



**Scottish  
Ambulance  
Service**

Working in Partnership with Universities



# Annual Whistleblowing Report

## April 2023 – March 2024



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## **Introduction**

It been a challenging year for Health and Social Care in Scotland and as such, the Scottish Ambulance Service and its staff have faced continued pressures. It remains a priority for the Service during these challenging times that staff are encouraged and supported to speak up about any concerns they have.

Scottish Ambulance Service have continued to actively support and promote a healthy culture of openness and transparency by focussing on the promotion and implementation of our organisational values which are aligned with those of NHS Scotland. This report describes the Scottish Ambulance Services response to national Whistleblowing arrangements, the approach taken within the service as well as an overview of the concerns raised through the Whistleblowing route and the themes and organisational learning, as a result of the process to investigate the concerns from 1<sup>st</sup> April 2023 to 31<sup>st</sup> March 2024.

## **KPI 1: a statement outlining learning, changes or improvements to services or procedures as a result of consideration of whistleblowing concerns**

### **Whistleblowing Toolkit**

A Whistleblowing Toolkit (Appendix 1) has been developed and includes a Managers Guide which provides information in relation to the standards, their role in the process, how they should manage concerns. It also explains how a Stage 1 concern should be progressed under the whistleblowing standards. The toolkit provides managers with a suite of template letters to communicate outcomes and advise someone raising a whistleblowing concern of the options available to them should they remain unhappy with the actions taken and wish to progress matters further.

An information pack for investigators has also been developed and provides guidance regarding the processes that should be followed when investigating Stage 2 concerns. In addition to this a Whistleblowing Satisfaction Survey has been developed to allow those involved in the Whistleblowing process to provide some feedback on how they felt their concerns were handled throughout the process.

Work ongoing to improve the communication processes in relation to handling Whistleblowing concerns to ensure improved decision making and more effective reporting and recording mechanisms. Information available to staff whether directly or indirectly employed by the Service and our volunteers is also being refreshed to ensure this continues to meet the Whistleblowing Standards.

## **Governance and Assurance**

In terms of how SAS ensures there is clear process in place for raising concerns details of the Confidential Contacts within SAS are available on both the intranet and public facing website. This includes information on how confidential contacts support staff by providing an initial point of contact for people wishing to raise a concern, provide information and



advice, and assist and support people to raise a concern through the most appropriate route.

We continue to monitor staff views of our Whistleblowing information on our intranet and use of the toolkit and report this in our quarterly Whistleblowing report which is discussed at our Clinical Governance Committee.

At present we record all concerns via our Datix system, to ensure confidentiality a very limited staff group have access to this information. This allows us to track themes and trends and to collate investigations and reports efficiently and effectively. We now track actions from concerns via our new Patient Safety and Clinical Risk Group to ensure these are completed and we share opportunities for continuous learning and development.

### **Examples of Actions from Concerns:**

1. Improved governance and handling of out-of-date controlled drugs including safer storage and separate registration.
2. Improved processes for return and destruction of out of date-controlled drugs.
3. Plans to reduce waste of controlled drugs with introduction of a requisition processes which allows smaller quantities to be ordered.

### **KPI 2: a statement to report the experiences of all those involved in the whistleblowing procedure (where this can be provided without compromising confidentiality)**

Those raising concerns in the organisation generally feel well supported, with particular praise awarded to the confidential contacts who helps support these individuals throughout the processes.

Some comments include:

*“I felt listened to, and that my concern was being taken seriously.”*

*“Although it was decided my concern didn’t meet the whistleblowing criteria, I was provided another avenue to raise my concern.”*

*“It good to know that feedback has been listened to and SAS is now working to increase the diversity of roles represented by the confidential contacts.”*

We have had some feedback that the process can take a long period of time which, like any investigation, can add additional stress to the Whistleblower. We have also had 2 complaints that have been referred to the INWO after the Whistleblowers were not satisfied with the outcomes of their investigations. We have created a process to support further



support for investigators, that includes holding meetings with the Whistleblower following the conclusion of the report to ensure that all their concerns have been addressed. We continue to be mindful that even despite best efforts and thorough investigations, that Whistleblowers are entitled, and will be supported, to refer to INWO and we will continue to work with INWO to learn from these referrals.

### **KPI 3: a statement to report on levels of staff perceptions, awareness, and training**

#### **Whistleblowing Training**

Training on the Whistleblowing Standards and Once for Scotland Policy remains a priority for the Service and details of the online training via TURAS (Appendix 2) is available for all our employees on @SAS. The whistleblowing standards and TURAS training have been widely communicated throughout the Service via staff engagement sessions staff bulletins and the intranet.

Confidential contacts and dedicated whistleblowing investigators support Whistleblowing concerns across the organisation and are from a variety of corporate and clinical services, ensuring system resilience in supporting staff raising concerns have been established. Online training via TURAS is completed by the confidential contacts and any lead investigators. Given the importance of these roles the Service will continue to provide update training including the use of information from the Independent National Whistleblowing Officer (INWO).

#### **@SAS Statistics**

- Whistleblowing Home page visited 2843 times by 1349 individual users
- Confidential Contacts details visited 650 times by 310 users
- Whistleblowing toolbox visited 310 times by 188 users
- Whistleblowing overview visited 164 times by 113 users
- Whistleblowing FAQs visited 411 times by 281 users

#### **Whistleblowing Network**

This year we have developed an effective Peer Support network of support for the Confidential Contacts. This network meets quarterly where Confidential Contacts, and potential confidential contacts, can discuss best practice, use INWO Case Studies to generate discussion, and discuss how we can increase the understanding of Whistleblowing procedures in the organisation.

We now have 10 confidential contacts across the organisation. Work will continue to maintain and expand the Whistleblowing network within the service. The Service is also reviewing how we can encourage staff with protected characteristics to become part of the



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whistleblowing network to reduce barriers that may exist for whistleblowers, and there are plans to engage via the SAS Equality Networks over the coming year to address this.

All members of the Whistleblowing Network have been invited to join the Scottish Speak Up Network. This network meets monthly and provides a valuable forum for members of our network to share learning across the wider NHS.

### **Speak Up Week 2023**

The Service undertook several initiatives during Speak Up Week in 2<sup>nd</sup> to 6<sup>th</sup> October 2023.

Two virtual events were held, a “Speak Up” drop-in sessions on the 3<sup>rd</sup> and 5<sup>th</sup> of October. Speak Up Week was also promoted on SAS’s social media channels (Facebook and Twitter). Staff across the organisation have also been signposted to the Whistleblowing Training available via TURAS.

As part of a Chief Executive’s Engagement Session, Our Chief Executive and Whistleblowing Champion highlighted the importance of Whistleblowing in our organisation and encouraged attendance at the drop-in sessions. The importance of ensuring everyone has the chance to speak up, raise a concern and be treated with dignity and respect was re-enforced and Staff were encouraged to speak up about patient safety issues, poor practice, unsafe working conditions, abusing authority and fraud.

As a direct result of the drop-in sessions, we have now have 3 new confidential contacts in the organisation.

### **KPI 4: the total number of concerns received**

We received a total number of 12 concerns to the Whistleblowing mailbox between 1<sup>st</sup> April 2023 and 31<sup>st</sup> March 2024.

### **KPI 5: concerns closed at stage 1 and stage 2 of the whistleblowing procedure as a percentage of all concerns closed**

Of the 12 concerns received, 5 were taken forward under Whistleblowing. 1 (8%) was launched as Stage 1 and 4 (33%) as Stage 2.

Of the remaining 7 concerns, 4 were taken forward as BAU and 3 did not require further input at the time of raising the concern.



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**KPI 6: concerns upheld, partially upheld, and not upheld at each stage of the whistleblowing procedure as a percentage of all concerns closed in full at each stage**

Stage 1 Closed

Total: 1

Upheld: 1 (100%)

Partially upheld: 0

Not upheld: 0

Stage 2 Closed

Total: 3

Upheld: 1 (33%)

Partially upheld: 1 (33%)

Not upheld: 1 (33%)

1 remaining Stage 2 Concern remains open.

**KPI 7: 7 the average time in working days for a full response to concerns at each stage of the whistleblowing procedure**

Stage 1: average time to full response: 26 days (target 5 days)

Stage 2: average time to full response: 149 days (target 20 days)

**KPI 8: the number and percentage of concerns at each stage which were closed in full within the set timescales of 5 and 20 working days**

Stage 1

Total: 1

Closed within target time: 0 (0%)

Stage 2

Total: 3



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Closed within target time: 0 (0%)

**KPI 9: the number of concerns at stage 1 where an extension was authorised as a percentage of all concerns at stage 1**

In all WB cases extensions have been authorised and the Whistleblower is regularly kept up to date with progress of investigations (100%).

**KPI 10: the number of concerns at stage 2 where an extension was authorised as a percentage of all concerns at stage 2**

In all WB cases extensions have been authorised and the Whistleblower is regularly kept up to date with progress of investigations (100%).

**Reflections**

Whilst the numbers of concerns raised within the service remains relatively low this should not necessarily be viewed as a positive reflection of performance or quality within the Service. Further work is required to explore the impact of culture, attitudes and behaviours in relation to raising whistleblowing concerns. The Service is working hard on staff wellbeing and culture which could have an impact on people feeling they are able to speak up and utilise Whistleblowing procedures when needed.

There is a need to improve our timescales of the Whistleblowing investigations at both Stage 1 and Stage 2. The investigations are often complex and require a robust investigation making the INWO targets of 5 and 20 days ambitious. As per INWO, both Stage 1 and Stage 2 investigations can be extended, as long as updates are provided to the Whistleblower. Within SAS we have ensured continual engagement during all stages of the investigation.

**Next Steps**

- Ongoing exploration and discussion around the impact of any specific barriers to speaking up for staff with protected characteristics via engagement with Equality Networks



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- Continue to refine the whistleblowing processes based on learning and feedback with a particular focus on evidencing actions via the Patient Safety and Clinical Risk Group.
- Explore the opportunities to continue to share learning from whistleblowing concerns whilst maintaining confidentiality.
- Plans for Speak Up week in 2024 are underway to continue sharing information with staff on whistleblowing.

## **Conclusion**

Although there have been challenges, there has been meaningful progress made since the introduction of the Whistleblowing Standards within the Service in terms of setting up the network, training staff and sharing information. We will continue to champion this change, engaging with staff and strengthening governance and evidencing learning from Whistleblowing over the course of 24/25.





## APPENDIX 1

**Whistleblowing Toolbox**

Mark Bargon (SAS)  
WEB & IT SUPPORT ANALYST DEVELOPER

**Managers Guidance**

- Manager Guidance
- Appendix 1 - does not fall within whistleblowing standards
- Appendix 2 - acknowledgement of Stage 1
- Appendix 3 - outcome of Stage 1
- Appendix 4 - acknowledgement of stage 2
- Appendix 5 - outcome of Stage 2
- Appendix 6 - Stage 2 20 day extension

**Investigator Guidance**

- Investigator Information Pack
- Appendix 1 - acknowledgement of stage 2
- Appendix 2 - Terms of Reference
- Appendix 3 - record of contact
- Appendix 4 - outcome of stage 2
- Appendix 6 - 20 day extension
- Appendix 7 - Whistleblowing Investigation Report
- Whistleblowing Investigator Flow Chart

### Satisfaction Survey



## APPENDIX 2



### National Whistleblowing Standards training

Search...

- All
- National Whistleblowing Standards training

[Learn home](#) > National Whistleblowing Standards training

#### National Whistleblowing Standards training

- Whistleblowing : an overview >
- Whistleblowing : for line managers >
- Whistleblowing : for senior managers >
- Training resources for Confidential Contacts >

[Add to favourites](#)

This training is for anybody who provides services on behalf of the NHS in Scotland, including students, contractors and volunteers.

In these modules you will learn about the National Whistleblowing Standards (the Standards) and the role of the Independent National Whistleblowing Officer (INWO).

The Standards came into force on 1 April 2021 and are a step change in how whistleblowing concerns are dealt with in the NHS. They describe how organisations must provide protection and support for people who speak up about harm or wrong doing.

The modules have been provided by the INWO and are set out in 3 different learning programmes for:

- people who need an overview of the Standards;
- people who are line managers or work in a similar role, who are likely to receive concerns from colleagues in their day-to-day work; and
- senior managers who are involved with not only receiving concerns, but also investigating, responding to, and reporting on whistleblowing concerns to the board.

#### Training resources for Confidential Contacts

At the bottom of this page, boards will find a link to case study based training resources for Confidential Contacts.