audit & Governance Committee Chair, details are included in Appendix 1.

3.2 Employees and other workers:

- Have a duty to raise any concerns they have under the circumstances set out in this document;
- Should raise genuine concerns internally first to allow the CCG to address the concern;
- Treat any information about the investigation as confidential;
- Must not threaten or retaliate against a person who raises concerns in any way. Anyone involved in such conduct will be dealt with in line with the CCG's Disciplinary Policy.

3.3 Managers are responsible for:

3.3.1 Ensuring all staff are aware of this policy and procedure and their responsibilities including:

- Carrying out regular 1-1s / team meetings to support an environment where employees feel they can raise a concern with their manager as soon as it arises so that it can be addressed proactively;
- Taking a proactive and supportive approach to a raising concerns protected disclosure and support the person who raised the concern;
- Being sensitive to individual needs and discreet and consistent in their approach towards an individual / worker who raises a concern;
- Investigating issues raised promptly and thoroughly;
- Ensuring any staff raising concerns receive timely feedback;
- Considering a range of options to achieve satisfactory resolution including carrying out a risk assessment and consider application of other CCG Policies which may resolve the concern;
- Fostering an open culture within their teams;
- Ensuring any staff raising concerns are not subject to detriment for raising the concern;
- Escalating issues and engaging the support of the FTSU Guardian where required.

3.4 Human Resources (HR)

3.4.1 HR will support successful application of this policy and procedure by:

- Providing advice and support to managers, employees and other workers.

#### **4.0 The Public Interest Disclosure Act (PIDA) 1998**

- 4.1 The above act provides protection for workers who raise legitimate concerns about specified matters:
- A criminal offence has been committed, is being committed or is likely to be committed;
  - A person has failed, is failing, or is likely to fail to comply with any legal obligation to which the worker is subject;
  - A miscarriage of justice has occurred, is occurring or is likely to occur;
  - The health or safety of any individual has been, is being, or is likely to be damaged;
  - Information tending to show any matter falling within any one of the proceeding paragraphs has been, is being or is likely to be deliberately concealed.
- 4.2 These are called “qualifying disclosures”. A qualifying disclosure of information is a disclosure that, in the reasonable belief of the worker, is made in the public interest. In order for the disclosure to be protected, the worker must show that he or she reasonably believed that the malpractice falls within the matters for which the person is prescribed and that the information disclosed, and any allegation contained in it, are substantially true. It is not necessary for the worker to have proof that such an act is being, has been, or is likely to be committed, a reasonable belief is sufficient. PIDA only offers protection to workers.

#### **5.0 The Bribery Act 2010**

- 5.1 The above act makes it a criminal offence to give a promise or offer a bribe or request, or agree or receive a bribe. It also sets out a corporate offence of failing to prevent bribery by an organisation not having adequate preventative procedures in place. This includes operating through an “agent/subsidiary or other associated person”.

#### **6.0 Bribery, fraud & corruption**

- 6.1 The CCG is committed to the elimination of any bribery, fraud and corruption and to the rigorous investigation of any such cases.
- 6.2 One of the basic principles of public sector organisations is the proper use of public funds and this would include assets bought through public funds. It is therefore important that all CCG employees and other workers are aware of the rules against any acts involving bribery, dishonesty, corruption or damage to CCG property. For simplicity all offences such as fraud, bribery, and dishonesty are hereafter referred to as “fraud”.
- 6.3 The CCG positively encourages anyone with reasonable suspicions of fraud to report them, and will ensure that no staff member will suffer in any way as a result of reporting reasonably held suspicions. All such concerns will be treated in confidence, wherever possible, and properly investigated.
- 6.4 Where instances of theft are identified these should be reported immediately to a line manager or in the event of the suspicion falling on that person, the Chief Finance Officer who, where appropriate, will arrange for the matter to be referred to the police for investigation.

## Further information - BRIBERY ACT 2010

Staff are not required to categorise any concerns they have but may find it useful to know how the Bribery Act defines bribery. The Act defines four key offences with regard to bribery, which are:

- Active bribery (offering, promising or giving a bribe);
- Passive bribery (requesting, agreeing to receive or accepting a bribe); and Bribery of a foreign public official;
- It is also an offence for a corporate body to negligently fail to prevent bribery, by not having adequate preventative procedures in place to prevent bribery.

The reporting process outlined in this document should be followed for all genuine suspicions of bribery.

### 7.0 Confidentiality

#### 7.1 Making a 'protected disclosure'

There are very specific criteria that need to be met for an individual to be covered by whistleblowing law when they raise a concern (to be able to claim the protection that accompanies it). There is also a defined list of '[prescribed persons](#)', similar to the list of outside bodies who you can make a protected disclosure to. To help you consider whether you might meet these criteria, please seek independent advice from the [Whistleblowing Helpline](#) for the NHS and social care, [Protect](#) or a legal representative.

7.2 Employees and other workers raising a concern should be aware of the need to follow this procedure and in particular to maintain confidentiality. Allegations of breaches in confidentiality will be dealt with using the appropriate procedures, through the use of the CCG's Disciplinary Policy.

7.3 The identity of the individual who has raised a concern will be protected on request and will not be disclosed without consent. Whether and how to proceed will be discussed with the individual if the situation arises where the concern cannot be resolved without revealing their identity (for example, because there is an internal investigation or evidence is needed in court).

7.4 Should anonymity not be expressly requested by the individual who has raised a concern, their identity will only be disclosed where necessary, and following a risk-based review by the CCG.

7.5 Any individual raising a concern must be aware that they may be asked to present evidence to substantiate any allegations made, and/or to provide a written statement. In addition, they may be asked to explain their allegations during any disciplinary proceedings that may result from them.

7.6 Victimisation of employees who raise concerns reasonably and responsibly is prohibited under the Public Interest Disclosure Act 1998. The CCG will ensure that staff are protected from victimisation included but not limited to dismissal, selection for redundancy or suffering detriment such as disciplinary action, loss of work or pay. There is a liability for the CCG if they have failed to take reasonable steps to prevent the harassment or victimisation of whistle-blowers by their colleagues. Employees can also be held personally liable.

## **8.0 Equality statement**

- 8.1 In applying this policy, the CCG will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic.

## **9.0 Monitoring & review**

- 9.1 This policy and procedure will be reviewed in two years by the Audit & Governance Committee led by the FTSU Guardian and HR in conjunction with operational managers and Trade Union representatives. Where review is necessary due to legislative change, this will happen immediately.

Useful links:

[Equality & Diversity Strategy](#)

[Anti-Fraud & bribery policy](#)

## **PART TWO: PROCEDURE**

### **10.0 How to raise a concern: (whistle-blowing)**

- 10.1 This document lays down the procedure for employees and other workers to follow if they have genuine concerns about any malpractice connected with the CCG, without fear of adverse repercussions. The dismissal of any individual for making such a disclosure will be automatically unfair.
- 10.2 If an individual believes they have a concern about risk, malpractice or wrongdoing at work or an issue under the Public Interest Disclosure Act or has reason to suspect a colleague, contractor, patient or other person of fraud, or an offence against the CCG or a serious infringement of CCG or NHS rules, they have a responsibility to report this.
- 10.3 Concerns should first be raised with the line manager or a more senior manager, either verbally or in writing. Staff must not assume their manager is already aware of the problem or is dealing with it.
- 10.4 If, for any reason, the person raising the concern is unable to discuss or raise the matter with their line manager or a more senior manager, the following people can be approached:
- FTSU Guardian
  - Any member of the Executive Team
  - Lay Members
  - Prescribed persons (see 7.1)
- 10.5 If the person raising a concern feels they need support, they may approach their Trade Union/ Professional Body representative or a member of Human Resources.
- 10.6 If the person raising the concern believes they have a concern about matters relating to the provision of health and social care, they can raise the concern with the Care Quality Commission (CQC):

#### **CQC National Customer Service Centre**

Citygate  
Gallowgate  
Newcastle upon Tyne NE1 4PA  
Tel: 03000 616161  
[www.cqc.org.uk](http://www.cqc.org.uk)

- 10.7 Employees may contact 'Protect' (contact details on page 15) at any stage for free confidential advice. Employees may be protected when they have made disclosures to any Member of Parliament and can show they suffered as a result.
- 10.8 Additional guidance for managers and staff can be found in the appendices of this document.

## **11.0 Reporting the concern raised**

- 11.1 The manager in receipt of the concern shall advise the FTSU Guardian who will determine if concern raised falls within the scope of the Public Interest Disclosure Act 1998 (see para 4.0). The FTSU Guardian will oversee process implementation and appoint a commissioning manager if an investigation is required. The concern shall be recorded for reporting purposes.

## **12.0 Investigation process: raising a concern (whistle-blowing)**

- 12.1 The FTSU Guardian is responsible for appointing a Whistle-blowing Commissioning Manager to oversee the case. The Whistle-blowing manager will have responsibility for commissioning and overseeing the investigation process. The Whistle-blowing manager shall ensure the process is managed in a timely manner, that support arrangements are offered to the individual and the individual is kept up to date through the process and receives feedback.
- 12.2 The Whistle-blowing manager shall appoint an appropriate investigating officer, who has been trained in undertaking such investigations. Those responsible for receiving and investigating whistle-blowing allegations are suitably trained in interview techniques and how to handle evidence.
- 12.3 Normally the investigation process should take no longer than 4 weeks. Where it is not possible to complete the process within this timescale, the reasons for the delay will be recorded and the expected date for completion of the investigation process communicated in writing to all parties involved. The investigating officer should ensure that the investigations are undertaken as quickly as possible without affecting the quality and depth of those investigations.
- 12.4 The Whistle-blowing manager and complainant will discuss the option of moving role or base during the process, should the complainant wish it.
- 12.5 The HR Team shall advise those involved in the investigation in matters of employment law and other procedural matters.
- 12.6 Any potential disciplinary matters will be dealt with by the CCG through the Disciplinary Policy.
- 12.7 The member of staff raising a concern will be kept informed throughout the process including feedback on progress and the reasons for any change to the agreed timescales, where the CCGs' considers this is appropriate.
- 12.8 If the member of staff raising a concern is not satisfied that their concern has been dealt appropriately by the investigating officer, they have the right to raise it with the Whistle-blowing manager, FTSU Guardian or one of the designated persons described in the appendices in cases of fraud.
- 12.9 If the investigation finds the allegations unsubstantiated and all internal procedures have been exhausted, but the member of staff raising a concern is not satisfied with the outcome of the investigation, the CCG recognises the lawful rights of employees and ex-employees to make disclosures to prescribed bodies (such as the Health and Safety Executive, relevant audit body, or the regulators), or, where justified, elsewhere.

12.10 If, however, the member of staff is not satisfied with any action taken and feels it is right to take the matter outside of the CCG, they should discuss it with the receiver of the issue before sending any information. This is to ensure that they comply with information governance procedures and do not disclose information which should properly remain confidential. Employees and other workers will need to confirm this with the person or organisation they decide to contact.

### **13.0 How to raise a concern: fraud & security**

13.1 Anyone can report concerns about fraud in the NHS. To make a report, the actions below can be taken. Employees and other workers are required to do one of these:

- Contact your Local Counter Fraud Specialist (LCFS) or
- Call the NHS Fraud and Corruption Reporting Line (Freephone 0800 028 4060)
- Contact NHS Counter Fraud Authority for fraud disclosures or
- Use the online reporting form available on the following website:  
<https://cfa.nhs.uk/reportfraud>
- Contact Director of Innovation/IT regarding non-fraud related security issues.

13.2 A list of key personnel in fraud investigations can be found in the appendices.

13.3 The counter fraud policy is available to staff internally and on the CCG's website. The CCGs expects anyone having reasonable suspicions of fraud to report them. While cases of theft are usually obvious, there may initially only be a suspicion regarding potential fraud and employees should therefore report the matter to their Local Counter Fraud Specialist (LCFS) who will then ensure that procedures are followed. LCFS details are in the appendices.

### **14.0 Investigation process: fraud**

14.1 Due to the varied nature of complaints of this kind which may involve internal investigators and / or the police, it is not possible to lay down precise timescales for such investigations. The investigating officer should ensure that the investigations are undertaken as quickly as possible without affecting the quality and depth of those investigations.

14.2 Responsibility for investigating fraud has been delegated to the Chief Finance Officer. The Chief Finance Officer will be supported in this role by the Local Counter Fraud Specialist (LCFS) and NHS Counter Fraud Authority.

14.3 If there are grounds for suspicion of a person's involvement in an offence then they will be invited by the LCFS or NHS Counter Fraud Authority to attend an interview under caution, with legal representation if they so wish.

14.4 The HR Team shall advise those involved in the investigation in matters of employment law and other procedural matters.

14.5 Any potential disciplinary matters will be dealt with by CCGs whilst criminal cases will be progressed by the LCFS or NHS Counter Fraud Authority. In the event that civil action is necessary to recover lost funds this will be taken by the CCG.

- 14.6 If the investigation finds the allegations unsubstantiated and all internal procedures have been exhausted, but the member of staff raising a concern is not satisfied with the outcome of the investigation, the CCG recognises the lawful rights of employees and ex-employees to make disclosures to prescribed bodies (such as the Health and Safety Executive, relevant audit body, or, where justified, elsewhere).
- 14.7 If, however, the individual is not satisfied with any action taken and feels it is right to take the matter outside of the CCG, they should ensure that they do not disclose information which should properly remain confidential. Employees will need to confirm this with the person or organisation they decide to contact.

## **15.0 Feedback process: fraud**

- 15.1 The CCG is committed to providing any individual who raises a concern with as much feedback as possible, without breaking confidentiality which those involved may be entitled to.
- 15.2 The individual who has raised the concern will be told who is handling the matter, how they can be contacted and whether their further assistance will be needed.
- 15.3 Upon request, the CCG will make available to the individual who has raised the issue, a written summary of the concern, together with a proposal on how the matter will be handled where appropriate and without breaching confidentiality.
- 15.4 The CCG cannot advise on the outcome of the investigation and/or actions taken by the CCG if this breaks confidentiality.
- 15.5 Any individual who raises a concern should not be subject to detriment.
- 15.6 The individual should be able to return to their original position or to an alternative position within the CCG where mutually acceptable. A range of options may be considered to provide resolution.
- 15.7 The FTSU Guardian will follow up with the person who raised the concern and their manager to ensure that they have not been subject to retribution. This may involve speaking to the individual, manager and looking at objective measures e.g. appraisal documentation, to identify any potential detriment.

## **16.0 Advice & support**

- 16.1 The CCG is dedicated to providing a safe and open culture in which concerns can be raised. The CCG recognises that taking the decision to speak out is significant for a staff member raising concerns and may cause concern. There are a number of support mechanisms which can be accessed:
- Counselling support through the CCG's local provider, details of which can be provided by HR
  - Coaching, mentoring or mediation can be accessed through HR
- 16.2 At any point either before raising the concern or at any stage in this procedure an individual or other worker may involve a Trade Union or Professional Association Representative who will be able to provide help and advice.

- 16.3 Free, independent and confidential advice can be obtained from the Whistleblowing Helpline for NHS and Social Care on 0800 072 4725. Also support and advice is available from:

<p><b>Protect</b>  The Green House  244-254 Cambridge Heath Road  London, E2 9DA  Protect advice line: 020 3117 2520  <a href="mailto:whistle@protect-advice.org.uk">whistle@protect-advice.org.uk</a>  <a href="https://protect-advice.org.uk">https://protect-advice.org.uk</a></p>	<p><b>The Comptroller and Auditor General</b>  The National Audit Office  157-197 Buckingham Palace Road  Tel: 020 7798 7000  <a href="http://www.nao.org.uk">www.nao.org.uk</a></p>
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## 17.0 Review & reporting

- 17.1 The CCG is committed to taking concerns seriously and reporting openly on the outcomes. Regular reports will be presented to the Remuneration & Workforce Committee.
- 17.2 An annual report will be prepared on whistleblowing activity within the CCG which will include:
- Number and type of concerns raised
  - Outcomes of the investigations
  - Feedback from employees who have used the process
  - Any complaints of victimisation or detriment
  - Any complaints of failures to maintain confidentiality
  - Review of any other reporting mechanisms
  - Review of any other adverse incidents which could have been identified by staff such as complaints, publicity, wrong doing identified by third parties
  - Review of any relevant litigation
  - Review of staff awareness, trust and confidence in the scheme
- 17.3 The Remuneration & Workforce Committee will consider the report and notify the CCG's Executive Team of trends and themes and identify actions to address any identified root causes. Where appropriate, information about investigations under this policy will be generalised and the learning and action taken shared with CCG employees and wider if appropriate.

## 18.0 Storage

- 18.1 The details and records of the concern raised shall be stored / held by the CCGs' under confidential conditions for a period of 8 years from the date of resolution.

## Appendix 1: Guidance

### Guidance to staff member

#### **Q - What should you do if you suspect malpractice?**

**Do** make an immediate note of your concerns

**Do** convey your suspicions to someone with the appropriate authority and experience e.g. line manager, senior manager, FTSU Guardian

**Do** deal with the matter promptly

**Do** tell the FTSU Guardian, LCFS, or the Chief Finance Officer or contact the NHS National Fraud & Corruption reporting line on 0800 028 4060 or report online at <https://cfa.nhs.uk/reportfraud>

The FTSU Guardian is the Chair of the Audit & Governance Committee and contactable through the Director of Corporate Services.

**Don't** do nothing

**Don't** be afraid of raising your concerns

**Don't** accuse any employees directly

**Don't** try to investigate the matter yourself

**Don't** tell anyone about your suspicions other than those with the proper authority

### Guidance to managers

**Do** be responsive to staff concerns

**Do** note details

**Do** try to evaluate the allegation objectively

**Do** deal with the matter promptly

**Do** advise the appropriate person- whether Line Manager, FTSU Guardian or Local Counter Fraud Specialist

**Don't** ridicule suspicions raised by staff member

**Don't** approach or accuse any employees directly

**Don't** convey your suspicions to anyone other than those with the proper authority

**Don't** try to investigate the matter yourself

## **Appendix 2: Fraud investigations – key personnel**

### **Local Counter Fraud Specialist (LCFS)**

The LCFS is responsible for maintaining a record of reported suspicions. They may be approached by an individual with suspicions, and are responsible for reporting the details to the Chief Finance Officer. They are required to investigate cases in accordance with the Secretary of State Directions and the NHS Counter Fraud Authority Standards for Commissioners.

Details of your Local Counter Fraud Specialist is captured within the Anti-Fraud and Bribery policy.

### **Chief Finance Officer**

It is the responsibility of the Chief Finance Officer to monitor and ensure compliance with the counter fraud arrangements under the Secretary of State's Directions.

All instances of fraud must be reported to the Chief Finance Officer.

### **HR Team**

The HR Team will be responsible for ensuring that employment law and the CCG policies and procedures are adhered to throughout the investigation.

### **Accountable Officer**

The Accountable Officer will have an overview of the issues involved and will keep the CCG informed of the progress of any investigation as necessary.

### **Audit & Governance Committee**

The Committee will review the register of reported suspicions on an annual basis. They will also review the LCFS's final reports and consider any necessary improvements to controls.

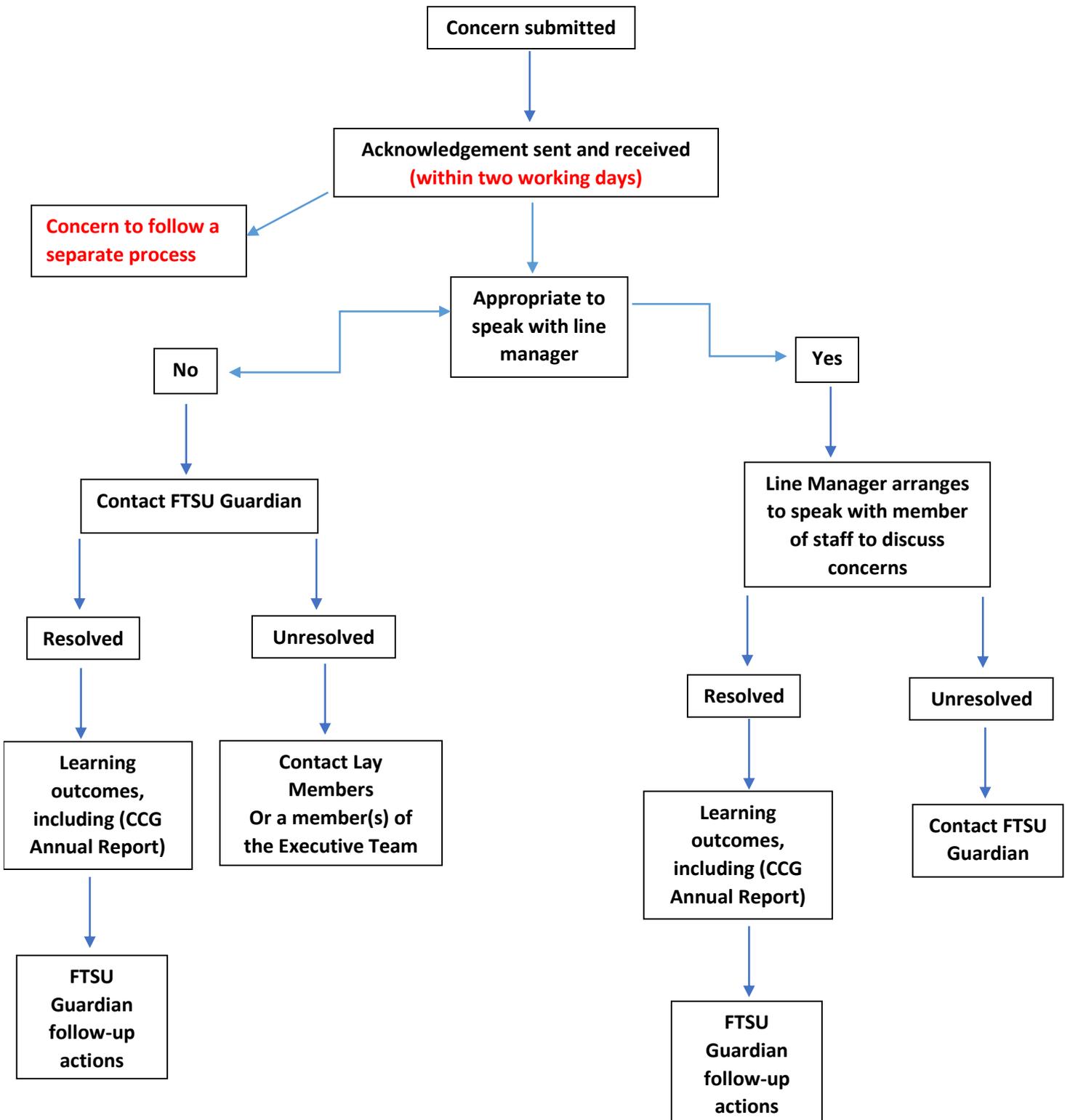
### **Governance Team**

The CCG's Governance Team will be responsible for liaising with the CCG's solicitors where necessary.

### **Managers**

Suspicions will normally be reported to an employee's line manager. The manager will be responsible for passing the details to the HR Team, LCFS or Chief Finance Officer unless it is clear that the suspicions are groundless.

### Appendix 3: Process for managing a concern



**Appendix 4: Reporting concerns raised - data required for NHS England**

Quarterly Return

Date raised	
Nature/Type of Concern	
Complainant status	Employee Bank worker Associate Agency Volunteer Trainee/apprentice Lay member An external organisation An external individual
Equality information of complainant	Gender: Race/Religion/Belief: Disability: Trade Union member:
Outcome of investigation	
Actions agreed to resolve the concern	
Date concern was resolved	
Relevant litigation related to the concern	
Complaints of victimisation or failures to maintain confidentiality	
Description of lessons learnt for shared learning	

## Appendix 5: A vision for raising concerns in the NHS



## **Appendix 6: Equality Impact Assessment**

### **Title of the change proposal or policy:**

Freedom to speak up: raising concerns (whistleblowing policy)

### **Brief description of the proposal:**

This policy incorporates the requirements of the Public Interest Disclosure Act 1998.

### **Name and role of staff completing this assessment:**

Anna McDonald, Business Manager

**Date of assessment:** July 2020

### **Please answer the following questions in relation to the proposed change:**

#### **Will it affect employees, customers, and/or the public? Please state which:**

All individuals including those from external organisations who may wish to make an allegation about the conduct of the CCGs'. Individuals wishing to make allegations about their own organisation should do so in accordance with their own organisations policies, but the CCGs may investigate depending on the nature of the concern.

#### **Is it a major change affecting how a service or policy is delivered or accessed?**

No.

#### **Will it have an effect on how other organisations operate in terms of equality?**

No.

#### **If you conclude that there will not be a detrimental impact on any equality group, caused by the proposed change, please state how you have reached that conclusion:**

There is no anticipated detrimental impact on any equality group. The policy adheres to NHS Resolution (previously NHS Litigation Authority) standards and best practice. Makes all reasonable provision to ensure equity to all staff. There are no statement, conditions or requirements that disadvantage any particular group of people with a protected characteristic.