



## RISK, AUDIT AND PERFORMANCE COMMITTEE

<b>Date of Meeting</b>	9 August 2022
<b>Report Title</b>	Whistleblowing Policies Update
<b>Report Number</b>	HSCP22.057
<b>Lead Officer</b>	Sandra MacLeod
<b>Report Author Details</b>	Name: Sandra MacLeod Job Title: Chief Officer Email Address: <i>samacleod@aberdeencity.gov.uk</i> Phone Number: 01224 523107
<b>Consultation Checklist Completed</b>	Yes
<b>Appendices</b>	No

### 1. Purpose of the Report

- 1.1. The purpose of the report is to provide the Integration Joint Board (IJB) with an overview of whistleblowing policies relevant to the IJB and the Aberdeen City Health and Social Care Partnership (ACHSCP).

### 2. Recommendations

- 2.1. It is recommended that the Risk, Audit and Performance Committee:
- a) Note the details contained in the report.

### 3. Summary of Key Information

- 3.1. The Committee at its meeting on the 26th of April, 2022 considered a quarterly report on whistleblowing and noted that there were no incidents to report during that quarter and asked that a report on Whistleblowing policies and reporting be brought to a future Committee.



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- 3.2.** There are three main policies relevant to the IJB and ACHSCP; the National Whistleblowing Standards, Aberdeen City Council's Whistleblowing Policy and the IJB's Whistleblowing Policy.
- 3.3.** Whistleblowing is when a person, usually working with or in a public service, raises a concern of mismanagement, corruption, illegality, or some other wrongdoing. The public value of whistleblowing has been increasingly recognised since the term was introduced in the 1960s and is an invaluable mechanism for organisations to become aware of issues that need to be addressed.
- 3.4.** Another helpful definition of whistleblowing is when someone who works (or worked) within an organisation raises a concern that relates to speaking up in the public interest where an act or omission has created, or may create, a risk of harm or wrongdoing, or exposes information or activity that is deemed illegal, unsafe, or a waste, fraud, or abuse of taxpayer funds.

### National Whistleblowing Standards

- 3.5.** National Whistleblowing Standards have been produced by the Independent National Whistleblowing Officer's Department and came into effect on 1 April 2021.
- 3.6.** NHS Grampian, the three Health and Social Care Partnerships (H&SCPs) and other relevant Partners have a clear ambition to develop a culture that welcomes, handles and responds to concerns in a caring, supportive and proactive way, from any member of staff and others who are delivering NHS services in the Grampian area.
- 3.7.** To achieve this, work has been undertaken across the system to embed an efficient, consistent, system wide approach to promote, encourage and learn from whistleblowing concerns raised throughout Grampian. The Partnership's Senior Leadership Team received a presentation on the launch of the Standards ahead of the 1st of April, 2021 and have since communicated the Standards across the Partnership (and with Aberdeen City Council). Members of the Partnership's Senior Leadership Team have met with NHSG Board's Whistleblowing Champion to discuss how the 3 Partnerships in Grampian can further promote the standards. A joint



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Partnership and NHSG meeting is to be arranged to further discuss this. It is also proposed to provide additional information on the standards to all the providers that the Partnership are contracted with.

- 3.8.** Whistleblowing Concerns can be raised by anyone who is (or has been) providing services for the NHS, or working to provide services with NHS staff which includes:
- All NHS Grampian staff.
  - All Health and Social Care staff.
  - All those working in non-private Primary Care Services (including both salaried and independent practices).
  - Anyone contracted to provide services for NHS Grampian.
  - All Agency staff and Locums.
  - All Students, Trainees and Apprentices.
  - All Volunteers and Third Sector Organisations.
- 3.9.** NHS Grampian are to continue to communicate the Standards across the sectors, including commissioned services and the 3rd Sector, as well as signposting staff to training on the Standards held on Turas.
- 3.10.** In terms of reporting, Whistleblowing incidents captured through the process will be reported to both the IJB and NHS Grampian on a quarterly basis. It is proposed that the Risk, Audit and Performance Committee receive the quarterly reports when there are incidents to report, if there are no incidents to report then a brief update will be provided in the Committee's Business Planner.
- Aberdeen City Council Whistleblowing Policy
- 3.11.** This policy applies to all employees and workers, including agency staff, workers who are self-employed, sub-contractors and workers employed by an outsourced contractor providing Council services.
- 3.12.** The policy allows individuals to voice their concerns in relation to information they believe shows serious malpractice or wrongdoing within Aberdeen City Council. This could be in respect of a concern raised by a junior employee against a more senior employee or against an employee at the same level in the organisation as the person who raised the matter. It allows for this



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information to be disclosed internally without fear of reprisal and independently of their line management if appropriate.

- 3.13.** This policy should be used to assist individuals who have serious concerns or believe they have discovered malpractice or impropriety. It is intended to encourage and enable individuals to raise serious concerns within the Council rather than overlooking the issue or raising them outside the Council.
- 3.14.** Although the Council policy does not apply directly to health staff (NHS staff) who are working alongside Council staff, any concern should be raised with the Council, so it can be looked into. The Council's senior management can then decide on how it is handled - e.g. either through the Whistleblowing procedure itself; or by undertaking a general investigation, as appropriate. This would follow the spirit of the whistleblowing legislation about giving protection to the person who raises the concern.
- 3.15.** The Policy does not relate to members of the public who have concerns regarding the Council, members of the public would be encouraged to use the Council Complaints Procedure

### IJB Whistleblowing Policy

- 3.16.** Officers from the Partnership liaised with the Independent National Whistleblowing Officer's Department regarding the production of a Whistleblowing Policy for the IJB. The Independent National Whistleblowing Officer's view was that although IJB's do not have to have a separate Policy, it would be good practice to establish such a Policy.
- 3.17.** As a result, the IJB approved a Whistleblowing Policy for the IJB at its meeting on the 6<sup>th</sup> of July, 2021.
- 3.18.** The Policy relates to all IJB Members and Office Holders of the Board and is committed to dealing responsibly, openly and professionally with any genuine concerns held by staff of the Aberdeen City Health and Social Care Partnership, Members of the Board or Office Holders, encouraging them to report any concerns about wrongdoing or malpractice within the IJB, which they believe has occurred.
- 3.19.** The aim of this policy is to ensure that staff and Members are fully aware of the types of matters that they should report and the reporting procedure they



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should follow to raise any genuine concerns about any possible wrongdoing or malpractice, at an early stage, without fear of penalty or victimisation.

- 3.20.** The Policy does not relate to members of the public who have concerns regarding the IJB, members of the public would be encouraged to use the IJB Complaints Procedure.

### **4. Implications for IJB**

- 4.1. Equalities, Fairer Scotland and Health Inequality** - there are no implications in relation to our duties under the Equalities Act 2010 and Fairer Scotland.
- 4.2. Financial** - there are no immediate financial implications arising from this report.
- 4.3. Workforce** - there are no immediate workforce implications arising from this report.
- 4.4. Legal** - there are no immediate legal implications arising from this report.
- 4.5. Unpaid Carers** - there are no implications relating to unpaid carers arising from this report.

### **5. Links to ACHSCP Strategic Plan**

- 5.1.** The report is linked to all of the strategic aims of the Partnership's Strategic Plan.

### **6. Management of Risk**



- 6.1. Identified risks(s)-** Identified risks(s) - The updates provided link to the Strategic Risk Register in a variety of ways, as detailed below.
- 6.2. Link to risks on strategic or operational risk register-** The main issues in this report directly link to the following Risk on the Strategic Risk Register:



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6- There is a risk of reputational damage to the IJB and its partner organisations resulting from complexity of function, delegation and delivery of services across health and social care.

- 6.3. How might the content of this report impact or mitigate these risks-** The Chief Officer will monitor progress towards mitigating the areas of risk closely and will provide further detail to the IJB should she deem this necessary.

Approvals	
	Sandra Macleod (Chief Officer)
	Alex Stephen (Chief Finance Officer)