

## Whistleblowing Policy 6.0 (raising concerns)

<b>Document type:</b>	Policy		
<b>Document owner:</b>	Taff Gidi, Assistant Director Corporate Governance (Freedom to Speak Up Guardian) <span style="color: red;">Anita Pisani, Deputy Chief Executive</span>		
<b>Originating service:</b>	Trust Board		
<b>Scope:</b>	Trust wide		
<b>Standards, legislation &amp; key related documents:</b>	<p>Individuals are protected by law against the harmful conduct of others and should not be subjected to harassment or bullying during the course of employment. This policy is written in accordance with ACAS guidelines and supports Care Quality Commission Fundamentals of Care standards.</p> <p>All Trust policies and procedures relating to counter fraud, safeguarding, dignity and risk.</p> <p style="color: red;">National Guardian's Office/NHS Improvement's guidance for boards on Freedom to Speak Up in NHS Trusts and NHS Foundation Trusts</p>		
<b>Approved by:</b>	Trust Board		
<b>Date approved:</b>	July 2018	<b>Review date:</b>	March 2020
<b>Financial implications:</b>	Where a document has any financial implications on the Trust, the Local Counter Fraud Specialist (LCFS) has the authority to investigate and challenge this document in regards to current fraud and bribery legislation and to ensure appropriate counter fraud measures are in place. LCFS contact details are available on the Trust's Intranet.		
<b>Equality &amp; Diversity Impact (EDIA):</b>	EDIA completed on this document and there are no negative impacts. The EDIA assessment tool is attached to this document.		
<b>Key word search:</b>	Raising concerns, Whistleblowing, Whistle blowing, Whistleblow, matters, concern, whistle, blow, freedom, speak, speak-up.		
<b>This is a controlled document.</b> Whilst it may be printed, the electronic version on the Trust's Intranet is the controlled copy. Any printed copies are not controlled.			

## VERSION CONTROL SUMMARY

Version	Page No.	Description of change	Date approved
1	various	First issue	2007
2	various	Reviewed and updated	
3	various	Reviewed and updated	January 2016
4	various	<ol style="list-style-type: none"> <li>1. To adopt 'standard integrated policy', in line with recommendations of the review by Sir Robert Francis into whistleblowing in the NHS.</li> <li>2. To reflect the Higher Education England enhanced protection on whistleblowing for doctors in training.</li> </ol>	March 2017
6		Policy updated to reflect Guidance for boards on Freedom to Speak Up in NHS trusts and NHS foundation Trusts (May 2018) and to incorporate the Self Review Tool.	July 2018

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## 1.0 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, our senior leaders and entire board are 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.

## 2.0 This policy

This 'standard integrated policy' was one of a number of recommendations of the review by Sir Robert Francis into whistleblowing in the NHS, aimed at improving the experience of whistleblowing in the NHS. The Trust has adopted this policy (produced by NHS Improvement and NHS England) a minimum standard to help to normalise the raising of concerns for the benefit of all patients.

Our local process has been integrated into the policy/adheres to the principles of this policy and provides more detail about how we will look into a concern.

## 3.0 What concerns can I raise?

3.1 You can raise a concern about **risk, malpractice or wrongdoing** you think is harming the service we deliver. Just 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
- suspicions of fraud
- a bullying culture (across a team or organisation rather than individual instances of bullying).

3.2 For further examples, please see the [Health Education England video](#).

3.3 Remember that if you are a healthcare professional you may have a professional duty to report a concern. **If in doubt, please raise it.**

3.4 Don't wait for proof. We would like you to raise the matter while it is still a concern. It doesn't matter if you turn out to be mistaken as long as you are genuinely troubled.

3.5 This policy is not for people with concerns about their employment that affect only them – that type of concern is better suited to our grievance policy which is available on the intranet.

#### **4.0 Feel safe to raise your concern**

- 4.1** The Public Interest Disclosure Act (1998) encourages people to raise concerns about malpractice in the workplace and in doing so requires employers to respond by addressing the message rather than action against the messenger. It does this by preventing an employer taking disciplinary action against, or victimising a member of staff who genuinely raises a concern. Harassment or victimisation of anyone raising a genuine concern will not be tolerated by the Trust. Where this occurs, appropriate action will be taken under the appropriate Trust policy and the individuals responsible will be personally liable.
- 4.2** The Board, Chief Executive and the staff unions are committed to this policy. If you raise a genuine concern under this policy, you will not be at risk of losing your job or suffering any form of reprisal as a result. We will not tolerate the harassment or victimisation of anyone raising a concern. Nor will we tolerate any attempt to bully you into not raising any such concern. Any such behaviour is a breach of our values as an organisation and, if upheld following investigation, could result in disciplinary action.
- 4.3** Provided you are acting honestly, it does not matter if you are mistaken or if there is an innocent explanation for your concerns.

#### **5.0 Confidentiality and Anonymity**

- 5.1** We hope you will feel comfortable raising your concern openly, but we also appreciate that you may want to raise it confidentially. This means that while you are willing for your identity to be known to the person you report your concern to, you do not want anyone else to know your identity. If you wish to raise your concern confidentially, please specify this at the outset. If a request is made by the whistleblower for the Trust to protect their identity and keep confidence, the Trust will not disclose this information without the consent of the whistleblower, unless required to disclose it by law).
- 5.2** You can choose to raise your concern anonymously, without giving anyone your name, but that may make it more difficult for us to investigate thoroughly and give you feedback on the outcome.

#### **6.0 Who can raise concerns?**

- 6.1** Anyone who works (or has worked) in the Trust, or for an independent organisation that provides services on behalf of the Trust can raise concerns. This includes agency workers, temporary workers, students, contractors and volunteers.

#### **7.0 Who should I raise my concern with?**

- If you have a concern about a risk, malpractice or wrongdoing at work, we hope you will feel able to raise it first with your line manager, lead clinician or mentor/professional lead (for students). This may be done orally or in writing.
- If the whistleblower does not want to raise the concern directly with the line manager, they should contact the next manager higher within the structure.
- If the concern relates to the possible abuse of vulnerable adults, the Trust Safeguarding Vulnerable Adults policy must be adhered to.

- If the concern relates to the possible abuse of children, the Trust's Safeguarding Children Policy must be adhered to.
- If raising your concern through the above channels does not resolve matters, or you do not feel able to raise it with them, you can contact one of the following people:

### 7.1 Service Directors

If you need to escalate any concerns raised or cannot report the concern to your Line Manager or service manager for any reason, please contact the relevant Service Director.

Tracey Cooper – Ambulatory Care - [tracey.cooper3@nhs.net](mailto:tracey.cooper3@nhs.net)

John Peberdy – Children & Young People's Service - [jpeberdy@nhs.net](mailto:jpeberdy@nhs.net)

Linda Sharkey – Luton Children & Adults - [linda.sharkey@nhs.net](mailto:linda.sharkey@nhs.net)

Rachel West – Bedfordshire Children's Service - [rachel.west1@nhs.net](mailto:rachel.west1@nhs.net)

### 7.2 Concerns about Fraud

In cases where fraud, financial malpractice and/or corruption are suspected, concerns MUST only be discussed with the Director of Finance and Resources or the Local Counter Fraud Specialist, NOT your line manager. In cases where the issues concern the Director of Finance and Resources please contact the Chief Executive. Please see the Trust's Counter Fraud, Corruption and Bribery Policy for more details. A copy of this policy can be accessed on the intranet.

### 7.3 Guardian of Safe Working Hours

The role of the guardian of safe working hours is to ensure that working conditions are safe for doctors and patients. They support safe care for patients through protection and prevention measures to stop doctors working excessive hours. [Click here](#) for more information on Guardians of Safe Working Hours.

The Trust's guardian of safe working hours is Dr Jorge Zimbron. He can be contacted on [Jorge.zimbron@cpft.nhs.uk](mailto:Jorge.zimbron@cpft.nhs.uk)

7.4 If you **still** remain concerned after this, you can contact:

#### 7.4.1 Freedom to Speak Up Guardian

This is an important role identified in the Freedom to Speak Up review to act as an independent and impartial source of advice to staff at any stage of raising a concern, with access to anyone in the organisation, including the Chair and Chief Executive, or if necessary, outside the organisation.

The Trust's Freedom to Speak Up Guardian is Taff Gidi, the Assistant Director of Corporate Governance. He can be contacted on [taff.gidi@nhs.net](mailto:taff.gidi@nhs.net) or 01480308219.

#### 7.4.2 Nominated Executive Director

Anita Pisani, Deputy Chief Executive, is the Trust's Executive Director with responsibility for whistleblowing. [anita.pisani@nhs.net](mailto:anita.pisani@nhs.net) or 014803082

The executive lead is responsible for:

- ensuring they are aware of latest guidance from National Guardian's Office
- overseeing the creation of the FTSU vision and strategy
- ensuring the FTSU Guardian role has been implemented, using a fair recruitment process in accordance with the example job description and other guidance published by the National Guardian
- ensuring that the FTSU Guardian has a suitable amount of ring fenced time and other resources and there is cover for planned and unplanned absence ensuring that a sample of speaking up cases have been quality assured
- conducting an annual review of the strategy, policy and process
- operationalising the learning derived from speaking up issues
- ensuring allegations of detriment are promptly and fairly investigated and acted on
- providing the Board with a variety of assurance about the effectiveness of the trusts strategy, policy and process.

#### 7.4.3 Nominated Non-Executive Director

Geoff Lambert, the Chair of the Audit Committee, is the Non-Executive Director with responsibility for whistleblowing. He can be contacted on [geoff.lambert1@nhs.net](mailto:geoff.lambert1@nhs.net)

The non-executive lead is responsible for:

- ensuring they are aware of latest guidance from National Guardian's Office
- holding the chief executive, executive FTSU lead and the board to account for implementing the speaking up strategy. Where necessary, they should robustly challenge the board to reflect on whether it could do more to create a culture responsive to feedback and focused on learning and continual improvement
- role-modelling high standards of conduct around FTSU
- acting as an alternative source of advice and support for the FTSU Guardian
- overseeing speaking up concerns regarding board members

### 7.5 Chair and Chief Executive

7.5.1 The Chief Executive is responsible for appointing the FTSU Guardian and is ultimately accountable for ensuring that FTSU arrangements meet the needs of the workers in their trust.

7.5.2 The Chief Executive and Chair are responsible for ensuring the annual report contains information about FTSU and that the Trust is engaged with both the regional Guardian network and the National Guardian's Office.

7.5.3 Both the Chief Executive and Chair are key sources of advice and support for their FTSU Guardian and meet with them regularly.

## 7.6 Director of Workforce

The Director of Workforce is responsible for:

- ensuring that the FTSU Guardian has the support of HR staff and appropriate access to information to enable them to triangulate intelligence from speaking up issues with other information that may be used as measures of FTSU culture or indicators of barriers to speaking up
- ensuring that HR culture and practice encourage and support speaking up and that learning in relation to workers' experience is disseminated across the Trust
- ensuring that workers have the right knowledge, skills and capability to speak up and that managers listen well and respond to issues raised effectively.

## 7.7 Medical Director and Chief Nurse

The medical director and director of nursing are responsible for:

- ensuring that the FTSU Guardian has appropriate support and advice on patient safety and safeguarding issues
- ensuring that effective and, as appropriate, immediate action is taken when potential patient safety issues are highlighted by speaking up
- ensuring learning is operationalised within the teams and departments they oversee.

7.8 All these people have been trained in receiving concerns and will give you information about where you can go for more support.

If these channels have been followed and you still have concerns, or if you feel that the matter is so serious that you cannot discuss it with any of the above, you may also write directly to the Chief Executive or the Trust Board Chair in confidence. Where this is not appropriate, the concern may be raised with other members of the Trust Board. An investigating officer will then be appointed to meet with you on their behalf and to report back on the outcome.

## 7.9 Chair and Chief Executive

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7.8.2 The Chief Executive and Chair are responsible for ensuring the annual report contains information about FTSU and that the Trust is engaged with both the regional Guardian network and the National Guardian's Office.

7.8.3 Both the Chief Executive and Chair are key sources of advice and support for their FTSU Guardian and meet with them regularly.

**7.10** If for any reason you do not feel comfortable raising your concern internally, you can raise concerns with external bodies, listed on **page 8 & 9**

## 8 Advice and support

- 8.4 Details on the local support available to you can be found on the 'Freedom to Speak Up' page on the intranet.
- 8.5 **Trade Union** - You can also receive advice and support from your trade union representatives. Contact details are available on the 'Staff Side Information' page on intranet.
- Concerns can be raised anonymously through Heather Bennett - (Staffside Chair)  
[Heather.bennett3@nhs.net](mailto:Heather.bennett3@nhs.net)
- 8.6 **Whistleblowing Helpline** - you can also contact the Whistleblowing Helpline for the NHS (contact details on page 10) and social care or your professional body.
- 9 **How should I raise my concern?**
- 9.4 You can raise your concerns with any of the people listed above in person, by phone or in writing (including email).
- 9.5 Whichever route you choose, please be ready to explain as fully as you can the information and circumstances that gave rise to your concern.
- 9.6 To ensure confidentiality when raising a concern, for concerns raised in writing, please mark the envelope or email ***'Strictly Private and Confidential to be opened by Addressee Only'***
- 10 **Whistleblowing Log**
- 10.4 The Freedom to Speak Up Guardian is responsible for maintaining the Trust's whistleblowing register.
- 10.5 All concerns raised should be reported to the Freedom to Speak Up Guardian so that they are recorded on the whistleblowing register.
- 10.6 If the concern is raised locally with a line manager, lead clinician or mentor/professional lead (for students), it is the responsibility of the manager to whom the concern was reported to ensure the concern is added to the whistleblowing register.

## 11 What will we do?

- 11.4 We are committed to the principles of the Freedom to Speak Up review and its vision for raising concerns, and will respond in line with them (see **Annex B**).
- 11.5 We are committed to listening to our staff, learning lessons and improving patient care. On receipt the concern will be recorded and you will receive an acknowledgement within two working days. The central record will record the date the concern was received, whether you have requested confidentiality, a summary of the concerns and dates when we have given you updates or feedback.

### Investigation

- 11.6 Where you have been unable to resolve the matter quickly (usually within a few days) with your line manager, we will carry out a proportionate investigation – using someone suitably independent (usually from a different part of the organisation) and properly trained – and we will reach a conclusion within a reasonable timescale (which we will notify you of). 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 your concern and the wider circumstances of the incident<sup>3</sup>). The investigation will be objective and evidence-based, and will produce a report that focuses on identifying and rectifying any issues, and learning lessons to prevent problems recurring. Any concerns that relate to clinical practice/safety will also be initially reviewed by the Trust's Medical Director and/or Chief Nurse to ensure appropriate clinical oversight to any investigation is put in place.
- 11.7 We may decide that your 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 you.
- 11.8 Any employment issues (that affect only you and not others) identified during the investigation will be considered separately.

### Communicating with you

- 11.9 We will treat you with respect at all times and will thank you for raising your concerns. We will discuss your concerns with you to ensure we understand exactly what you are worried about. We will tell you how long we expect the investigation to take and keep you up to date with its progress. Wherever possible, we will share the full investigation report with you (while respecting the confidentiality of others).

### How will we learn from your concern?

- 11.10 The focus of the investigation will be on improving the service we provide for patients. 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 organisation, or more widely, as appropriate.

## Monitoring and Audit

11.11 The Assistant Director, Corporate Governance (in consultation with the Assistant Director, Workforce) will monitor the use and effectiveness of this policy and report any concerns or updates to the Executive Team who will ensure that appropriate action is taken in all cases.

Measurable document objectives i.e what will be monitored	Monitoring/ audit method	Frequency of monitoring	Responsibility for performing the monitoring	Monitoring reported to group/ committee
The number and type of referrals under this policy and what action was taken.	Review the whistleblowing log and report to the Board	Twice a year	Assistant Director of Corporate Governance	Board

## Board Oversight

11.12 As detailed above, the 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.

## Review

11.13 We will review the effectiveness of this policy and local process at least annually, with the outcome published and changes made as appropriate.

## 12 Raising your concern with an outside body

12.4 Alternatively, you can raise your concern outside the organisation with:

### NHS Improvement for concerns about:

- 13 how NHS trusts and foundation trusts are being run
- 14 other providers with an NHS provider licence
- 15 NHS procurement, choice and competition
- 16 the national tariff

**Care Quality Commission** for quality and safety concerns – visit <http://www.cqc.org.uk>

### NHS England for concerns about:

- 17 primary medical services (general practice)
- 18 primary dental services
- 19 primary ophthalmic services
- 20 local pharmaceutical services

Visit <https://www.england.nhs.uk/> for contact details.

**Health Education England** for education and training in the NHS. Visit <https://hee.nhs.uk/about-us/how-we-work> for contact details.

**21 NHS Protect** for concerns about fraud and corruption. Please use this link to complete our online reporting form: <http://www.reportnhsfraud.nhs.uk/> **Making a 'protected disclosure'**

21.4 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).

### **Who is protected**

21.5 It is in the public interest that the law protects whistleblowers so that they can speak out if they find malpractice in an organisation.

21.6 As a whistleblower you are protected from victimisation if you are:

- a worker
- revealing information of the right type by making what is known as a 'qualifying disclosure'
- revealing it to the right person, and in the right way making it a 'protected disclosure'

21.7 It is important to note that 'worker' has a special and wide meaning for these protections. As well as employees it includes the self-employed, agency workers and people who aren't employed but are in training with employers.

21.8 There is also a defined list of 'prescribed persons', similar to the list of outside bodies on page 8 & 9, who you can make a protected disclosure to. To help you consider whether you might meet these criteria, please seek independent advice from:

- Public Concern at Work:



Telephone: 0207 7404 6609

Website: [www.pcaw.co.uk](http://www.pcaw.co.uk)

Email: [helpline@pcaw.co.uk](mailto:helpline@pcaw.co.uk)

- A legal representative.

## 22 National Guardian Freedom to Speak Up

The new National Guardian can independently review how staff have been treated having raised concerns where NHS trusts and foundation trusts may have failed to follow good practice, working with some of the bodies listed above to take action where needed. The National Guardian's Office can be contacted **03000679000**

## 23 EQUALITY AND DIVERSITY STATEMENT

Cambridgeshire Community Services NHS Trust will ensure that this document is applied in a fair and reasonable manner that does not discriminate on such grounds as age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex or sexual orientation.

## 24 WHO WE CONSULTED

This policy has been drawn up in consultation with the Trust's Joint Consultative Negotiating Partnership (JCNP) and has also been reviewed by the Trust's Local Counter Fraud Lead. The Trust will review the policy in line with the review date noted on the cover sheet unless new requirements or legislation are enacted in which case the policy will be updated accordingly.

## APPENDIX A: PROCESS FOR RAISING AND ESCALATING A CONCERN

### Step 1:

- If you have a concern about a risk, malpractice or wrongdoing at work, we hope you will feel able to raise it first with your line manager, lead clinician or mentor/professional lead (for students). This may be done orally or in writing.
- If the whistleblower does not want to raise the concern directly with the line manager, they should contact the next manager higher within the structure.
- In cases where fraud, financial malpractice and/or corruption are suspected, concerns MUST only be discussed with the Director of Finance and Resources or the Local Counter Fraud Specialist, NOT your line manager.
- In cases where the issues concern the Director of Finance and Resources please contact the Chief Executive.
- If the concern relates to the possible abuse of vulnerable adults, the Trust Safeguarding Vulnerable Adults policy must be adhered to.
- If the concern relates to the possible abuse of children, the Trust's Safeguarding Children Policy must be adhered to.
- The line manager (or other officer with whom the matter has been raised) will need to advise the member of staff as soon as possible of any action taken in relation to their concern.

### Step 2:

If raising your concern through the above channels does not resolve matters, or you do not feel able to raise it with them, you can contact one of the Trust's Service Directors:

- **Service Directors**

### Additional whistleblowing arrangements for Junior Doctors:

#### Guardian of Safe Working Hours

The role of the guardian of safe working hours is to ensure that working conditions are safe for doctors and patients. They support safe care for patients through protection and prevention measures to stop doctors working excessive hours. For more information on Guardians of Safe Working Hours, please visit the NHS Employers website.

The Trust's guardian of safe working hours is Dr Jorge Zimbron. He can be contacted on [Jorge.zimbron@cpft.nhs.uk](mailto:Jorge.zimbron@cpft.nhs.uk)

## Whistleblowing against Health Education England

In September 2016, Higher Education England amended its terms to enhance protection on whistleblowing for doctors in training. This extended whistleblowing protection for junior doctors and dentists, provides a new legal route directly against Higher Education England, if required, for trainees who raise concerns and believe that Higher Education England has caused detriment to them as a consequence.

Previously, legislation did not allow for claims to be brought by postgraduate trainees against Higher Education England in relation to any harm suffered, because postgraduate trainees are not directly employed by Higher Education England. The change in terms provides “a third party right” to allowing contractual claims against Higher Education England. [Click here](#) for more information.

### Step 3:

If you feel unable to raise the matter with anyone within your service, please raise the matter with the Trust’s Freedom to Speak Up Guardian:

Name: Taff Gidi  
Job title: Assistant Director of Corporate Governance  
email: [taff.gidi@nhs.net](mailto:taff.gidi@nhs.net)  
phone: 01480308219

The Freedom to Speak Up Guardian has been given special responsibility and training in dealing with whistleblowing concerns. They will:

- treat your concern confidentially unless otherwise agreed
- ensure you receive timely support to progress your concern
- escalate to the board any indications that you are being subjected to detriment for raising your concern
- remind the organisation of the need to give you timely feedback on how your concern is being dealt with
- ensure you have access to personal support since raising your concern may be stressful.

If you want to raise the matter in confidence, please say so at the outset so that appropriate arrangements can be made.

#### **Step 4:**

If these channels have been followed and you still have concerns, or if you feel that the matter is so serious that you cannot discuss it with any of the above, please contact the nominated executive director:

Name: Anita Pisani  
Email: [anita.pisani@nhs.net](mailto:anita.pisani@nhs.net)  
Job title: Deputy Chief Executive

#### **Step 5:**

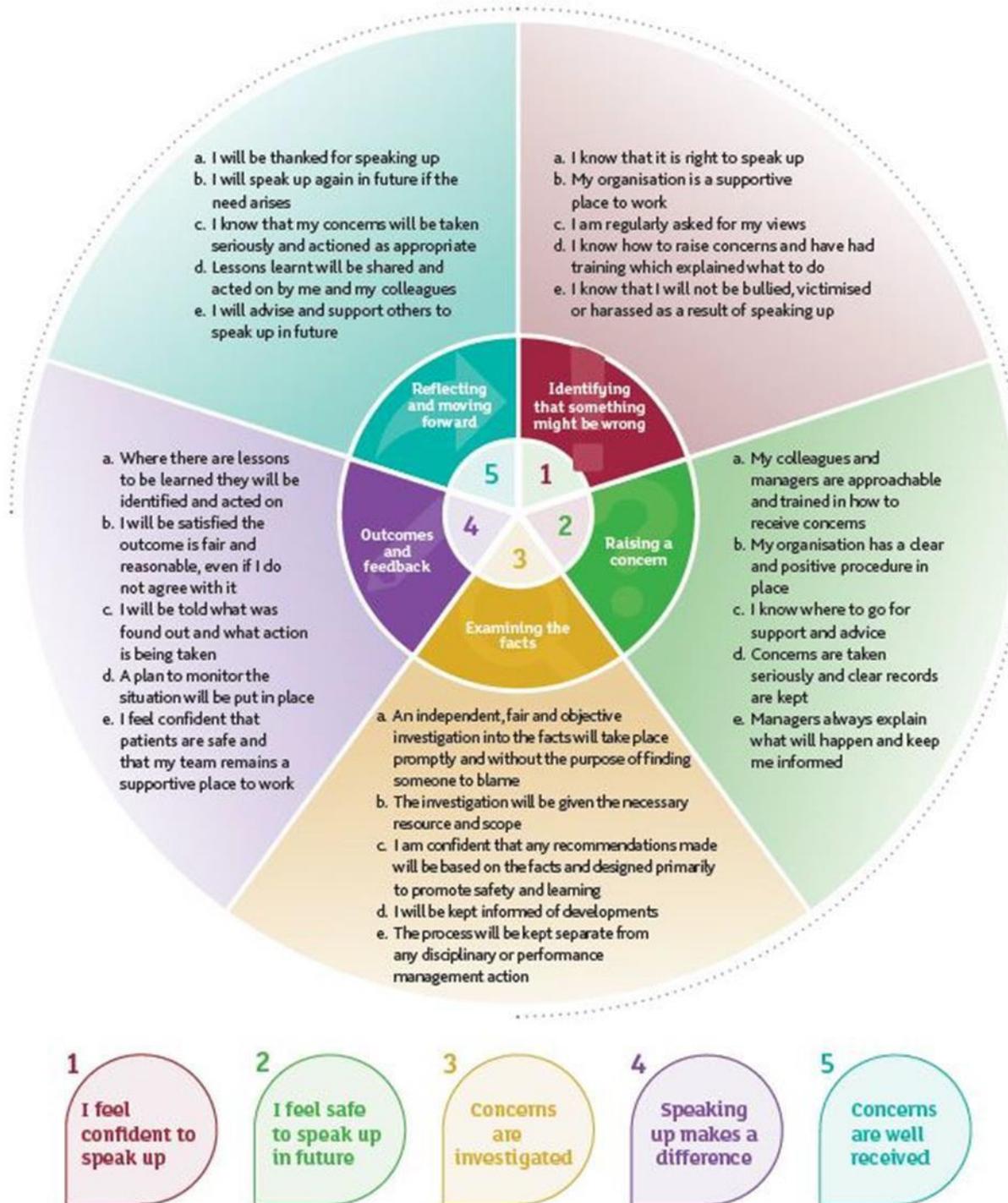
If these channels have been followed and you still have concerns, or if you feel that the matter is so serious that you cannot discuss it with any of the above, you may also write directly to the Chief Executive or the Trust Board Chair in confidence. Where this is not appropriate, the concern may be raised with other members of the Trust Board. An investigating officer will then be appointed to meet with you on their behalf and to report back on the outcome.

#### **Step 6:**

You can also raise concerns formally with external bodies. The relevant list of prescribed bodies is provided on **page 8 & 9** of this policy.

To ensure confidentiality when raising a concern, please mark the envelope or email ***‘Strictly Private and Confidential to be opened by Addressee Only’***

## APPENDIX C: A VISION FOR RAISING CONCERNS IN THE NHS



Source: Sir Robert Francis QC (2015) *Freedom to Speak Up: an independent report into creating an open and honest reporting culture in the NHS*.

### Rapid Equality and Diversity Impact Assessment Tool

The purpose of an Equality Impact Assessment is to improve the work of the Trust by ensuring that it does not discriminate and that, where possible, promotes equality. It is a way to ensure individuals and teams think carefully about the likely impact of their work on service users and take action to improve activities, where appropriate. As a public authority the Trust is required to carry out an assessment on all of its approved documents.

Name of document being assessed:	Raising Concerns Policy
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#### State the name and job role of the reviewer:

Name:	Taff Gidi
Job Role:	Assistant Director Corporate Governance
Date:	February 2017

**Choose either Positive or Negative impact. POSITIVE it could benefit or would have very little or no impact. NEGATIVE, it could disadvantage. If you choose NEGATIVE you will be required to complete a FULL EQUALITY IMPACT ASSESSMENT**

Minority ethnic including Gypsy/travellers, refugees and asylum seekers	Positive
Women and men	Positive
People in religious/faith groups	Positive
Disabled people	Positive
Older people	Positive
Children and young people	Positive
Lesbian, gay, bisexual and transgender people	Positive
Marriage and Civil Partnership status	Positive
Maternity status	Positive
People of low income	Positive
People with learning disabilities	Positive
People with mental health problems	Positive
Homeless people	Positive
People involved in criminal justice system	Positive
Staff	Positive
Diet and nutrition	Positive
Exercise and physical activity	Positive
Substance use: tobacco, alcohol or drugs	Positive
Risk taking behaviour	Positive
Education and learning, or skills	Positive
Social status	Positive
Employment (paid or unpaid)	Positive

Social family support	Positive
Stress	Positive
Income	Positive
Discrimination	Positive
Equality of opportunity	Positive
Relations between groups	Positive
Living conditions	Positive
Working conditions	Positive
Pollution or climate change	Positive
Accidental injuries or public safety	Positive
Transmission of infectious disease	Positive
Health care	Positive
Transport	Positive
Social services	Positive
Housing services	Positive
Education	Positive
Any other areas	Positive
Were any NEGATIVE impacts identified?	NO
<b>If YES please contact the Assistant Director of Corporate Governance who is the Equality &amp; Diversity Lead for the Trust to complete a full Equality Impact Assessment</b>	