

## INWO decision report

**Case:** 202208898, Greater Glasgow and Clyde  
NHS Board

**Subject:** Complaint handling



### Summary

C raised concerns about a decision to relocate the Musculoskeletal (MSK) Service at the Vale of Leven Hospital and the ongoing impact of this on the service. C was also unhappy with aspects of the communication and handling of concerns, which they felt was symptomatic of poor management culture.

Following an investigation, the Board acknowledged that the relocation had not been well planned, handled or communicated across the relevant teams. The Board also concluded that communication was inadequate with the MSK service and other services affected by the changes. The Board made a number of recommendations in view of their findings. C was not satisfied with the Board's response and submitted a complaint to the INWO.

In relation to C's complaint about the Board's investigation of their concerns about communication with them by managers, on balance, we were satisfied that the Board's investigation into this issue was reasonable. We did not uphold this aspect of C's complaint.

C also complained about the approach being taken to ensure that the MSK service had appropriate accommodation. We found that the Board's approach to planning the MSK accommodation project and communicating with staff was not effective at managing expectations or keeping staff informed. We upheld this aspect of C's complaint and made recommendations.

Finally, C complained to INWO about the ongoing impact of the relocation. We noted that it appeared that appropriate consideration has been given to interim solutions that may help to mitigate some of the impact of the move. It was also clear that interim options continued to remain under consideration as the accommodation project progressed. We did not uphold this aspect of C's complaint.

We also considered how the Board handled C's concern. We found that the Board's approach to investigation was not effective at maintaining the

confidentiality of the witnesses involved. We made recommendations to the Board regarding their compliance with the National Whistleblowing Standards.

## Recommendations

What we asked the organisation to do in this case:

- Apologise to the relevant individuals for not protecting their identity during the investigation. As part of the apology, the Board should, offer a commitment to support and protect those involved in the investigation (even once it has finished), provide details of a named contact individuals can speak to if they are worried about the risks from their identity not being protected, confirm they will remove the witnesses' personal data from the stage 2 response and outline the steps they will take to prevent a similar issue occurring in future. The apology should also meet the standards set out in the SPSO guidelines on apology available at [www.spsso.org.uk/information-leaflets](http://www.spsso.org.uk/information-leaflets).
- Contact the relevant staff group to acknowledge the findings of the INWO's investigation, apologise for the lack of consistent communication, provide a realistic minimum timescale for completion of the project, and outline a commitment to a regular schedule of updates. The apology should meet the standards set out in the SPSO guidelines on apology available at [www.spsso.org.uk/information-leaflets](http://www.spsso.org.uk/information-leaflets).

What we said should change to put things right in the future:

- Investigations will often identify changes that are needed to provide services more safely and efficiently, or improve governance arrangements (how the organisation is managed and held accountable for its actions). Any improvements must be appropriately planned, making sure that everyone concerned is kept informed of changes.

In relation to complaints handling, we recommended:

- Confidentiality must be maintained in line with the Standards in all aspects of the procedure for raising concerns. Staff need to be confident that their identity will not be shared with anyone other than the people they have agreed can know it, unless the law says that it can or must be. The procedure should be supportive of people who raise a concern and all people involved in the procedure. This extends to maintaining the confidentiality of those involved in the procedure.