Good practice guidance for annual whistleblowing reporting

Contents

Introduction: Reporting under the National Whistleblowing Standards

Why is it important?

1. Boards have a critical role in setting a tone and culture in their organisation that values the contributions of all staff, including those who identify the need for changes through speaking up. Effective monitoring and reporting are part of that role.

What are boards required to do?

2. Under the National Whistleblowing Standards for the NHS in Scotland (the Standards), NHS boards are required to publish an annual report setting out performance in handling whistleblowing concerns. This report should:

    ✓ summarise and build on the quarterly reports produced by the board

    ✓ include performance against key performance indicators (KPIs) as set out in the Standards

    ✓ include and comment on the issues that have been raised in the whistleblowing concerns received, and

    ✓ set out the actions that have been or will be taken to improve services as a result of concerns (ideally with a supporting action plan against which to track and report progress).

Why has the INWO produced this guidance?

3. This guidance is designed to support boards in preparing annual whistleblowing reports, reflecting the INWO's role in

    • providing support and guidance to NHS organisations

    • promoting and sharing good practice in whistleblowing handling

    • promoting and sharing good practice in the recording, reporting, and learning from whistleblowing concerns.

4.   The INWO will review board annual whistleblowing reports against this guidance and publish an overview of findings on the INWO website.

5.   There is a handy KPI checklist in the Appendix.

A good report is…

Anonymous

It must not be possible for readers to identify directly or by deduction, anybody involved in whistleblowing concerns from the information in your report. It may sometimes be necessary to provide more limited information, particularly where there are a small number of cases involved.
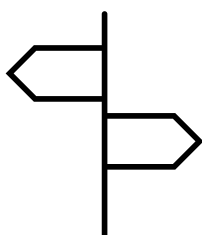
Accessible

Signpost members of the public and staff to your reports. Make sure they are easily accessible and available in alternative formats as requested.

Engaging

Your annual whistleblowing report is your opportunity to share the work you have done in the last year, update on future priorities, and show your Board's commitment to building and measuring an effective speak up culture. You need to report against the KPIs in the Standards, but you can include other updates and priorities too.
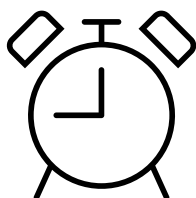
Timely

Share the link to your published annual report with the INWO as soon as it is available. This should be by the end of Quarter 1 (June) and no later than the end of Quarter 2 (September).

Good practice guidance by KPI

6.   This section explains what the INWO expects boards to report to show they comply with the Standards. Boards must report on the 10 KPIs outlined in the table below. This is the minimum requirement. Good practice examples are provided to help boards meet the KPIs. Boards should consider including more information in their report to give a complete picture.

7.   The INWO has developed an Excel tool to support data collection for KPIs 4 – 10.

8.   There is a KPI checklist in the Appendix to this guidance.

Key Performance Indicators	
KPI 1	a statement outlining learning, changes or improvements to services or procedures as a result of consideration of whistleblowing concerns
KPI 2	a statement to report the experiences of all those involved in the whistleblowing procedure (where this can be provided without compromising confidentiality)
KPI 3	a statement to report on levels of staff perceptions, awareness, and training
KPI 4	the total number of concerns received
KPI 5	concerns closed at stage 1 and stage 2 of the whistleblowing procedure as a percentage of all concerns closed
KPI 6	concerns upheld, partially upheld, and not upheld at each stage of the whistleblowing procedure as a percentage of all concerns closed in full at each stage
KPI 7	the average time in working days for a full response to concerns at each stage of the whistleblowing procedure

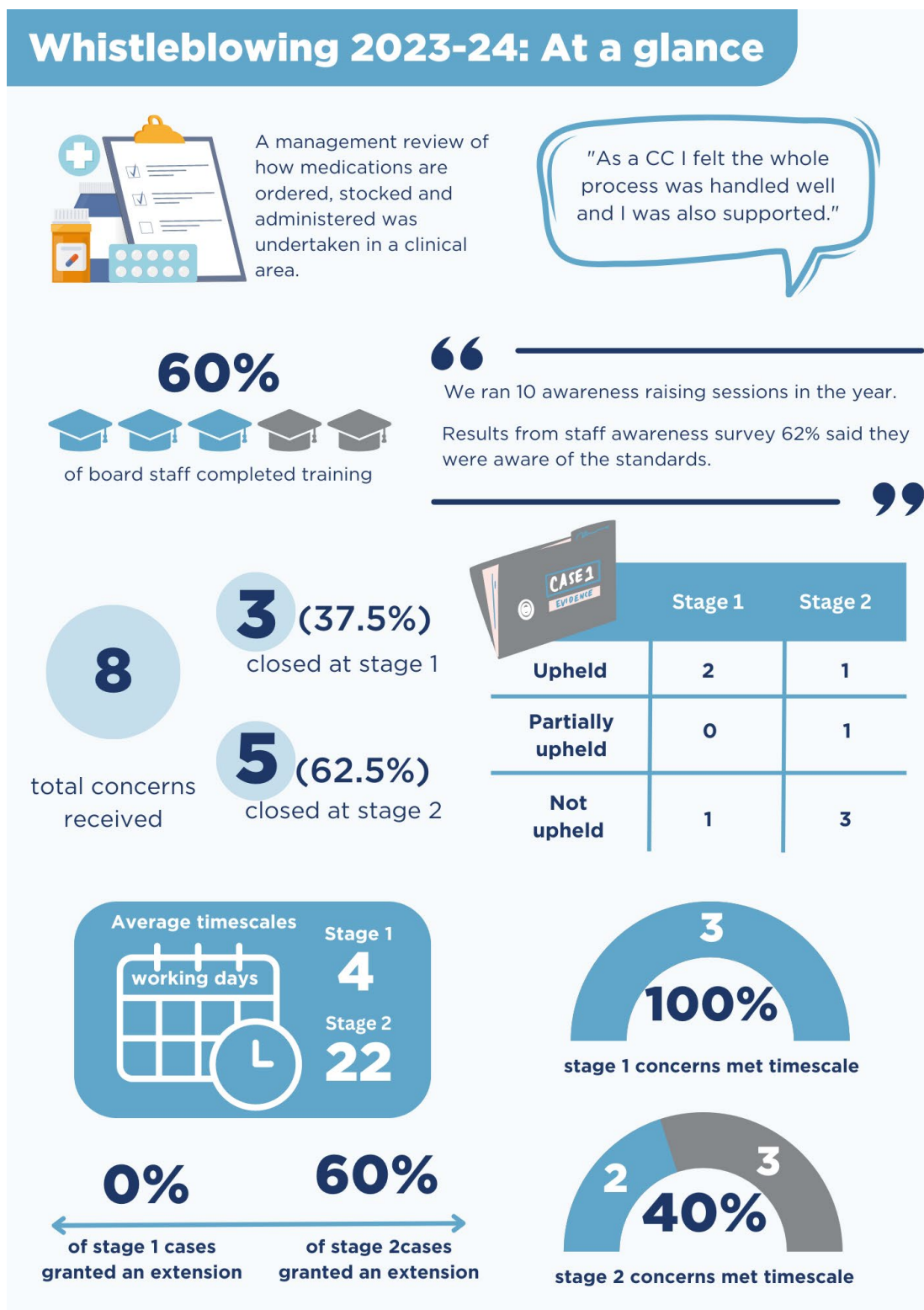| KPI 8	the number and percentage of concerns at each stage which were closed in full within the set timescales of 5 and 20 working days
KPI 9	the number of concerns at stage 1 where an extension was authorised as a percentage of all concerns at stage 1
KPI 10	the number of concerns at stage 2 where an extension was authorised as a percentage of all concerns at stage 2

9. At the beginning of the report, it can be useful to summarise your key findings. This could be displayed as an infographic (as below) or as a short, bulleted list:

Whistleblowing 2023-24: At a glance

A management review of how medications are ordered, stocked and administered was undertaken in a clinical area.

"As a CC I felt the whole process was handled well and I was also supported."

60%
of board staff completed training

" We ran 10 awareness raising sessions in the year.

Results from staff awareness survey 62% said they were aware of the standards. "

8
total concerns received

3 (37.5%)
closed at stage 1

5 (62.5%)
closed at stage 2

CASE 1 EVIDENCE

	Stage 1	Stage 2
Upheld	2	1
Partially upheld	0	1
Not upheld	1	3

Average timescales
working days

Stage 1
4

Stage 2
22

3
100%
stage 1 concerns met timescale

0%
of stage 1 cases granted an extension

60%
of stage 2 cases granted an extension

2
40%
3
stage 2 concerns met timescale

KPI 1: a statement outlining learning, changes or improvements to services or procedures as a result of consideration of whistleblowing concerns

Why is this important?

10. The aim of the Standards and Whistleblowing Procedure is to improve NHS services by learning from whistleblowing concerns. Boards should have organised systems to document and record concerns, outcomes, and actions taken to resolve them.

KPI 1 Good practice in reporting example

KPI 1: a statement outlining learning, changes or improvements to services or procedures as a result of consideration of whistleblowing concerns

Our process for the identification of learning and implementation of improvements

Over the past year we have strengthened our process for capturing learning from whistleblowing concerns and ensuring the necessary changes are implemented.

We have established a Whistleblowing group which undertakes the following:

- monitors the progress of individual whistleblowing concerns from the start of the process all the way through to the implementation of changes and improvements

- checks in on cases six months after an investigation closes to ensure action plans are implemented on time and as agreed

- requests progress reports from the relevant senior manager for each case

- ensures the whistleblower receives feedback on the outcomes of their case and what action has been taken as a result

- monitors for emerging themes across cases that may point to systemic problems and a need for board-wide improvements

- anonymises and redacts action plans and progress reports to ensure the confidentiality of the whistleblower and other individuals involved in the investigation is maintained.

Learning from individual concerns

We have made the following changes as a result of whistleblowing concerns received this year

- carried out a management review of how medications are ordered, stocked, and administered in a clinical area.
- commissioned an external agency to support culture improvement within a clinical area.

Points to remember

11. Maintaining confidentiality is of utmost importance. While it is beneficial to provide as much information as possible, it should not be done at the cost of revealing confidential information. You might need to give only general information, avoiding specifics about the service provided or action taken.

What else can I include?

12. It is helpful to identify and include examples of positive practice as well as areas for improvement or learning.

13. If concerns have been referred to the INWO for review it is helpful to discuss the learning from these.

14. Anything else you feel helps to explain the learning, changes, or improvements you have made as a result of whistleblowing concerns received.

What if we have not had any concerns raised under the whistleblowing standards?

15. You may not have received any concerns under the whistleblowing standards in a reporting year. This might be because no one has chosen to speak up or it could be that issues raised have been dealt with under Business As Usual, with no need to invoke the Standards.

16. This will change the nature of your reporting, meaning KPIs 5 – 10 do not apply. You should state clearly in your report that you have not received any concerns and your consideration of why this is the case.

17. For KPIs 1 and 2, describe the processes you have in place to provide assurance that the correct steps will happen if concerns are received. There

may also be historical whistleblowing concerns that predate the reporting year where learning and implementation of improvements has continued into the reporting year. In these circumstances, include a progress update in your report.

KPI 2: a statement to report the experiences of all those involved in the whistleblowing procedure (where this can be provided without compromising confidentiality)

Why is this important?

18. Whistleblowers, witnesses, confidential contacts, investigators, and all other staff involved in the process can provide unique insight into their experiences. This is an extremely rich and valuable source of feedback on how well things are working.

19. Building check in points and feedback mechanisms into your process will help you support those involved, adjust your approach as needed, and continuously learn and improve. Gathering, storing, and sharing feedback must be done carefully, maintaining confidentiality in line with individuals' wishes.

KPI 2 Good practice in reporting example

KPI 2: a statement to report the experiences of all those involved in the whistleblowing procedure (this can be provided without compromising confidentiality)

At NHS X we recognise the value in understanding the experiences of all those involved in the whistleblowing process. We have been developing our mechanisms for capturing feedback from all parties at different points throughout the process.

The feedback we heard this reporting year and the actions we have taken in response are set out below.

What we heard

What we did

It took a long time to identify the right person to speak to about my concern.

Displayed posters with the photos, names, and contact details of confidential contacts in staff bathrooms and corridors, as well featuring these more prominently on our intranet home page.

Confidential contacts can go a long time in between approaches, making it harder to build up confidence in skills and familiarity with the process.	Increased frequency of refresher training for confidential contacts and built in protected time for confidential contacts to attend the Speak Up Network to share learning and peer support with confidential contacts from across the NHS in Scotland.
Investigators felt they lacked guidance on how they should be following and implementing the Standards when carrying out investigations.	Created a short information sheet on the Standards that we give to external investigators at the point of hiring them. This includes contact details for the INWO team so they can access support and guidance on the process as needed
Those who were the subject of whistleblowing concerns felt they were forgotten about and not well supported during the investigation.	Added a requirement to our local whistleblowing policy that those who are the subject of whistleblowing concerns should be offered a conversation at the outset of the investigation to explore what support they may need and to agree when they can expect to receive progress updates.
All parties felt stage 2 investigations are taking too long, increasing the stress experienced by individuals involved.	Built up a small pool of external investigators meaning we are able to allocate most stage 2 investigations quickly (identifying appropriate investigators was the main cause of delays in previous cases). Strengthened the process in place for keeping individuals regularly updated and supported throughout the process.

Points to remember

20. Confidentiality is critical. While it is helpful to provide as much information as possible, this should not be at the expense of confidentiality. You should always obtain consent before quoting any feedback directly in your report.

What else can I include?

21. Anything else you feel shows how you have sought to understand the experiences of all those involved in the whistleblowing process and what you have learnt and done as a result.

KPI 3: a statement to report on levels of staff perceptions, awareness, and training

Why is this important?

22. Awareness of the Standards is fundamental to their effectiveness and to nurturing a speak up culture. Boards and other NHS providers should ensure that staff – including contractors - have the knowledge and skills to implement and access the Standards.

KPI 3 Good practice in reporting example

**KPI 3: a statement to report on levels of staff perceptions, awareness, and training**

Staff survey

We carried out a survey to understand levels of staff awareness and perceptions of the process at the beginning of the year. This told us there is more we need do to raise awareness of the whistleblowing standards and our confidential contacts, and to support staff to feel comfortable to speak up.

Q - I know about the Whistleblowing Standards

32%

68%
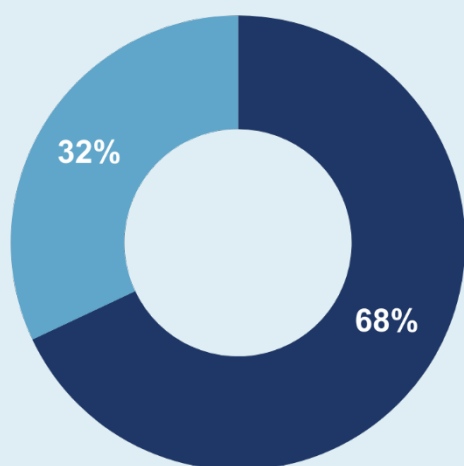
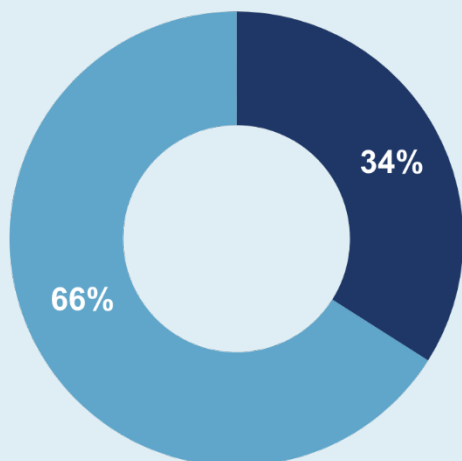Q - I know how to contact NHS X's confidential contacts
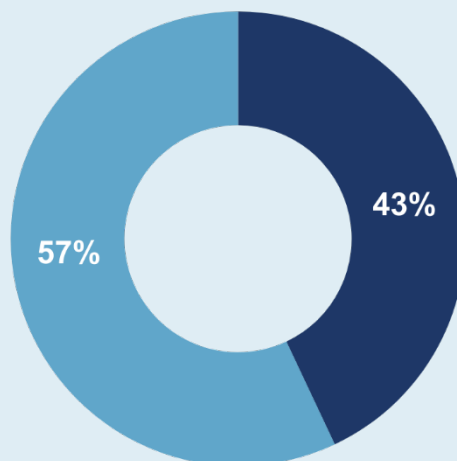
48%

52%
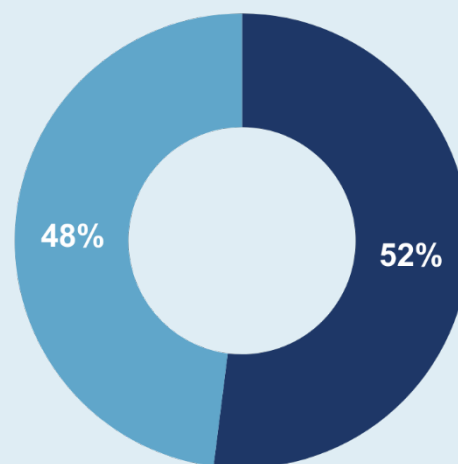
Agree Disagree

Q - I would feel comfortable to raise a concern about NHS X through the Standards

34%

66%

Q - NHS X is doing a good job of applying the Whistleblowing Standards

43%

57%

■ Agree ■ Disagree

In response, we developed an awareness raising programme to promote knowledge and use of the Standards across the board. Activities included:

- ✓ regular posts in the newsletter and on the staff intranet
- ✓ series of 'lunch and learn' sessions open to all staff
- ✓ posters around our main sites with QR codes on them to reach staff without regular computer access

We plan to repeat the staff survey next year to see if our interventions have been successful in raising awareness and promoting a more positive view of NHS X's commitment to the Standards.

Speak Up Week

We ran a programme of activities and content across Speak Up Week which included:

> ➢ 'Meet the Confidential Contacts' sessions
> ➢ a video message from our Whistleblowing Champion and senior managers posted on the intranet and shared in team meetings
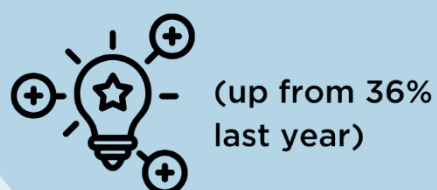> ➢ posts throughout the week on our social media channels

Training

We continued to promote the TURAS online learning modules created by the INWO. These have been completed by:

72% (648) of managers (up from 54% last year)
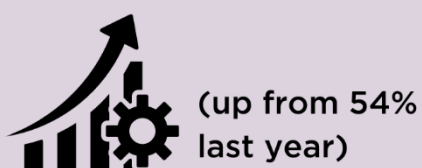
58% (3015) of all staff (up from 36% last year)

We will continue to monitor uptake of this training via NHS Education Scotland and encourage staff who have not yet completed it to do so. We have also created a short training video on speaking up and the Whistleblowing Standards that forms part of the induction for all new staff at the board.

Points to remember

23.   Provide statistics on uptake of training or the results of awareness surveys as a percentage of total staff as well as numbers.

What else can I include?

24.   Results of previous staff awareness surveys can provide a useful comparison to track progress.

25.   Staff feedback from Speak Up Week and other activities throughout the year is a great way to include the staff voice in your report.

26.   Include feedback from staff, what they have told you they think about the Standards and speaking up generally.

27.   Breaking down training numbers by area or department can be helpful to pinpoint areas that need support to increase their uptake.

28.   Anything else you feel helps to explain levels of staff perceptions, awareness, and training in your board.

## KPI 4: the total number of concerns received

Why is this important?

29. Keeping track of the number of whistleblowing concerns is essential for monitoring and reporting. Various data sets can help you to draw conclusions.

30. Ask yourself the "so what?" questions, e.g.

   30.1. so, what are the trends and what does that indicate?

   30.2. so, what conclusions can you draw about speaking up, if any; or

   30.3. do figures indicate more research or exploration is needed?

   30.4. so, what action is needed?

KPI 4 Good practice in reporting example

Table 1: Total number of concerns received in 2023-24 by quarter

	Q1		Q2	Q3	Q4	Total
Total number of concerns received 2023-24	3		3	8	6	20

Fig. 1: Number of whistleblowing concerns received – year-on-year comparison
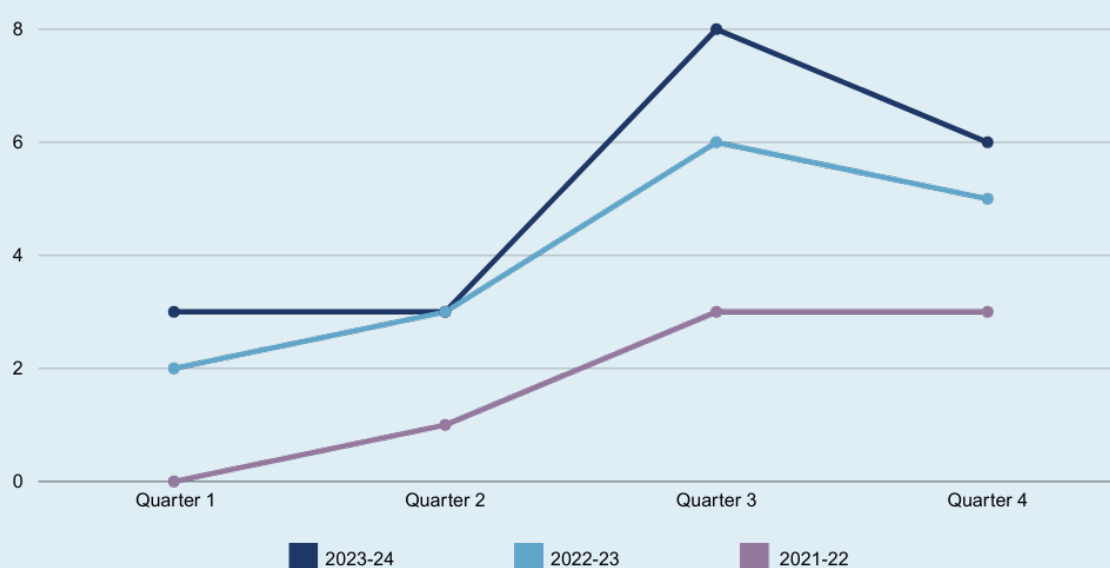
Comparison of our data from the past three years shows a gradual increase in the number of concerns year on year, indicating a growing awareness and confidence in the process.

We have observed a spike in Quarter 3 each year which may be attributable to the increased profile of the whistleblowing process during Speak Up Week. This takes place at the beginning of Quarter 3 each year.

Points to remember

31. Include concerns received within the reporting year regardless of whether they are open or closed at the end of the reporting year. Exclude concerns opened in previous years and carried forward.

32. Include only concerns that have been assessed by the board as appropriate for consideration under the whistleblowing standards.

33. Charts and graphs can be a helpful way to easily compare to previous years. Add relevant commentary to show your interpretation of why numbers have increased, decreased, or remained stable.

What else can I include?

34. You may wish to comment on the number of concerns or approaches received that were not considered under the Standards, but these should NOT be counted in the total number reported under KPI 4 (see points to remember).

35. Anything else you feel helps to explain the number of concerns received

KPI 5: concerns closed at stage 1 and stage 2 of the whistleblowing procedure as a percentage of all concerns closed

Why is this important?

36. Monitoring and reporting how many concerns are handled and closed at each stage of the process provides information about the complexity and risk associated with the issues raised. Previous years' data gives you a comparison to show what is changing, enabling you to say what that means. For example, if more concerns are closed at stage 1, this could indicate improvements in resolving matters quickly.

37. It is not mandatory but can be helpful to separate out in your reporting the number of concerns opened and closed at each stage.

38. The good practice example uses three separate categories to do this:

- Stage 1: closed concerns only ever handled at stage 1

- Stage 2: closed concerns handled initially at stage 1 before moving to stage 2

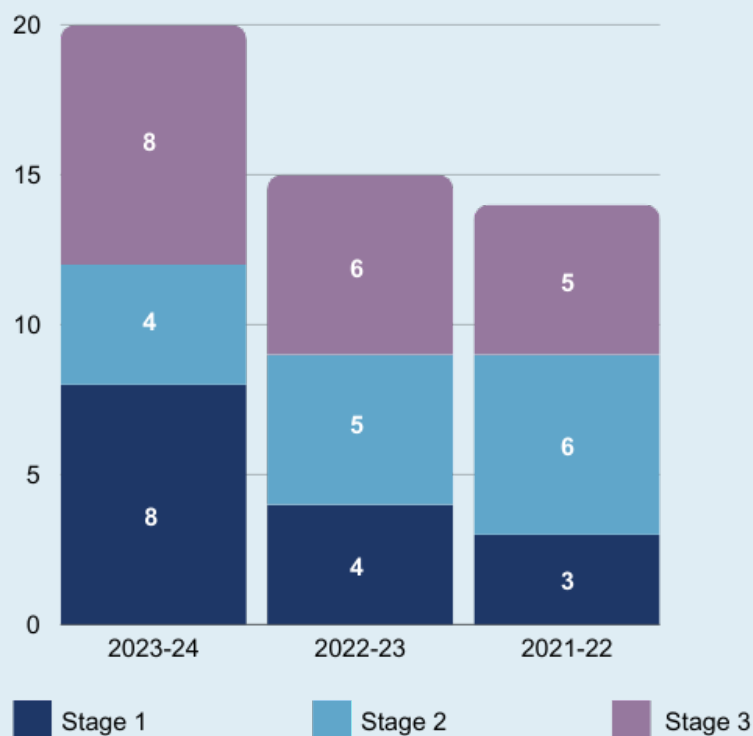- Stage 2 (direct): closed concerns only ever handled at stage 2

KPI 5 Good practice in reporting example

Table 2: Concerns closed at each stage 2023-24

Stage 1	Stage 2	Stage 2 (direct)
8 (40%)	4 (20%)	4 (20%)

Fig. 2: Concerns closed at each stage (year-on-year comparison)

Comparison of our data from the past three years indicates we are resolving more concerns at an early stage. We are also reducing the number of stage 1 concerns that are reopened at stage 2, suggesting an improvement in our handling of concerns.

Points to remember

39.   Include all concerns closed in the reporting year, regardless of whether they were received in the reporting year or previous year.

40.   Avoid double counting concerns that closed at stage 1 and then progressed to stage 2 and closed.

41.   Include stage 2 concerns that have closed even if they have been sent for review by the INWO and are still open with the INWO.

42.   The number of concerns closed will not necessarily match the number of concerns received. Discrepancies are expected due to concerns carried forward from the previous year or into the next reporting year.

43. It is helpful to include comparison data from previous years, along with any relevant commentary to help explain fluctuations or patterns. Explain why things have changed as far as you can.

What else can I include?

44. If any closed concerns have been independently reviewed by the INWO, it is helpful to include this information along with any actions taken or planned as a result of the INWO's involvement.

KPI 6: concerns upheld, partially upheld, and not upheld at each stage of the whistleblowing procedure as a percentage of all concerns closed in full at each stage

Why is this important?

45. Openness and transparency throughout the whistleblowing process is critical. Reporting on outcomes helps to show staff that raising concerns can lead to service improvements and enhance the profile of whistleblowing.

KPI 6 Good practice in reporting example

Table 3: Outcome of all concerns closed 2023-24

	Not upheld		Partially upheld		Fully upheld		Total
	No.	%	No.	%	No.	%	
Stage 1	-	-	1	100%	-	-	1
Stage 2	2	40%	2	40%	1	20%	5

Points to remember

46. Provide the data as both numbers and percentages to meet the KPI.

47. Include outcomes for all concerns closed in the reporting year, regardless of whether they were received in the reporting year or previous year.

48. Avoid double counting concerns that closed at stage 1 and then progressed to stage 2 and closed. The simplest approach is to record outcomes for these concerns only under stage 2, unless you consider it is important to give a more detailed breakdown to show a full local picture.

49. Include stage 2 concerns that have closed locally even if they have been raised with the INWO with and remain open cases

What else can I include?

50. You may wish to include the comparative data from previous reporting years, along with any relevant commentary to help explain the figures.

KPIs 7, 8, 9, 10 all require boards to report on the timeliness of their handling of whistleblowing concerns

Why is this important?

51.   Timescales are important in managing patient safety and organisational risk. Protracted timescales may have a harmful effect on the person raising the concern or the people involved in the investigation. However boards should carry out a thorough investigation that leads to good outcomes, even if that takes longer than 20 days.

52.   Good practice examples for each of these KPIs are set out below but there is some guidance in common.

Points to remember

53.   Provide the data as both numbers and percentages to meet the KPI.

54.   Include outcomes for all concerns closed in the reporting year, regardless of whether they were received in the reporting year or previous year.

What else can I include?

55.   Any accompanying narrative that provides insight into what lies behind the statistics. For example, to explain any outliers or local factors causing delays in the process.

56.   You may wish to include comparative data from previous years, along with any relevant commentary.

KPI 7: the average time in working days for a full response to concerns at each stage of the whistleblowing procedure

KPI 7 Good practice in reporting example

Table 4: Average response times to whistleblowing concerns in the Acute Medical Unit

	Acute (working days)
Stage 1	7
Stage 2	138

57. Five concerns were closed at stage 2 last year. One of these took over 250 days which has impacted the average figure. This concern involved a number of complex issues and required us to obtain an opinion from an independent expert. Given the highly specialist nature of the advice needed and the small number of individuals with the appropriate expertise, it took some time to identify a suitable expert who did not have a conflict of interest. We kept the whistleblower regularly updated throughout.

58. Excluding this case, the average length of time it took to close the remaining four stage 2 concerns was 52 days. This is a reduction from 88 days in the previous reporting year.

KPI 8: the number and percentage of concerns at each stage which were closed in full within the set timescales of 5 and 20 working days

KPI 8 Good practice in reporting example

Table 5: Number and percentage of concerns closed within the set timescale by stage

Stage 1	(5 days)	
	Number of concerns closed in full within 5 working days	4 (80%)
Stage 2	(20 days)	
	Number of concerns closed in full within 20 working days	2 (40%)

KPI 9: the number of concerns at stage 1 where an extension was authorised as a percentage of all concerns at stage 1

Good practice in reporting example

Table 6: Number of stage 1 concerns closed where an extension was authorised

Concern	Numbers received	Extension authorised	As % of all concerns
Stage 1	2	1	50%

KPI 10: the number of concerns at stage 2 where an extension was authorised as a percentage of all concerns at stage 2

Good practice in reporting example

Table 7: Number of stage 2 concerns closed where an extension was authorised

Concern	Numbers received	Extension authorised	As % of all concerns
Stage 2	1	1	100%

Additional content ideas

In addition to reporting against the 10 KPIs you may wish to include…
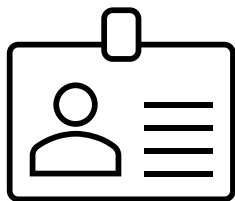
Confidential contacts

Annual Reports are a good opportunity to remind staff who their confidential contacts are and how they can contact them.

Support for those involved in the process

It is good practice to explain how those involved in the process are being supported, including protection from detriment.
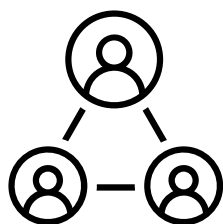
Governance arrangements

Providing details of the governance and oversight of whistleblowing gives wider assurance it is taken seriously by the board.
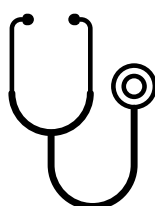
Primary care and contracted services

NHS boards are responsible for ensuring that all primary care and other contracted service providers report their whistleblowing KPI information to their board. It is helpful to report on these contractual relationships, describing the support provided to primary care and learning and improvements.
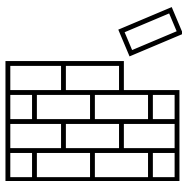
Themes

It can help to build a more detailed local and national picture to report whistleblowing concerns thematically. Examples of themes could be patient safety, quality of care, record keeping, staffing levels. The INWO team can provide more advice on this.
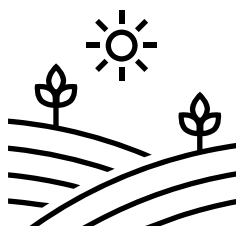
Thank you

Your annual report is an opportunity to publicise and celebrate the benefits of your speak up culture and build trust and confidence in how that culture contributes to learning and improvements in NHS services.

You might wish to acknowledge the achievements of individuals throughout the year and publicly thank everyone for contributions, whether as a whistleblower, those who contributed to investigations, or those involved more widely in building a healthy speak up culture in your board.

Appendix: KPI checklist

KPI	Requirement	✔
1	a statement outlining learning, changes or improvements to services or procedures as a result of consideration of whistleblowing concerns	
2	a statement to report the experiences of all those involved in the whistleblowing procedure (where this can be provided without compromising confidentiality)	
3	a statement to report on levels of staff perceptions, awareness, and training	
4	the total number of concerns received	
5	concerns closed at stage 1 and stage 2 of the whistleblowing procedure as a percentage of all concerns closed	
6	concerns upheld, partially upheld, and not upheld at each stage of the whistleblowing procedure as a percentage of all concerns closed in full at each stage	
7	the average time in working days for a full response to concerns at each stage of the whistleblowing procedure	
8	the number and percentage of concerns at each stage which were closed in full within the set timescales of 5 and 20 working days	
9	the number of concerns at stage 1 where an extension was authorised as a percentage of all concerns at stage 1	
10	the number of concerns at stage 2 where an extension was authorised as a percentage of all concerns at stage 2	