

Board of Directors (in Public)

Item 2.1

Subject: Freedom to Speak Up (FTSU) Guardian – Quarter 3 Report
Date of meeting: Tuesday 5th March 2019
Prepared by: Helen Turner, FTSU Guardian
Presented by: Helen Turner, FTSU Guardian
Purpose of Report: To Note/Approve

BAF Ref	Impact on BAF
1.1, 1.3, 3.7, 4.1	This report provides positive assurance that the Trust has in place effective arrangements for staff to speak up as part of its aim to ensure an open and transparent culture that protects patients and improves the experience of staff.

1. Executive Summary

The purpose of the quarterly Freedom to Speak Up (FTSU) paper is to:

- Update the Board on FTSU concerns raised in Quarter 3;
- Report on outcomes from the Trust's second FTSU Summit;
- Update on national progress

2. Concerns Raised through the Freedom to Speak Up Policy Framework – Quarter 3 2018/19

During the third quarter of 2018/19, fourteen concerns were raised under the Freedom to Speak Up Policy. The themes of the concern as per categorisation by the National Guardians Office (NGO) were:

Element of Bullying and Harassment	7
Element of Patient Safety	4
Other	4

Note: These concerns relate only to those raised directly with the FTSUG / Champions network – other concerns raised e.g. through safety huddle or with line managers are not logged unless referred to the FTSU Guardian

All concerns have been followed up and feedback provided to individual staff members where we are able.

The following table summarises the concerns raised since the start of the financial year:

Quarter	No. of contacts	Category	Detail
2018/19 – Q3	14	1. Patient Safety	Investigated and no harm to patient – learning published in SOLE bulletin and included further in the report.
		2. Bullying and Harassment	HR investigation underway likely to conclude in March 2019
		3. Other (values and behaviour)	Culture of a clinical team resulted in an away day where views were aired - learning published in SOLE bulletin and included further in the report
		4. Patient Safety	Anonymous letter received about a recruitment process in a clinical area. HR reviewed the process.
		5. Bullying and Harassment	Anonymous letter regarding Ward culture – (see No. 12)
		6. Other (values and behaviour)	Escalated to Theatre Matron
		7. Other	Charitable donation use – concluded and items bought for theatres area.
		8. Bullying and Harassment	Complaint about culture on ward – reviewed and found no case to answer. (see No. 12)
		9. Other	Request for information on bank staff A/L entitlement - referred to HR
		10. Bullying and Harassment	Escalated to Head of Nursing Clinical Services for review.
		11. Bullying and Harassment	Grievance being investigated by HR (see No.12)
		12. Bullying and Harassment and Patient Safety	Complaint about ward culture by members of staff – HR investigation underway, conclusion likely to be in March 2019.
		13. Patient Safety	Capital money confirmed to buy a bladder scanner
		14. Bullying and Harassment	Complaint about ward culture (see No.12)
2018/19 – Q2	3	1. Bullying and harassment	1. Investigation underway and HR

			process being followed
		2. Values and behaviours	2. Team leader facilitated culture work with external facilitator for full team engagement.
		3. Patient Safety	3. Escalated to AMD Surgery for review
2018/19 – Q1	1	1. Values and behaviour and HR process	1. Referred to HR to investigate process of organisational change

Board members will note the increase in 'speak ups' in comparison to Q1 and Q2, due to the increased awareness raising by the FTSUG and champions as reported in the Q2 Board report.

The tables below reflect the bandings and professional groups the 'speak ups' came from.

Concerns raised by staff bands	B2	B3	B4	B5	B6	B7	B8a and above	Unknown
	6	2	4	11	0	1	2	3

Concerns raised by professional group	Medics	Nurses	HCA's	AHP	Pharmacists	Admin/Clerical	Cleaning/Catering/Maintenance/Ancillary	Board Member	Corporate Service Staff	Unknown
	1	17	3	0	0	4	0	0	1	3

A high proportion of speak ups come from the lower bandings and nurses, learning from this will be reported on in Q4.

3. Awareness Raising

As reported in the Q2 report, October was speak out month which the FTSUG and champions used as a launch for awareness raising at team meetings, huddles etc, the list below incorporates awareness raising undertaken during all of Q3 and this work has continued into Q4 and will be on-going.

- CCU X 2
- ITU x 4 (3 awareness raising sessions with night staff.)
- Holly Suite
- Theatres
- Health Records
- Elm Ward
- Maple Suite
- Cherry Ward
- Oak Ward
- Cedar Ward
- Cardiology audit day
- Surgical audit day
- Medical secretaries and access team

- Pulmonary Function
- Hospital Coordinators
- Presentation at Preceptorship
- HR and Education
- Robert Owen House (includes Porters and Domestics)
- Medical Engineering
- Community Cardiology and Respiratory
- Presentation at volunteers meeting
- Bank staff contacted via email to raise awareness
- Attendance and presentation at quarterly Junior Doctors Forum
- Stand at the quarterly health and wellbeing day
- Attendance at BAME engagement meeting
- Monthly presentation at monthly Team Brief
- Poster campaign for the Chief Executive pledges

4. National Guidance

In Quarter 3, two further case reviews were published with recommendations specifically for the Trusts involved, and for consideration by the wider sector. The main points were about reviewing and communicating conflicts of interest policy to staff and settlement agreements, further guidance on settlement agreements and speaking up expected to be published by the NGO in the spring. The Trust benchmarked well against both case reviews with no further action to take at this point.

The annual NGO survey findings were published and again the Trust benchmarked well, the only actions arising from the survey were to assess that the local champions network reflected the diversity of its workforce; a local assessment of any groups that may face barriers to speaking up and a review of the FTSUG training needs. The FTSUG has been active in engaging with groups who traditionally don't speak up; junior doctors, bank staff and BAME.

5. FTSU Summit

The second quarterly FTSU summit has been established to enable the triangulation of patient safety and staff experience data with concerns raised under the FTSU policy, with key messages and learning to be cascaded via the SOLE Bulletin. Membership of the group comprises the Director of Corporate Affairs and Executive Lead for FTSU, the FTSUG, Chief Executive, Medical Director, Director of Nursing, Director of HR, Deputy FTSUG, Head of Risk, Head of HR and Deputy Director of Nursing.

The summit reviewed the 14 cases that had been raised in Quarter 3 to give assurance that all had been escalated, reviewed and concluded appropriately. To date, of the 14 cases, eight have been reviewed, appropriate action taken and concluded; five of the "speak ups" are about one case and a HR investigation is still on-going, this is due for conclusion in March 2019. The final case is also being investigated by HR and due for conclusion by March 2019. Two suspensions linked to FTSU cases and there were no issues with escalation and action of FTSU cases to senior management.

The Patient Safety report showed there were no concerns arising from the Patient safety dashboard; there had been 10 HALTs in Quarter 3 and that safety huddle notes revealed an increase in complaints of junior medical staff being discourteous, this had been flagged to Dr James Greenwood who had picked it up via induction.

HR data review confirmed there had been no settlement agreements in the last 12 months; five new ER cases during Quarter 3 (two raised through FTSU); positive staff survey results for FTSU.

It was noted that some managers were feeling vulnerable as a result of the increase in staff raising grievances under FTSU - the leadership and learning programmes being rolled out would address

this and staff and managers encouraged to work on relationships and deal with any communications performance issues locally.

The summit concluded that there were

- No concerns about FTSU arrangements in place.
- Strong evidence of open and transparent safety culture.
- Encouraging people to resolve things at a local level is the preferred solution and this is to be addressed through the leadership strategy
- Key themes/learning for SOLE were speak ups from:
 - Theatres
 - Culture
 - Junior Doctor

6. Learning from FTSU

The small size of the Trust can make the cascade of learning from FTSU a challenge as it can be difficult to protect the identity of those who have raised concerns; however the learning from three concerns raised below in Q3 was disseminated to teams through Team Brief and SOLE bulletin. The importance of maintaining good working relationships with colleagues has also been a feature of the FTSU communications strategy and has also been included at Team Brief, SOLE bulletin and at awareness raising sessions.

Theatres

Concerns raised about out of date pacing wires, new processes are in place to ensure that out of date equipment is not available in any theatre and that nursing staff are sufficiently empowered to dispose of the equipment without recourse to senior management.

Junior Doctors

An SHO raised a concern regarding the lack of a bladder scanner in the Trust which had led to suboptimal care for patients in surgery and medicine. Funding has now been approved to purchase a scanner.

Culture

A team where inappropriate language and terminology was reported had an away day to address their culture, this resulted in a lot of difficult issues being raised, all the team are reflecting on their behaviour and monitoring of the situation will continue to ensure this has led to sustainable behaviour change.

7. Feedback to FTSUG

All those who have raised concerns to the FTSUG and champions are asked the following questions

“Given your experience would you speak up again?” Yes/No/Maybe/Don't Know
“Please explain your response”

In Quarter 3, six have responded yes to the question

- 4 of the speak outs are about one case and this has not been concluded.
- 2 of the speak outs were anonymous letters so feedback could not be asked for.
- The junior doctor was contacted for feedback but has left the Trust.

- 1 case has still not responded to the request for feedback

Please explain your response – samples of comments from those who fed back.

- I was fully supported from start to finish. I cannot thank staff enough for the efforts made to help with issues going on.
- Everything was done with care and professionally
- The outcome was very positive
- Professional, discreet and kept my information confidential, always kept me up to date with feedback.
- I found the help and support excellent

8. Action plan and next steps

Following the BoD workshop on the self-review toolkit an action plan was developed where expectations were not fully met, the principal actions and progress are summarised below:

	Action	By Whom	By When
1	Future FTSUG reports to BoD and communications to staff (e.g. via SOLE Bulletin) to better articulate key learning and improvement work	FTSUG	Inclusion in SOLE bulletin October 18 and January 19 and on-going.
2	FTSUG to report directly to the Board and in person on a quarterly basis.	FTSUG	Complete – wef September 2018
3	Leadership Strategy and development programmes to emphasise learning from issues raised by people who speak up, support managers to handle difficult conversations well and ensure FTSU champions are equipped to fulfil their roles effectively.	Director of Workforce Development	FTSU is part of the leadership strategy. Role of the champion training needs being considered and developed in Q4
4	Use FTSU Month (October 2018) to raise awareness of CEO's 3 point pledge	FTSUG	Complete
5	Establish quarterly FTSU Summit to rigorously review processes and triangulate concerns raised with other data relating to patient safety and staff experience	Director of Corporate Affairs	Complete Two summits have taken place so far.
6	Include appropriate content relating to how the Trust is supporting a positive FTSU culture, together with anonymised data in the Trust's annual report	Director of Corporate Affairs	For 2018/19 annual report (published Sept 2019)
7	Promote positive outcomes from speaking up in order that staff will feel more confident to speak up – via SOLE Bulletin and monthly team brief	FTSUG	Complete and on-going
8	Consider culture, leadership and governance in respect of FTSU as part of mock well led inspection and identify any further areas for development.	Director of Nursing and Director of Corporate Affairs	Complete

Next steps

	Action	By Whom	By When
1	Refinement of champions network and their role	FTSUG	End of Quarter 4 and on-going
2	Assess that the local champion's network reflects the diversity of its workforce.	FTSUG	End of Quarter 4
3	A local assessment of any groups that may face barriers to speaking up.	FTSUG/champions	End of Quarter 4
4	Continue attendance at team meetings/huddles to raise awareness of FTSU.	FTSUG/champions	On-going
5	Review of the FTSUG and champions training needs	FTSUG/champions	End of Quarter 4

9. Recommendations

The Board of Directors are asked to note the Q3 report, progress made to date and next steps.