

Agenda item 2.iii

Report to:	Board of Directors	Date: 1 June 2023				
Report from:	Tony Bottiglieri, Freedom to Speak up Guardian					
Principal Objective/Strategy:	To inform the board of progress on Speaking Up Service					
Title:	Freedom to Speak Up Guardian annual report 2022-2023					
Board Assurance Framework	Staff Engagement					
Entries:	Patient Safety					
Regulatory Requirement:	Recommendation from Francis Review 2015;					
	Governance – Well-led Framework Workforce					
Equality Considerations:						
Key Risks:	Staff do not feel confident to speak up and raise concerns					
For:	The Board are asked to receive and discuss the report from the Trust's					
	Freedom to Speak Up Guardian (FTSU)					

1. Purpose/Background/Summary

In line with the recommendations of the Freedom to Speak Up Review (Francis, 11.2.15), the Trust has a Freedom to Speak up Guardian who took up post in August 2018. This annual report covers the period April 2022 to March 2023. The report is intended to inform the board of progress and of key issues reported to the FTSU guardian during this period.

2. Key Items

1. Context and background

In line with national recommendations, the Board of Directors is to receive a yearly report on Freedom to speak up. This report covers the period as set out above (2022/23).

During this period, the post holder undertook duties and responsibilities as laid out by the post profile and in accordance with national office guidance. The post is currently allocated 24hrs per week (0.6 wte).

Support to establish the allocated hours as substantive were agreed during financial year 2022/23.

Progress to date

As with previous reporting periods, 2022/23 continued to be an extremely busy year. The indications from the nature of reporting (types and categories reported to the national office per quarter) are indicative of the trends appearing across other staff surveys, namely WRES and the NHS survey. This year highlights increasing concerns with staff on staff bullying and harassment, and where previously less so, some depts and professional groups showing positive indications that confidence in speaking up is more pronounced in these areas. So, to assure anonymity, the depts and professions this alludes to are not identifiable within this report.

I am pleased to reaffirm that speaking up continued to be encouraged and reinforced through several of the trust's forums. Specifically targeting newcomers to the trust so they may be aware of the importance and value the trust places on speaking up, and of the service provided by the trust FTSU

G and champions. There was regular attendance to the following events: trust corporate induction; junior Dr induction; medical and non-medical student induction.

Access to the FTSU Guardian (and in the principle of speaking up) is supported by the network of speak up champions. Champions have an array of supports built into their volunteering roles, maintaining contact through a range of communication methods and in with the dedicated champion forum. It is challenging to maintain a live register of champions, to ensure that trust comms is up to date with intranet links and photo posters. Several of the reported incidents which appear in the quarterly and annual incident reporting are signposted through and with support from our FTSU champions. It is pleasing to report that confidence in speaking up has increased where annual incidents have increased accordingly.

Unfortunately, the ability to address some concerns and issues directly with supervisors were diverted towards the FTSU G although there has been a noted desire for facilitated discussions to address the presenting concerns. There appear several reasons for this as disclosed to the FTSU G: concerns for detrimental affect such as career restriction, effect on ones' status and concerns for the short- and long-term effects on teamwork dynamics and working relationships. This appeared during reporting 2021/22, however, an emerging theme for 2022/23 is the concern for action and inaction predicated against a concern for bias in the process leading to an outcome (where claims are either upheld or rejected).

Recent publications (notwithstanding WRES and NHS survey) have encouraged sensitive support in working towards resolution, and so we are minded in considering guidance set out in *Being fair 2* <u>Being fair 2 - NHS Resolution</u>. Cited here to provide the opportunity to develop skills, insights, and knowledge in supporting managers involved in working towards resolutions with staff.

Activities to profile the role of the FTSU G outlined through engagement with networks and inductions has extended into business forums across divisions. Although this has not been as efficacious as hoped. Greater endeavour is required although opportunities to provide operational and clinical leads through individual meetings and presentations to targeted clinical areas continue to be productive throughout 2022/23 in gaining understanding and acknowledgement of themes towards improvement.

Attendance at such events is directed by the need to update and inform on themes of concern as stated. More so where a planned programme of intervention is identified. It is important to reinforce and remind here that in all cases and situations, the role of the FTSU G is guided by the Office of the National Guardian. Guardians are assisted in the application of the role through prescribed guidance and supported by the National Guardian (Dr Jayne Chidgey-Clark; National Guardian for the NHS).

The importance of acting and behaving with neutrality and independence is critical so we may assure the development and sustaining confidence and trust in speaking up. To reiterate, when workers speak up, they can trust in a process which values speaking up, and that in all cases, workers are thanked, and acknowledged for the contribution this makes towards the drive for an open and transparent working culture. It is an empirical appreciation that working in a more fully speaking up culture, where workers feel safe to speak up has a positive effect on service provision, care delivery and staff retention Resources | Civility Saves Lives

The FTSU G has continued to support a series of training events, as well as updating the training and development of new and existing FTSU champions. Workshops which focus on incivility have been presented to several targeted staff groups, working alongside and in partnership with our EDI manager. An additional programmed series of workshops are planned for 2023/24. Regarding Speaking Up awareness training, the NGO continues to encourage trust engagement with the online learning provision through its national initiative "*speak up, listen up, and follow up*".

Current established network of FTSU champions has an easy access platform (for information)

Freedom to Speak Up | Intranet (royalpapworth.nhs.uk) (access to FTSU G and champions)

Freedom_to_Speakup_RPH.indd (royalpapworth.nhs.uk) (Poster- FTSU Champions)

A further two FTSU champions are undertaking training and hope to join the network shortly.

Summary of the actions /commenced/completed April 2022 - March 2023 outlined

- Ongoing recruitment of FTSU Champions
- Completed NGO refresher training update (mandatory) 24th November 2022
- Reviewed and updated policy DN259 (Speak Up Policy for the NHS) (Awaiting signoff)
- Completed NGO Freedom to Speak up -A reflection and planning tool to inform speak up strategic initiatives (October 2022=November 2024)
- IPR completion (January 2023)
- Increased access for 1:1 meeting with workers and attending operational and clinical committees, incorporating/extending flexible times to accommodate staff /service need, and utilised drop in provision
- 1:1 meeting with CEO, executive and deputy director for workforce, NED, workforce employer partners; health and wellbeing facilitators; network chairs and EDI manager
- Delivery of varied training and development events including FTSU update presentations/inductions and prescribed civility workshops
- Quarterly reporting to the national office and periodic reporting to the Board (within designated NGO requirements).
- Networking with district, regional and national FTSU forum representatives and events
- Engagement with trust committees and networks.
- Reporting through trust briefings and newsbite
- Engagement with trust disciplinary, capability and Dignity at work processes

2. High level actions (taken from FTSU NGO reflection tool November 2022 – November 2024) (copies available on request).

Principle one: Value Speaking Up; Review role, function, and service engagement with service directorates

Principle two: Role-model speaking up and set a healthy Freedom to Speak up culture. To undertake review with divisional and senior nursing teams (Operational/Matrons) to assist with advancing ownership

Principle three: Principle 3: Make sure workers know how to speak up and feel safe and encouraged to do so. To update FTSU policy. Seek to provide story telling as outcomes of speaking up

Principle four: When someone speaks up, thank them, listen, and follow up

Investment in accessing national guardians office/HEE speaking up training continues to be outstanding.

Principle five: Use speaking up as an opportunity to learn and improve. Triangulation of themes and issues with Datix reporting

Principle six: Support guardians to fulfil their role in a way that meets workers' needs and National Guardian's Office requirements. FTSU Guardian absences are managed by the guardian through the network of FTSU champions and Workforce partner leads.

Principle seven: Identify and tackle barriers to speaking up. Champions are volunteers with no time protections. Greater scrutiny on where detriment is espoused or implied during and within investigation process against formal allegations.

Principle eight: Continually improve our speaking up culture. FTSU strategy requires updating (to reflect 2022-2024 period).

Period 2022/23	Q1	Q2	Q3	Q4	Total	2021/22	2020/21
Number of cases brought to FTSU Guardian	32	41	31	27	131	105	84
Number of cases with an element of bullying or harassment	13	18	15	17	63	67	42
Number of cases with an element of patient safety/quality	2	4	1	3	10	16	12
Number of cases where staff indicate they are suffering detriment as a result of speaking up	4	0	2	0	6	17	9
Number of cases raised anonymously	0	0	0	0	0	0	0
Number of cases with an element of worker safety	3	7	1	3	14	7*	
Number of cases by specific group							
Admin/Clerical/maintenance	5	4	7	3	19	24	
AHPs	5	3	6	0	14	21	
Doctors	4	6	3	2	15	7	
Healthcare Assistants	5	8	2	7	22	4	
Nurses	12	17	8	13	50	45	
Corporate services	1	3	5	2	11	4	
Given your experience, would you speak up							
again?							
Total responses	24	35	23	21	103	93	
Yes	13	26	14	13	66	68	
No	2	3	0	0	5	0	
Maybe	4	2	5	5	16	13	
Don't know	5	4	4	3	16	12	

National reporting Q1, 2, 3 and 4 – based on national reporting template Table 1

3. Feedback/themes and outcomes of reported incidents

Not all concerns raised with the FTSU G and/or champion are known to a workforce partner. Individuals are at liberty to pursue their own contacts but often seek guidance on the matter. In most cases, the concerning issue related to either a line manager or peer (s). Only where the worker has consented is this shared with a workforce partner. The approach is to ensure individual private discussions are supportive, constructive and to explore possible options available. The approach undertaken in all cases is to be sensitive, ensure compassion and create a safe space in which one is confident to speak up on the matter of concern. Reassurance is provided to establish the boundaries of the interaction, particularly to assure information management, storage, processing, and reporting (where necessary). This is to also assist with signposting and to establish urgency of the concern (to align with policy guidance).

All workers who speak up are advised of public disclosure and safeguarding protections. In most cases, workers who speak up have spent considerable time thinking about whether to contact the FTSU G or champion. Workers often express a deep-felt concern about the consequences of speaking up, worried about detriment, the effects on them, their careers, and their working relationship. In essence, concerns about speaking up are associated with not being believed and the effects of speaking up.

As in previous years annual reporting, workers seek guardian or champion involvement at various stages, at initiation or at the point where the issue has gathered momentum and is subject to a formal process. Regarding the latter, often seeking assurance and clarifications on how the process is to proceed. Most workers enter a process feeling very anxious, unclear about the process and what support is available. Additionally, at times, the basis of the workers concerns relates primarily with the process that it will (i) not investigate the index issue and/or contributing factors – that the focus is too narrow; (ii) and that the relationship between the perpetrator and the trust is potentially bias.

Reporting quarterly to the national office has been timely throughout the year as required by the NGO. Table 1 highlights the increasing nature of incidents and categorical allocations. The trend is relatively clear, that the level of reporting into the FTSU G office continues to increase (from 84 in 20/21; 105 in 21/22 and 131 22/23) (mean 106). There appears some levelling of incidents reported for bullying and harassment however, 42 (20/21) 67 (21/22); 63 (22/23) (mean – 57) making up just over 50% of all reported incidents year on year.

Interestingly, workers continue to have difficulty in considering the issue of detriment and whether this should be made clearer to the person speaking up, particularly when reporting. 2021/22 saw this rise to 17 where workers believed they had suffered a detriment because of speaking up as opposed to 6 in 2022/23.

Frequency of workers speaking up on concerns regarding patient safety/quality continues to remain low but as in all cases reported within this category, review with the appropriate lead (s) is undertaken. More of concern is the association between incivility and worker and or patient outcomes.

Indications of who is reporting (worker categories) is predictably skewed towards those with patient facing roles – namely Nursing, HCSW's, AHP's and Doctors. Nursing reported 50 incidents compared to 45 in 21/22; HCSW's 22 compared to 4; AHPS 14 compared to 21 and Doctors 15 compared to 7. Again, trends are elevated apart from AHP's where incident reporting saw a reduction. This combined group contributed 101 of the 131 reported incidents in 22/23. Supporting the narrative that workers in patient facing roles are continuing to speak up on concerns, less on patient safety/quality and more on incivility (bullying and harassment within their settings).

Our services require the commitment and hard work from all workers in patient and non-patient facing roles. Reporting of incidents from colleagues in non-patient facing services has been relatively stable between 21/22 and 22/23. Admin/Clerical/maintenance/corporate workers 21/22 reported 28 incidents compared to 30 in 22/23.

One of the important aspects of speaking up is the confidence in which workers have in speaking up. There is a positive recognition that in most cases, workers continue to report that of those who spoke up in 22/23 (131), of the 103 who responded to the question *given your experience, would you speak up again* 66 said YES; 16 said MAYBE, 16 did not know and 5 said NO. Trend (although limited to two years- 22/23 & 21/22) continues to see workers more likely to speak up again year on year. More specifically, of the 196 workers who spoke up across both years and responded to this question, 134 said they would speak up again against a backdrop total of 236 reported incidents. There is clearly more to do in helping staff have a positive experience when speaking up although, as indicated, management, support and outcomes of incidents are compounding elements which are difficult to factor for but here indicating a positive trend.

Worthy of note is the overarching values framework which encourages all workers of behavioural alignment (compassion, collaboration, and excellence) and that this a significant matter. That observations reported by workers continue to contest their expectations. A narrative appears from a growing number of workers who believe inconsistency exists in application and policing, particularly from those with leadership influence.

I am sure we can appreciate that any further critique of the data presented in table 1 would jeopardise the ability to ensure protections for workers reporting. Data is presented in this format to ensure the trust is sighted of the level of incident reporting, the need for thematic observation and any non-causal correlations with other worker feedback mechanisms and processes. It is for this reason that exemplar cases have not been included in this report as were in previous reporting.

I would like to conclude this section by providing a summative list of the prevailing themes informed by worker reporting during 2022/23:

• Reporting concerns were not always taken seriously by managers/leaders.

• Inconsistent messaging against trust values and behaviours across all grades of workers, but more concerning amongst senior grades of workers.

- · Discrimination task delegation in clinical areas/racial bias
- Civility and poor leadership of capability procedures
- Bullying behaviour in clinical and non-clinical areas
- Delayed timeframes in responding to concerns/engaged with formal processes.
- Staff morale; low staff motivation compacted by inconsistent messages of appreciation (kindness).

In this final section of the annual report, I would like to give attention to some of the progressive steps undertaken during the reporting period:

- 1. The implementation of the leadership training programme which is hoped to provide workers in leadership roles with an additional level of skill, knowledge, and competence to lead effectively, with compassion, in collaboration, and with a desire for excellence.
- There has been a marked improvement in the way some depts, and some divisions seek to learn and understand the nature of issues and concerns reported. Recognising the relationship between anonymity of reporting and its confidential management has enabled the use of thematic observation to assist depts and divisions.
- 3. Introduction of Civility Matters workshops approved for roll out commenced May 2023, with planning and development initiated within the reporting period. Early indications suggest positive uptake, also pleasing, early indications of positive participant feedback.
- 4. Openness promoted as a culture of speaking up requires consistent messaging that speaking up is valued and taken seriously. Unfortunately, there continues to small element within some divisions/depts who are less enthused and imply interference. To remind, all should be encouraged that speaking up offers the opportunity to learn and improve.
- 5. Promotion and development of cultural ambassadors, trained to identify and challenge discrimination and cultural bias. Particularly in utilising skills in contributing to formal investigations and grievance hearings involving staff from BAME backgrounds.

4. Acknowledgements in support of 2022/23

As with 2021/22 reporting, the role of FTSU G service continues to attract a high level of support from the executive team which I am extremely appreciative of. Specific thanks to our chief executive Eilish Midlane, executive directors Oonagh Monkhouse and Maura Screaton, and non-executive director Cynthia Conquest. May I also extend my thanks to our executive leads not mentioned here, in providing the invaluable opportunity to meet regularly so they may be sighted of the emerging issues of concern. And to our FTSU champions who offer unstinting support and guidance to all our workers! Thank you.

5. Recommendation

The Board of Directors are requested to note the contents of this report.