

Raising a Concern and Whistleblowing	
Standard Operating Procedure (SOP)	
Prepared by: Company Secretary / HR Lead	
Presented to: JLG	Date: 7 September 2015
Ratified by: JLG	Date: 7 September 2015
	Review date: September 2017
Relating to policies: Raising Concerns and Whistleblowing Policy.	

1. Purpose of this document

- 1.1. This document should be read in conjunction with the Raising Concerns and Whistleblowing Policy and in particular the Definitions in Section 4 which outlines what constitutes a ‘protected’ or ‘qualifying disclosures’.
- 1.2. This document sets out the steps that staff should follow if they wish to Raise a Concern or Whistleblow and how the Trust will respond.
- 1.3. All contact details for staff referred to in this document are contained in Appendix 1.

2. Steps for Staff to Take to Raise a Concern / Whistleblowing

Step One

- If you have a concern, we hope you will feel able to raise it in your team or with your Line Manager/Lead Clinician so it can be resolved locally.
- If your concern is relating to Safeguarding Adults or Safeguarding Children, please contact the appropriate Lead.
- If your concern is about fraud or corruption contact the [Local Counter Fraud Specialist](#) or the NHS Protect.

Step Two

- If you don’t feel Step One is appropriate or it hasn’t worked, please raise the matter with one of the following:

Director of Professional Practice, Nursing & People’s Experience;
 Medical Director;

Non-Executive Director.

- Please say if you want to raise the matter in confidence so that they can make appropriate arrangements. We will write to you summarising your concern and the action we propose to take. If you leave a message, the person will call back within two working days.

Step Three

- If these steps have been followed but have not worked, or if you feel that the matter is so serious that you cannot discuss it with any of the above, please contact the Chief Executive.
- If you feel the matter is so serious that you cannot discuss it with the above, or that the matter relates to the Chief Executive, then please contact the Chair of the Trust as outlined in Step Four.

Step Four

- Ultimately, if you are not satisfied with the outcome, or the concerns remain unresolved, the member of staff has the right to refer to the Trust Chair.
- A flowchart outlining the above process is attached at Appendix 2.

3. How we will handle the matter

- 3.1. Once you have told us of your concern, we will undertake an informal review. The concern you have raised will be logged on a central register of concerns that will be retained by the Trust.
- 3.2. When you raise the concern you may be asked how you think the matter might best be resolved. If you do have any personal interest in the matter, we do ask that you tell us at the outset. If your concern falls more properly within the Grievance, or other, procedures we will tell you.
- 3.3. We will write to you summarising your concern and setting out how we propose to handle it within five working days. We will give you a contact and how you can contact them and whether your further assistance may be needed.
- 3.4. An internal review will assess the concerns raised and establish whether a full investigation needs to be undertaken. An internal review will take no longer than two weeks.

- 3.5. If the Trust establishes that a full investigation is necessary, terms of reference will be agreed and the investigation completed within six weeks wherever possible.
- 3.6. To reassure you, we will give you as much feedback as we properly can within eight weeks. Please note, however, that we may not be able to tell you the precise action or share a full copy of the investigation report where this would infringe a duty of confidence owed by us to someone else.

4. Carrying out an Investigation under this Procedure

If the Trust finds that a formal investigation needs to be undertaken the following actions will be taken:

- 4.1. The Trust will appoint an investigating officer who will if appropriate have HR support.
- 4.2. The Director involved will set out the Terms of Reference for the investigation together with deadlines.
- 4.3. The investigating officers may need to review paperwork, files, etc and undertake interviews with appropriate members of staff including the person who raised the concern.
- 4.4. All staff involved in such an investigation will maintain confidentiality and understand that the final report may be shared with the person who raised the initial concern. Staff should not that a transcript of their interview with the investigating officer will not be shared unless you have given your consent.
- 4.5. The final report should be in the style of the attached template.

5. Governance Arrangements

The Incident Reporting System Datix will be used to record all concerns raised through this document and ensure that appropriate timescales are met. The person to be whom the concern was raised will be responsible for closing down the concern on the system.

6. **Scope of this SOP:** - this document relates to all staff who wish to raise a concern and whistleblowing and those staff involved in such investigations.

Standards:

Item	%	Exceptions
All concerns raised will be acknowledged with 5 working days	100	
All calls to be returned within 2 working days	100%	
Feedback to the person raising the concern within six weeks if not sooner.	100%	

Equality Statement.

The Trust is committed to preventing discrimination, valuing diversity and achieving equality of opportunity. No person (staff, patient or public) will receive less favourable treatment on the grounds of the nine protected characteristics (as governed by the Equality Act 2010): Sexual Orientation; Gender; Age; Gender Reassignment; Pregnancy and Maternity; Disability; Religion or Belief; Race; Marriage and Civil Partnership. In addition to these nine, the Trust will not discriminate on the grounds of domestic circumstances, social-economic status, political affiliation or trade union membership.

The Trust is committed to ensuring all services, policies, projects and strategies undergo equality analysis. For more information about equality analysis and [Equality Impact Assessments](#) please refer to the [Equality and Diversity Policy](#)

References:

All references are listed in the Raising a Concern and Whistleblowing Policy.

Appendix: *i.e. Flowchart, diagrams etc.*

- Appendix 1 [Key Contacts](#)
- Appendix 2 [Flowchart – How to Raise a Concern and Whistleblowing](#)
- Appendix 3 [Investigation Report Template](#)

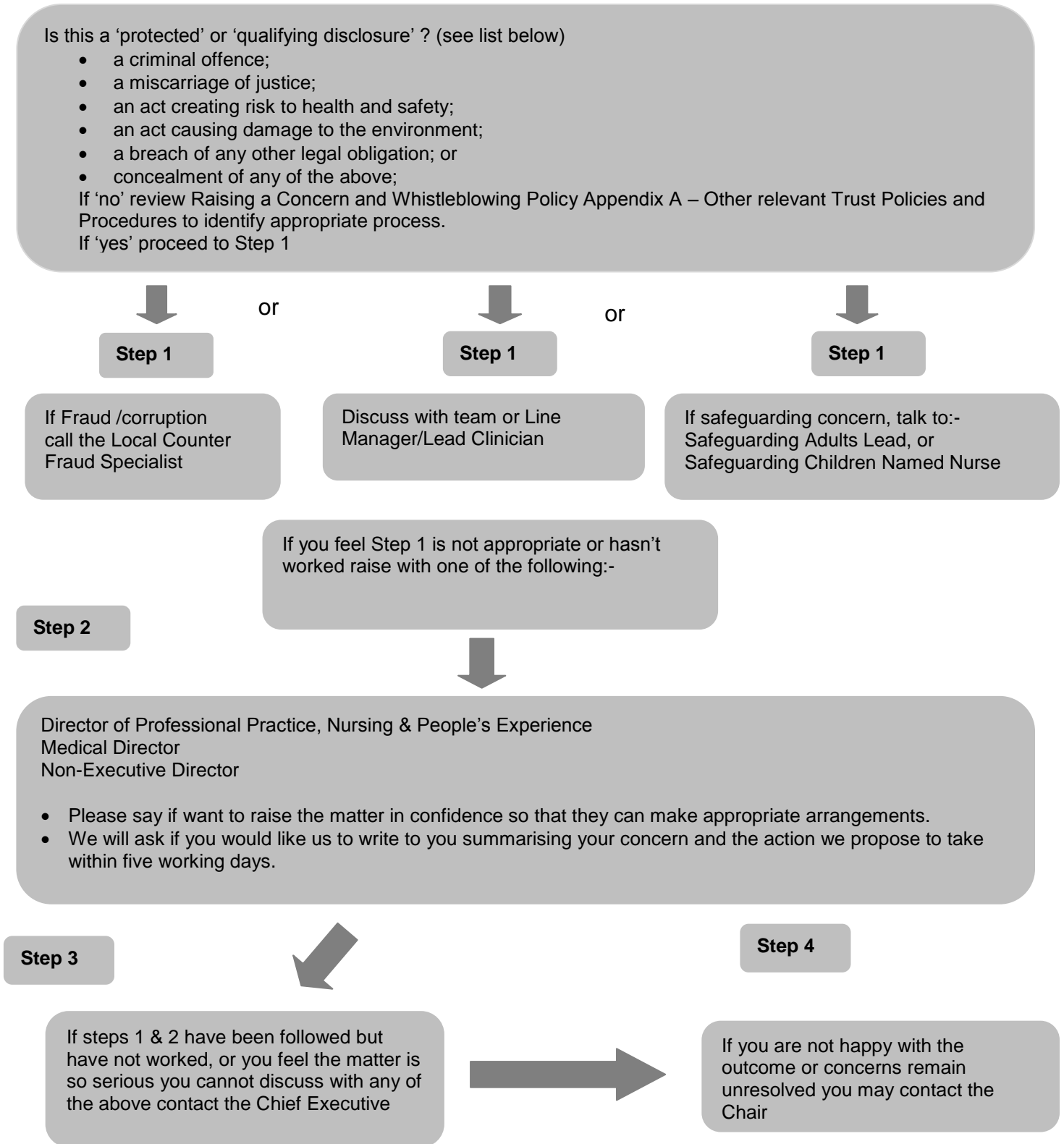
Amendment History

Issue	Status	Date	Reason for Change	Authorised

Appendix1 – Contact Details for Raising Concerns and Whistleblowing

Job Role	Name	Telephone Number	Email
Safeguarding Adults Lead	Tanya Drew - Acute Louise Stevens - Acute Jon Anthony - Community	01803 655857 01803 655857 01803 219715	Tanya.drew@nhs.net Louise.steves@nhs.net jonanthony@nhs.net
Named Nurse for Safeguarding Children – Acute Named Nurse for Safeguarding Children - Community	Phillipa Hiles Jane Wilkinson	01803 655720 01803 208659	safeguardingchildnamednurse@nhs.net jane.wilkinson0@nhs.net
Local Counter Fraud Specialist	Martin Huscroft	01803 656440	Martin.huscroft@nhs.net
NHS Protect confidential phone line		0800 028 40 60	
Director of Professional Practice, Nursing & People's Experience	Jane Viner	01803 655712	janeviner@nhs.net
Medical Director	John Lowes	01803 654507	John.lowes@nhs.net
Non Executive Directors (NED)	A list of NED can be found on the Trust Web Site and can be contacted by email to Foundation Trust Office or by leaving a message with the Company Secretary		
Non-Executive Chair of the Audit Committee	John Brockwell	01803 655703	John.brockwell@nhs.net
Chief Executive	Mairead Mcalinden	01803 655703	Mairead.mcalinden@nhs.net
Chair	Richard Ibbotson	01803 655704	Richard.ibbotson1@nhs.net
Company Secretary	Richard Scott	01803 655029	rscott2@nhs.net

APPENDIX 2 – Flow Chart – How to Raise a Concern and Whistleblowing



Appendix 3 Investigation Report Template

Investigation Report into a concern raised under the Raising a Concern and Whistleblowing Policy Datix Ref: INC-xxxx

Date:

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1. Introduction

This investigation was commissioned by *[Name and Job Title]*, Torbay and South Devon NHS Trust (the Trust) on *[Date]*. The investigation was in response to concern raised under the Raising a Concern and Whistleblowing Policy sent to *[Name and Job Title]* dated *[date]* (appendix A).

[Any other factors about the concern in respect of procedure]

This investigation report is submitted for *[the name of person who commissioned the investigation]*, for them to take into account the finding of the investigation and make recommendations for the next steps.

[Note – the contents of this report may be shared with the person raising the concern, therefore any personal and sensitive information should be confined to the Appendices which may not be shared.]

2. Background and Context

[A summary of the concern raised and the main facts rather than any conflicting evidence. This should enable the reader to understand the background and why the particular evidence and conclusions has been included in the rest of the report.]

3. Investigation Process

The investigation was led by *[Name and Job Title]*, supported by *[Name and Job Title]*.

The following interviews have been undertaken as part of the investigation:

Name	Position	Date	Approx. Duration

All those interviewed were offered the opportunity to be accompanied.

Notes of each interview were taken and a transcript produced. Those interviewed were provided with a copy of the transcript and offered the opportunity to make amendments. A copy of the transcripts are attached as Appendix *[insert appendix number]*.

In addition to the interviews *[any other actions taken, i.e. documents reviewed]*.

4. Concern Raised

The specific concern detailed above have been investigated. The evidence gathered during the investigation is summarised for each separately, highlighting the main issues for consideration. An analysis of this evidence is provided for each concern.

4.1 *[the concern or part thereof]*

Evidence

[A summary of the evidence received about the specific part of the concern highlighting any conflicting evidence given by those investigated. This should not be a rewrite of the statements but may quote from them.]

Analysis

[A brief analysis of the evidence to help the reader draw conclusions without making decisions on their behalf.]

4.2 *[the concern or part thereof]*

[As for 4.1 and add more for each concern or part thereof.]

5. Conclusions

The previous section provides a detailed assessment of each concern

- *[From the evidence and analysis above summarise for each any considerations the person who is to decide on action and if relevant hear a case needs to make]*

For the above it is important that the investigating team do not attempt to make or influence the decision of either the potential disciplining manager of person who is to make a recommendation.

- *[From the evidence and analysis above summarise for each the key conclusions and whether in the belief of the investigating team the concern was valid]*

6. Recommendations

The person who commissioned this investigation needs to be able determine from this report whether any further actions needs to be taken. For instance, if the investigation demonstrate that there has been an act of misconduct or a breach of policy then a disciplinary process may need to be followed; a review of current working practices may need to be changed, etc.

7. Appendices

[Should include Terms of reference; transcripts of any interviews; list of documents, policies, guidance referred to as part of the investigation, if appropriate to the conclusions then you may need to provide the documents or a link to them if they are in the public domain. Any other information that you will the reader of the report would find useful. Please ensure that all text that appears in red italics has been either replaced with normal text or deleted.]