## FREEDOM TO SPEAK UP: RAISING CONCERNS (WHISTLEBLOWING) POLICY

#### 1. SPEAK UP – WE WILL LISTEN

Speaking up about any concern you have at work is really important. In fact, it's vital because it will help us to keep improving our services for all patients and the working environment for our staff.

You may feel worried about raising a concern, and we understand this. But please don't be put off. In accordance with our duty of candour, Partnerships in Care is committed to an open and honest culture. We will look into what you say and you will always have access to the support you need. Staff are encouraged to come forward with concerns even if these are only suspected – there is no need for a staff member to provide supporting evidence.

This policy should be read in conjunction with:

- PiC HR Policy Grievance Policy and Procedure
- PiC Operational Policy Being Open and Duty of Candour Policy
- PiC Operational Policy *Staff-Patient / Resident Relationships & the Prevention of Abuse*
- PiC Operational Policy Safeguarding
- Local Safeguarding policies
- NHS England <u>Freedom to speak up: raising concerns (whistleblowing) policy</u> for the NHS

This policy should be implemented within the context of the PiC Values:

- Valuing people respecting our staff, patients, their families and communities
- Caring safely for ourselves, our patients, our customers and communities
- Working together with everyone
- Uncompromising integrity, respect and honesty
- Taking quality to the highest level

#### 2. PROTECTION AND SUPPORT FOR WHISTLEBLOWERS

It is understandable that whistleblowers are sometimes worried about possible repercussions. We aim to encourage openness and will support staff who raise genuine concerns in good faith under this policy, even if they turn out to be mistaken.

Staff must not suffer any detrimental treatment as a result of raising a concern in good faith. Detrimental treatment includes dismissal, disciplinary action, threats or other unfavourable treatment connected with raising a concern. If staff believe that they have suffered any such treatments, they should inform their line manager or one of the

other individuals set out in *Appendix A* immediately. If the matter is not remedied, staff should raise it formally using the PiC Grievance Procedure.

Staff must not threaten or retaliate against whistleblowers in any way. Anyone involved in such conduct will be subject to disciplinary action.

#### 3. WHAT CONCERNS CAN I RAISE?

You can raise a concern about risk, malpractice or wrongdoing you think is harming the service we *deliver* or any patient or resident in our care.

A few examples of this might include (but are by no means restricted to):

- Unsafe patient care
- Unsafe working conditions
- Inadequate induction or training for staff
- Lack of, or poor, response to a reported patient safety incident
- A patient safety incident which has not been reported
- Suspicions of fraud
- A bullying culture (across a team or organisation rather than individual instances of bullying).

This policy should not be used for complaints relating to a staff members own personal circumstances, such as the way he or she has been treated at work. In those cases, staff should use the Grievance Procedure.

If staff are uncertain whether something is within the scope of this policy, they should seek advice from their relevant HR Officer or the contacts in *Appendix A.* 

#### 4. WHO CAN RAISE CONCERNS?

Any PiC employee, agency worker or temporary worker can raise a concern.

#### 5. WHO SHOULD I RAISE MY CONCERN WITH?

PiC hopes that in many cases staff will be able to raise any concerns with their line manager. Staff may tell them in person or put the matter in writing if they would prefer. They may be able to agree a way of resolving the staff concerns quickly and effectively.

However, where the matter is more serious, or staff feel that their line manager has not addressed their concerns or staff prefer not to raise it with them for any reason, they should contact one of the following:

- Group Chief Executive
- Regional Operations Director / Regional Executive Director
- Director of Human Resources

- Director of Policy and Regulation
- Executive Medical Director
- The PiC Concern Line 0800 197 2980

Contact details are set out at Appendix A.

If you would like assistance with raising a concern, then you can discuss in confidence with our <u>Freedom to Speak Up Guardian</u>.

#### 6. CONFIDENTIALITY

It is hoped that staff will feel able to voice whistleblowing concerns openly under this policy. However, if staff want to raise concerns confidentially, every effort will be made to respect that wish (unless disclosure is required by law, e.g. to the police). If it is necessary for anyone investigating the staff concern to know his/her identity, this will be discussed with the staff member raising the concern before their identity is given.

Staff are not encouraged to make disclosures anonymously. Proper investigation may be more difficult or impossible if we cannot obtain further information from staff. It is also more difficult to establish whether any allegations are credible and have been made in good faith or to provide feedback.

Whistleblowers who are concerned about possible reprisals if their identity is revealed should come forward to one of the contact points listed in paragraph 5 and appropriate measures can then be taken to preserve confidentiality. If staff are in any doubt, he/she can seek advice from Public Concern at Work, the independent whistleblowing charity, who offer a confidential helpline. Their contact details are in **Appendix A**.

### 7. EXTERNAL DISCLOSURES

The aim of this policy is to provide an internal mechanism for reporting, investigating and remedying any wrongdoing in the workplace. In most cases, staff should not find it necessary to alert anyone externally.

We strongly encourage staff to seek advice before reporting a concern to anyone external. The independent whistleblowing charity, Public Concern at Work, operates a confidential helpline. They also have a list of prescribed regulators for reporting certain types of concern. Their contact details are in *Appendix A*.

Whistleblowing concerns usually relate to the conduct of our staff, but they may sometimes relate to the actions of a third party, such as a customer, supplier or service provider. The law allows staff to raise a concern in good faith with a third party, where the staff reasonably believes it relates mainly to their actions or something that is legally their responsibility. However, staff are encouraged to report such concerns internally first. Staff should contact their line manager or one of the other individuals set out in *Appendix A* for guidance.

#### 8. INVESTIGATION AND OUTCOME

Where it has not been possible to resolve the matter quickly (usually within a few days) or depending on the seriousness of the matter, we will carry out a proportionate investigation using someone suitably independent (usually from a different part of the organisation) and properly trained. We will reach a conclusion within a reasonable timescale (which will be communicated to the person raising the issue). Wherever possible we will carry out a single investigation (so, for example, where a concern is raised about a patient safety incident, we will usually undertake a single investigation that looks at the concern and the wider circumstances of the incident). The investigation will be objective and evidence-based, and will produce a report that focuses on identifying and rectifying any issues, making wider changes within the organisation and learning lessons to prevent problems recurring.

We may decide that the concern would be better looked at under another process; for example, our process for dealing with bullying and harassment. If so, we will discuss that with the person raising the concern.

#### Communicating

We will treat whistleblowers with respect at all times. We will discuss concerns to ensure we understand exactly what the issues are. We will communicate how long we expect the investigation to take and keep the person reporting the concern up to date with its progress and wherever possible, we will share the full investigation report (while respecting the confidentiality of others).

#### How will we learn from your concern?

The focus of the investigation will be on improving the service we provide. Where it identifies improvements that can be made, we will track them to ensure necessary changes are made, and are working effectively. Lessons will be shared with teams across the PiC, or more widely, as appropriate.

#### 9. IF STAFF ARE NOT SATISFIED

PiC will deal with these concerns fairly and in an appropriate way. By using this policy, staff can help PiC to achieve this.

If staff are not happy with the way in which their concerns have been handled, they can raise it with one of the key contacts in paragraph 5 including the PiC Concern Line. See Appendix B.

#### 10. BOARD OVERSIGHT

The PiC Board will be given high level information about all concerns raised by our staff through this policy and what we are doing to address any problems. We will include similar high level information in our annual report. The board supports staff raising concerns and wants you to feel free to speak up.

PiC staff can contact PiC Board members by using the <u>Ward to Board</u> email or via the contact details in *Appendix A.* 

#### APPENDIX A

Group Chief Executive	Joy Chamberlain, I/S	I/S <u>@partnershipsincare.co.uk</u>
Director of Human Resources	Gareth Green, I/S	I/S @partnershipsincare.co.uk
Director of Policy and Regulation	Steven Woolgar, I/S	I/S @partnershipsincare.co.uk
Executive Medical Director	Quazi Haque, I/S	I/S @partnershipsincare.co.uk
PiC Concern Line	0800 197 2980	
Public Concern at Work	Helpline: 0207 404 6609	E-mail: whistle@pcaw.co.uk
(Independent whistleblowing charity)	Website: <u>www.pcaw.co.uk</u>	
		Pelham Woods
		The Dene
		North London Clinic
		Suttons Manor
		Lily Close
		The Copse
		Mildmay Oaks
		Bromley Road
		Albion House
	Kim Hill	Knightsbridge House
Kim Hill	I/S @partnershipsincare.co.uk	Aderyn
Operations Director – South	I/S	Llanarth Court
I/S @partnershipsincare.co.uk		Ty Catrin
I/S		Ty Cwm Rhondda
		Avesbury House
		Evergreen Lodge
		Yew Tree Lodge
		Rosebank House
		Nelson House
		Shottsford House Kneesworth House
	Rosario O'Connell I/S <u>I@partnershipsincare.co.uk</u> I/S	
		o.uk Destablished as
		Pentoid Lodge
		LDS services including: Burston House, St. John's

Mike Bennett Operations Director – North I/S @partnershipsincare.co.uk I/S	Mike Bennett I/S @partnershipsincare.co.uk I/S	House, Lombard House, Richmond House, Hill House, The Croft, Roydon Road, Louies Lane, Harrisons Yard Abbey House Annesley House Calverton Hill Hazelwood House The Willows Arbury Court Kemple View The Spinney Beverley House Beverley House Beverley Lodge Beverley Mews Brunswick House Cleveland House Oak Vale Gardens Vancouver House Meadow View Woodland View Lakeside View 225 Lichfield Road Park Villa Park Lodge Brierley Court
	Myles Paterson I/S I/S	Ayr Clinic including Ayr Gatehouse Stockton Hall Mill Garth Fern Lodge Fairhome Maryhill Riddrie House Spring Wood Lodge

		Kingfisher Rise Riverbank Cragston Court
Kath Murphy Strategic Development Director – Specialised Services I/S @partnershipsincare.co.uk I/S	Kath Murphy I/S @partnershipsincare.co.uk I/S	Althea Park House Ashleigh House Newcombe Lodge Bisley Lodge Ashway Court Rhodes Wood Manor Hall Manor Clinic Ellingham Hospital Kent House Burton Park Brain Injury Services, Essex including: Elm Park, Elm House, Elm Cottage Brain Injury Services, Northampton including: Grafton Manor, Grafton House, 51 The Drive, The Chantry

### **APPENDIX B**

# **PiC Concern Line**

We want everyone for whom we care to be protected from abuse

If you have any concerns please contact your manager immediately

Sometimes it might be difficult to talk to your manager; then call the PiC Concern Line, 24 hrs a day

# 0800 197 2980

Every report of abuse to the Concern Line will be fully and properly investigated

