NHS Ayrshire & Arran

Meeting:	**Ayrshire and Arran NHS Board**
Meeting date:	**Monday 10 August 2026**
Title:	**Whistleblowing Annual Report 2025-2026**
Responsible Director:	**Jennifer Wilson, Executive Nurse Director**
Report Author:	**Moira Woolway, Corporate Support Officer, Shona McCulloch, Head of Corporate Governance**

1. Purpose

This is presented to the NHS Board for:
- Decision

This paper relates to:
- Scottish Government policy

This aligns to the following NHSScotland quality ambition(s):
- Safe
- Effective
- Person Centred

This supports the following Corporate Objectives:
- Better Workplace – Creating a great place for us to work
- Better Care – Improving your experience of care

A strong delivery of the National Whistleblowing Standards supports NHS Ayrshire & Arran's Better Care and Better Workplace objectives by enabling staff to safely raise concerns that highlight risks, drive learning, and improve the quality and safety of care. A clear, fair and supportive whistleblowing process also strengthens trust, psychological safety and organisational culture, helping to create a better workplace for all staff.

2. Report summary

2.1 Situation

The Whistleblowing Annual Report 2025–2026 provides assurance regarding NHS Ayrshire & Arran's compliance with the National Whistleblowing Standards. The NHS Board is asked to consider the report and approve its publication and submission to the Independent National Whistleblowing Officer (INWO).

2.2 Background

Each NHS Board is required to produce an annual report providing assurance that the Board has discharged its role as set out in the National Whistleblowing Standards.

Once approved by the NHS Board, the report is submitted to the Independent National Whistleblowing Officer (INWO).

2.3 Assessment

The report summarises and builds on the quarterly whistleblowing reports presented for 2025/26 including performance against the requirements of the Standards, Key Performance Indicators (KPIs), the issues that have been raised and the actions that have been or will be taken to improve services as a result of concerns. The report provides information to support assurance for Governance Committee and Board members regarding implementation of and compliance with the Standards.

Key Messages

- NHS Ayrshire & Arran remains compliant with the National Whistleblowing Standards, with established governance arrangements providing oversight and assurance to the NHS Board.
- Staff confidence in speaking up remains broadly positive, with 2025 iMatter results demonstrating stable confidence in raising concerns and a small improvement in confidence that concerns will be acted upon.
- During 2025/26, 12 concerns were received through the Speak Up service, with three progressing to formal investigation under the Standards. Activity levels remain proportionate when benchmarked against comparable NHS Boards.
- Whistleblowing continues to support organisational learning and improvement, with learning from investigations informing service improvement, governance arrangements and service development.
- Analysis of concerns and anonymous reporting highlights the importance of continuing to strengthen psychological safety, staff confidence and awareness of routes for speaking up.
- During 2026/27, the organisation will continue to strengthen whistleblowing arrangements through improvement, engagement, communication and learning activities to further embed a positive speaking up culture

2.3.1 Quality/patient care

An open and transparent whistleblowing process ensures good-quality outcomes for cases raised through a thorough but proportionate investigation. The approach to handling whistleblowing concerns ensures that learning and improvement is progressed for upheld whistleblowing concerns and are shared across all relevant services.

2.3.2 Workforce

The Standards support our ambition for an open and honest organisational culture where staff have the confidence to speak up and all voices are heard. This is focused through our organisational Values of ‘Caring, Safe and Respectful’ and promoting a culture of psychological safety.

2.3.3 Financial

There are no financial implications as a result of this annual report.

2.3.4 Risk assessment/management

Failure to have in place an open and honest whistleblowing process that delivers the requirements of The National Whistleblowing Standards could have an impact as valid concerns about quality, safety or malpractice may not be raised. The opportunity to investigate and address these concerns will have been lost, with potentially adverse impact on quality, safety and effectiveness of services in NHS Ayrshire & Arran. There is also a wider risk to organisational integrity and reputation if staff do not believe they will be listened to and do not feel senior leaders in NHS Ayrshire & Arran is fulfilling the organisation's Values of 'Caring, Safe and Respectful' and promoting a culture of Psychological Safety.

2.3.5 Equality and diversity, including health inequalities

This is an annual report on organisational activity in relation to whistleblowing and an impact assessment is not required for the report. A local Equality Impact Assessment (EQIA) which assesses the impact of the Standards on staff and those who provide services is available on our public facing webpage.

2.3.6 Best Value

This paper support Best Value across the following themes.

- Vision and Leadership

The whistleblowing process supports a values-led culture by encouraging staff to speak up and providing senior leadership oversight. This reinforces NHSAA's commitment to openness, psychological safety and continuous improvement.

- Governance and Accountability

Clear reporting routes, compliance with National Whistleblowing Standards and regular Board reporting provide assurance that concerns are handled transparently and risks to safety, quality and integrity are effectively managed.

- Performance Management

Whistleblowing data, KPIs and case outcomes are used to identify themes, monitor effectiveness and ensure learning from concerns is shared whilst taking into account confidentiality of those raising concerns.

- Use of Resources

A proportionate, risk-based approach ensures investigative effort is focused where most needed, while training supports staff and managers to respond appropriately, reducing escalation or encouraging concerns to be directed through other appropriate routes.

- Effective Partnerships

Effective handling of concerns relies on collaboration across services and our partners, supported by alignment with national standards.

2.3.7 Other impacts

There are no other relevant impacts.

2.3.8 Communication, involvement, engagement and consultation

There is no requirement for formal engagement with external stakeholders to produce this annual report.

2.3.9 Route to the meeting

This has been previously considered by the following groups as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report:

- Whistleblowing Oversight Group on Thursday 23 July 2026.
- Staff Governance Committee on Thursday 30 July 2026.

2.4 Recommendation

For decision. NHS Board Members are asked to:

- Consider the Whistleblowing Annual Report 2025–2026 and confirm that they are assured regarding NHS Ayrshire & Arran's compliance with the National Whistleblowing Standards and the effectiveness of the associated governance and improvement arrangements, and
- Approve the report for publication and submission to the Independent National Whistleblowing Officer (INWO).

3. List of appendices

Appendix 1 – NHS Ayrshire & Arran Whistleblowing Annual Report 2025-2026.

Whistleblowing Performance Annual Report 2025-26

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Introduction

This Annual Whistleblowing Report provides an overview of whistleblowing activity within NHS Ayrshire & Arran during 2025/26 and has been prepared in accordance with the National Whistleblowing Standards (the Standards). The report demonstrates the organisation's commitment to openness, transparency, fairness and continuous improvement, while providing assurance on compliance with the Standards.

The National Whistleblowing Standards apply across NHS Scotland and set out how concerns that meet the definition of whistleblowing should be handled. The Standards are overseen by the Independent National Whistleblowing Officer (INWO) and are embedded within the Once for Scotland Whistleblowing Policy. All NHS Boards are required to publish an Annual Whistleblowing Report and share this with INWO

Five years on from the implementation of the National Whistleblowing Standards, NHS Ayrshire & Arran remains committed to fostering a culture where people feel safe, supported and confident to speak up. Whistleblowing is recognised as an important source of organisational learning and assurance, helping to identify risks, strengthen governance, improve services and enhance patient safety and staff experience.

This report demonstrates NHS Ayrshire & Arran's commitment to the principles of openness, transparency, fairness and continuous improvement. Through learning from concerns raised and ensuring they are managed consistently and in accordance with the National Whistleblowing Standards, the report provides assurance on the organisation's ongoing compliance with the Standards.

During 2025/26, NHS Ayrshire & Arran continued to embed the National Whistleblowing Standards across all services. While the number of whistleblowing concerns remains low, staff engagement measures indicate that most colleagues feel able to raise concerns safely and believe that concerns will be acted upon. We recognise that further work is required to improve investigation timescales and strengthen opportunities to capture feedback from those using the whistleblowing process. Learning from concerns, together with continuing engagement with staff and the Independent National Whistleblowing Officer (INWO), will remain a key priority for the year ahead.

Jennifer Wilson, Nurse Director / Executive Lead for Whistleblowing

1. Background

All NHS organisations in Scotland are required to comply with the National Whistleblowing Principles and Standards The National Whistleblowing Standards (the Standards) which set out how NHS service providers should handle concerns that meet the definition of whistleblowing. As part of the 'Once for Scotland' Workforce Policies Programme, the Whistleblowing Policy directs NHS Scotland Boards to follow these Standards (the Standards).

The Standards are supported by the NHS Scotland Whistleblowing Policy and require all NHS Boards to publish an annual report and share it with the Independent National Whistleblowing Officer (INWO).

To support implementation of the Standards, NHS Ayrshire & Arran established governance arrangements led by the Nurse Director as Executive Lead for Whistleblowing. An initial Whistleblowing Steering Group oversaw implementation and subsequently evolved into the Whistleblowing Oversight Group (WBOG), which continues to provide strategic oversight and assurance. Membership includes the Executive Lead for Whistleblowing, NHS Ayrshire & Arran's Whistleblowing Champion, the Employee Director and representatives from Human Resources and Corporate Governance.

Implementation of the Standards was completed in 2021 and included a comprehensive communication and training programme. As part of this work, NHS Ayrshire & Arran developed its Speak Up model, comprising Confidential Contacts, Speak Up Advocates, a dedicated telephone helpline and a secure whistleblowing mailbox. Access to these services is carefully managed to maintain confidentiality and provide appropriate support to those seeking advice or wishing to raise concerns.

The WBOG continues to meet quarterly to monitor compliance with the Standards, oversee whistleblowing performance and support continuous improvement. Regular performance reports are submitted to the Staff Governance Committee and NHS Board, providing assurance that the organisation is meeting its obligations and maintaining effective arrangements for speaking up and whistleblowing.

2. At a glance

Whistleblowing - At a Glance
2025/2026

NHS Ayrshire & Arran

This infographic summaries the key details within NHS Ayrshire & Arran's Whistleblowing Annual Report 2025-26. For more information on whistleblowing guidance, policies and reports, please scan the QR code or visit: www.nhsaaa.net/about-us/strategies-policies/whistleblowing

Contacts

12 contacts received via Confidential Contacts, Speak Up Advocates, SpeakUp mailbox and phoneline

6 concerns not appropriate for Whistleblowing process

3 concerns investigated through the Whistleblowing process

5 concerns received anonymously

Investigations

Total concerns received: **3**

- Closed at Stage 1: **0**
- Closed at Stage 2: **0**
- Ongoing at Stage 2: **3**

Average timescales

- Stage 1: N/A
- Stage 2: 165 working days

iMatter staff survey feedback

72% Strongly Agree / Agree: I am confident that I can safely raise concerns about issues in my workplace

59% Strongly Agree / Agree: I am confident that my concerns will be followed up and responded to

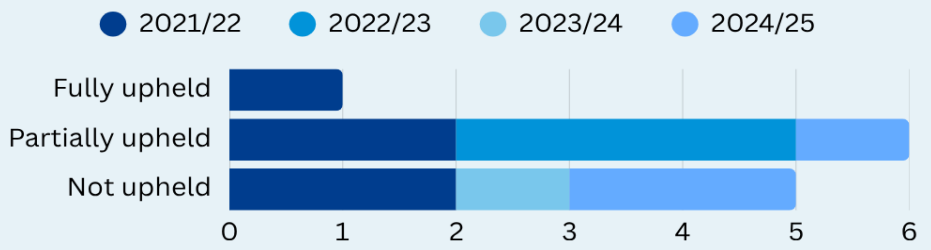
Key themes:

- Patient care
- Patient safety
- Unsafe working conditions

Training

88.2% of managers completed training

Concern outcomes 2021 - 2026



3. Learning, changes or Improvements to Service or Procedures (KPI-1)

3.1 NHS Ayrshire & Arran remains committed to ensuring that all whistleblowing concerns lead to meaningful learning and improvement. Where a concern is upheld or partially upheld under the National Whistleblowing Standards, a formal Improvement Plan is developed. These plans are approved by the Director responsible for commissioning the investigation and progress is monitored through the appropriate governance structures.

While individual cases can generate important learning, opportunities for wider organisational sharing may be limited by the need to maintain the confidentiality. Where possible, themes and learning are shared through the Whistleblowing Oversight Group and relevant governance forums.

Table 1 - number and status of Improvement Plans and Learning Plans from 2021 to 31 March 2026.

Year	Improvement Plans		Learning Plans	
	In Progress	Closed	In Progress	Closed
2021-2022	0	4	0	1
2022-2023	0	3	0	0
2023-2024	0	1	0	0
2024-2025	0	1	0	0
2025-2026	0	0	0	0

Table 1

The improvement plan initiated in 2024/25 was closed in April 2026 with all actions transitioned to business-as-usual.

For 2025/26, it is important to note that four Stage 2 concerns remain open at 31 March 2026 (one concern raised in 2024/25 and three raised in 2025/26), with investigations currently ongoing. Once these investigations conclude, the associated Improvement Plans will be reviewed and monitored through the Whistleblowing Oversight Group. Outcomes and closure status will be included in future reporting to the NHS Board.

3.2 Identified Improvements and System Wide Learning

Investigations into concerns received in 2025/26 remain ongoing as 31 March 2026. Outcomes and associated learning will be reported quarterly during 2026/27.

Learning from the improvements plan closed during the reporting period is summarised below:

- Improvements have been evidenced in audit compliance, staff engagement, and workforce development processes.
- Structured approaches (e.g. rolling plans, protected time, and regular engagement forums) have supported sustained improvement.
- Workforce capacity remains a key factor influencing the pace and sustainability of improvement.

- Increased visibility of performance data and leadership engagement has strengthened accountability and staff involvement.
- Actions have largely been embedded into business as usual, with ongoing oversight in place to support sustainability.

Organisational learning highlights the importance of structured planning, protected time for staff development, and the impact of workforce capacity on improvement delivery. Increased visibility of performance data and regular staff engagement support accountability and culture, while embedding actions within governance processes supports sustainable improvement.

This learning will inform ongoing improvement activity and organisational development.

4. Experience of individuals raising concern/s (KPI-2)

4.1 All individuals who raise concerns are offered the opportunity to provide feedback on their experience of using the whistleblowing process, through an anonymous survey. This enables staff to comment on how the process felt for them and to highlight any areas where improvements could be made. This feedback mechanism is an important part of ensuring that the whistleblowing process remains accessible, supportive and effective

Feedback will continue to be gathered from all those involved in the whistleblowing process, including individuals who raise concerns, those who support them, and those involved in investigations. This information helps identify strengths and highlight areas for improvement.

As all Stage 2 concerns for 2025/26 remain ongoing, it has not yet been possible to seek full feedback from those involved in the investigation process.

Feedback was sought from individuals involved in investigations that commenced in 2024/25 and concluded in 2025/26; however, no responses were received. While the number of returns remains limited, the organisation will continue to promote the importance of providing feedback and will explore additional ways to encourage participation, recognising that learning from lived experience is critical to strengthening the whistleblowing culture.

5. Level of staff perception and awareness and training (KPI-3)

5.1 NHS Ayrshire & Arran has continued to promote awareness of the Standards among staff in 2025/26 through a range of communication channels. While staff perceptions are not easily quantified, available feedback from the iMatter survey is generally positive, indicating a reasonable level of awareness and engagement.

5.2 Speak Up Week: 29 September - 3 October 2025

Speak Up Week is the Independent National Whistleblowing Officer's (INWO) annual national event, first launched in 2022. Speak Up Week 2025 took place from 29 September

to 3 October 2025 under the theme "Listen, Act, Build Trust", reflecting the INWO's continued commitment to fostering a culture where staff feel safe and supported to raise concerns.

The theme highlighted three core components of an effective speak-up culture:

- Listening to concerns with openness and respect
- Acting promptly and transparently
- Building trust through consistent, fair and accountable processes

Building on learning from previous years and incorporating participant feedback, the programme was designed to ensure the initiative remained relevant and responsive to organisational needs.

Speak Up Week 2025 was delivered through a coordinated programme of digital engagement and communication activities, ensuring accessibility and broad participation across the organisation. Activities included INWO-led online events and targeted communications to raise awareness, encourage open dialogue, and support the continued strengthening of NHS Ayrshire & Arran's speak-up culture. This approach enabled colleagues to engage flexibly with the campaign and its key messages.

5.3 iMatter survey

As part of the annual iMatter survey, staff were asked two key questions relating to raising concerns in the workplace:

1. Whether they felt confident that they could safely raise concerns about issues in their workplace.
2. Whether they were confident that any concerns raised would be followed up and responded to.

In NHS Ayrshire & Arran, 8,568 staff responded to these questions in 2025, providing a robust insight into staff perceptions of psychological safety and organisational responsiveness. The iMatter response for this section of the survey is provided below:

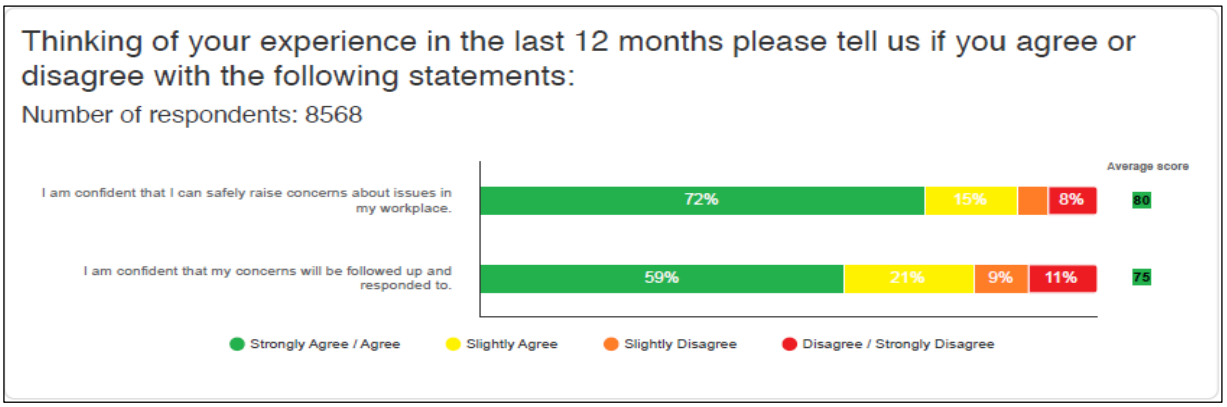


Table 2

Table 3 shows that year on year employee sentiment remains strong and largely unchanged. Statement 2 showing a slight improvement while Statement 1 remains stable, with only a minimal increase in disagreement.

Employee Survey Results (2024-2025)					
Statement	Year	Strongly agree/agree	Slightly agree	Slightly disagree	Disagree/ Strongly disagree
Statement 1	2024	72%	16%	5%	7%
Statement 1	2025	72%	15%	5%	8%
Statement 2	2024	59%	21%	9%	11%
Statement 2	2025	60%	21%	9%	10%

Table 3

5.4 Other communications:

Internal and external whistleblowing web pages are in place and subject to regular review and update. Internally, information is hosted on the organisation's Athena site, while a dedicated Whistleblowing page is published on the NHS Ayrshire & Arran website. These resources provide comprehensive information on the requirements of the Standards, including supporting guidance for users. The external webpage enables access for all individuals who are eligible to raise a concern under the Standards.

5.5 Training

Training on the National Whistleblowing Standards is available through NES Turas Learn for all individuals providing services on behalf of NHS Scotland, including employees, students, volunteers and contractors.

NHS Ayrshire & Arran continues to promote whistleblowing learning through regular communications, leadership development and management programmes. As at 31 March 2026, 88.2% of managers had completed the relevant Turas Learn modules, with further staff having accessed but not yet completed the training. Training uptake continues to be monitored and encouraged across the organisation

Whistleblowing and speaking up are embedded within the Corporate Induction Programme, Manager Development Support Programme and wider organisational development activity. These programmes support NHS Ayrshire & Arran's commitment to fostering a culture of openness, honesty, learning and psychological safety, where individuals feel confident and supported to raise concerns

6. Whistleblowing concerns received (KPI-4)

6.1 Concerns 2025/2026

Chart 1 shows the breakdown of concerns received in 2025/26. In 2025/26 NHS Ayrshire & Arran received 12 concerns through the Speak Up mailbox and helpline. Of these, three concerns met the whistleblowing criteria and progressed to Stage 2 for full investigation. Nine concerns did not meet the criteria for consideration under the whistleblowing process. Feedback was provided, and individuals were supported to access the most appropriate route for their concern, including signposting to relevant policies and services, with support from Confidential Contacts where required. These matters were subsequently progressed through the appropriate organisational processes.

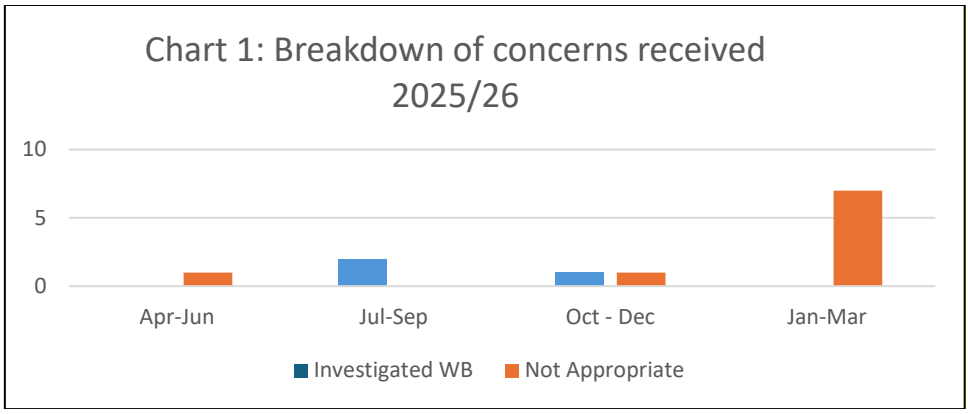


Chart 1

6.2 Total concerns received 2021–2025

Chart 2 illustrates the total number of concerns received through the Speak Up route in NHS Ayrshire & Arran since the introduction of the National Whistleblowing Standards in April 2021. Over this period, 51 concerns were received, of which 17 were taken forward for investigation under the Standards. The remaining concerns were directed to the most appropriate services or processes for progression.

While reporting levels have fluctuated from year to year, there has been a general increase in the number of concerns raised since the introduction of the Standards. This may reflect increasing awareness of the Speak Up process and confidence in the available routes for raising concerns. The number of concerns progressing to formal investigation demonstrates the ongoing application of the National Whistleblowing Standards, while concerns falling outwith the whistleblowing framework continue to be supported through the most appropriate organisational processes.

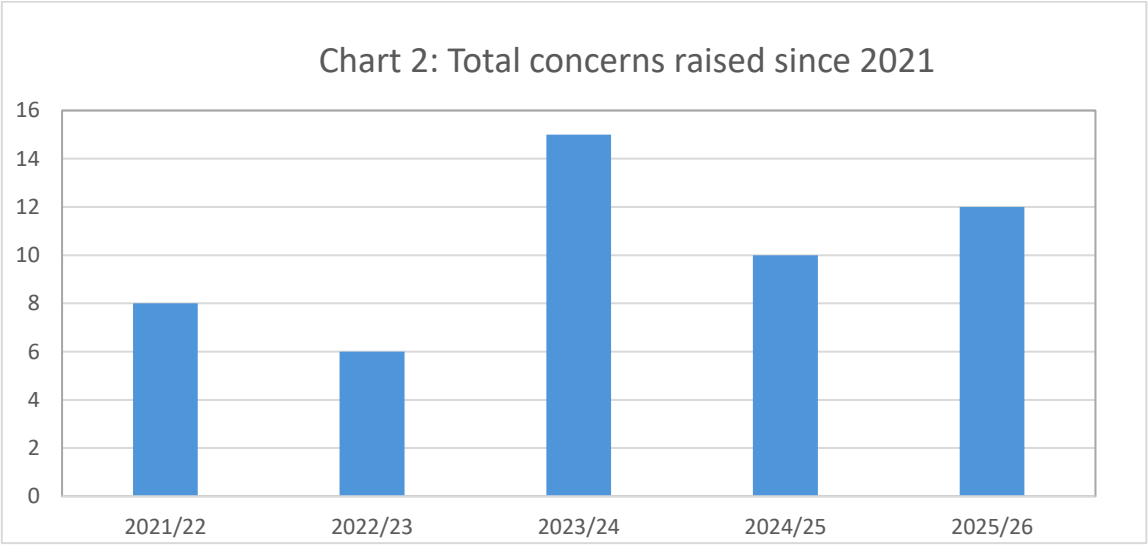


Chart 2

6.3 Benchmarking

To support understanding of local whistleblowing activity, NHS Ayrshire & Arran undertook a benchmarking exercise comparing the number of Stage 1 and Stage 2 concerns reported by territorial NHS Boards during 2024/25.

Chart 3 illustrates the variation in the number of Stage 1 and Stage 2 concerns reported across territorial Boards. Reporting activity varies across Boards, with a small number recording higher levels of activity. Across Scotland, Stage 2 concerns continue to account for the majority of whistleblowing cases.

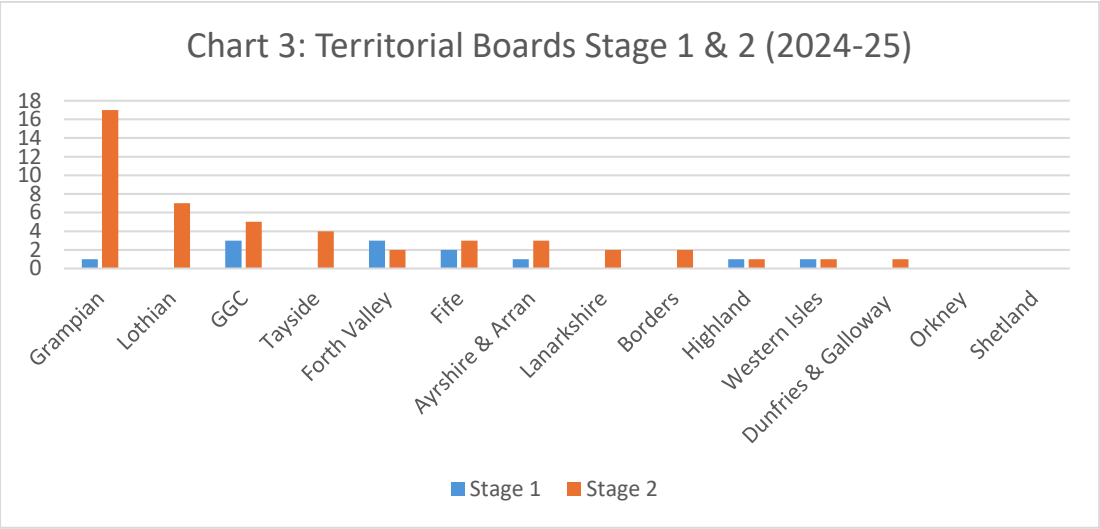


Chart 3

NHS Ayrshire & Arran's reporting activity is broadly comparable with Boards of a similar size and profile. This provides assurance that local reporting patterns remain consistent with those observed elsewhere across NHS Scotland.

The chart below illustrates the pattern of Stage 1 and Stage 2 concerns reported by territorial Boards over time. While overall volumes remain relatively low across most Boards, a small number continue to record higher levels of activity. Year-on-year comparison demonstrates broadly consistent reporting patterns, with some variation between individual Boards.

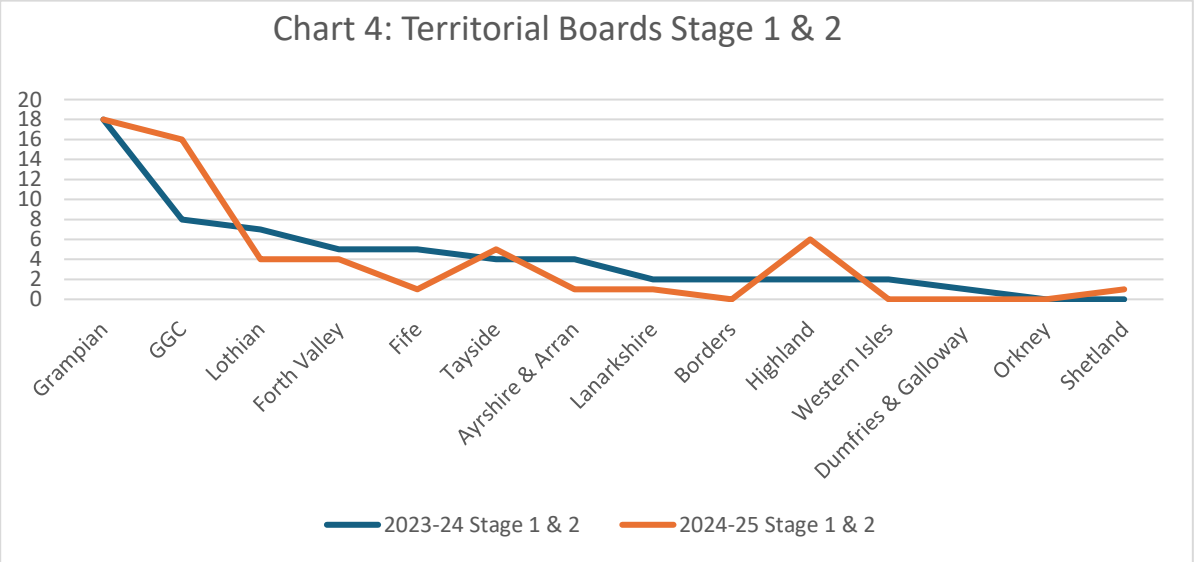


Chart 4

7. Concerns closed (KPI-5)

Concerns closed at Stage 1 and Stage 2 within reporting year:

7.1 **Stage 1:** As at 31 March 2026, no Stage 1 concerns were received during the reporting year. All Stage 1 concerns from previous reporting periods have been closed within the relevant reporting year.

7.2 **Stage 2:** At 31 March 2026, three Stage 2 concerns were received during 2025/26, all of which remain ongoing. Two Stage 2 investigations carried forward from 2024/25 reporting period were closed within this reporting year.

Concerns closed at Stage 1 and Stage 2 within reporting year				
Reporting Period	**Stage**	**Opened in Reporting Period**	**Closed in Reporting Year (2025/26)**	**Ongoing at Year End (31 March 2026)**
2024/25	Stage 2	3	2	1
2025/26	Stage 1	0	0	0
2025/26	Stage 2	3	0	3

Table 4

The Stage 2 closures reported in 2025/26 relate to investigations carried forward from the 2024/25 reporting period. All Stage 2 concerns received during 2025/26 remain ongoing at year end.

8. Concerns outcomes (KPI-6)

This section provides detail on concerns upheld, partially upheld and not upheld at each stage of the whistleblowing process.

8.1 Concern outcomes 2025/26: Table 5 summarises the outcome of concerns closed during the reporting year

Year	Total Number Concerns		Not Upheld		Partially Upheld		Fully Upheld		Total
2024/25	Stage 2	3	1	33.3%	1	33.3%	0	0	3
2025/26	Stage 1	0	0	0	0	0	0	0	0
2025/26	Stage 2	3	0	0	0	0	0	0	3

Table 5

At the end of March 2026, one concern raised in 2024/25 remains open which is why outcomes are only reported for two of the three cases. Three cases from 2025/26 are ongoing, and their outcomes will be reported once the investigations have been completed.

8.2 Concern outcomes 2021- 2026: Chart 5 shows the outcome of all concerns investigated through the Whistleblowing process from 1 April 2021 to 31 March 2025.

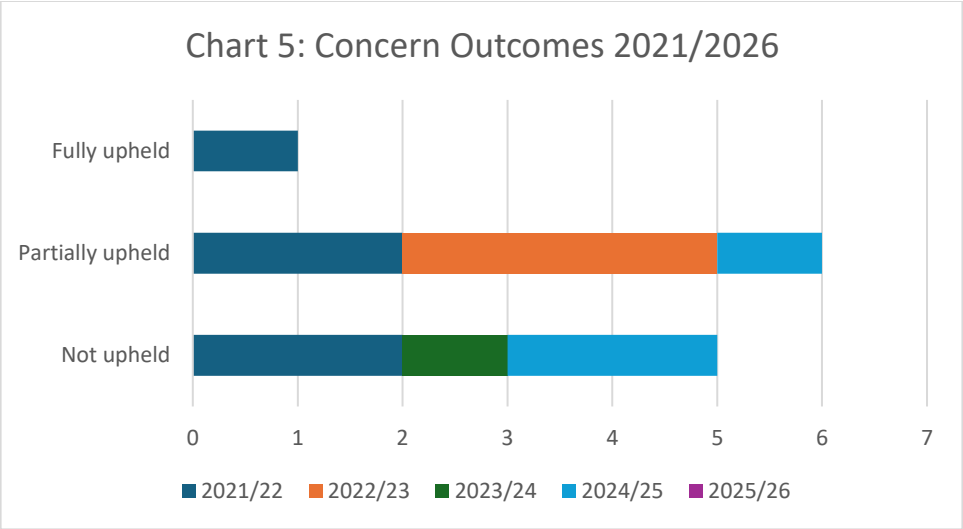


Chart 5

The chart indicates that, over the reporting period, the majority of concerns were either not upheld or partially upheld, with a small number fully upheld. While outcomes vary year on year, the overall pattern remains consistent.

9. Average Response times (KPI-7)

9.1 **Stage 1:** As at 31 March 2026, no Stage 1 concerns had been received during the reporting period. As a result, no Stage 1 response times are reported for 2025/26.

9.2 **Stage 2**: As at 31 March 2026, three Stage 2 investigations relating to concerns raised in 2025/26 remain ongoing. Their outcomes, including response times, will be reported in future periods once the investigations have concluded.

Two Stage 2 investigations carried forward from 2024/25 were closed during this reporting year. Details of these cases, including their outcomes and response times, are provided in the section below.

Stage 2 Response Time for Investigations Closed in 2025/26					
Stage	**Year Raised**	**Date Received**	**Date Closed**	**Working Days to Close**	**Outcome**
Stage 2	2024/25	25/09/2024	17/11/2025	188	Partially Upheld
Stage 2	2024/25	14/10/2024	20/10/2025	165	Not Upheld

Table 6

9.3 **Average Response Time:**
Due to the complexity of the Stage 2 concerns received, it is taking longer than the 20 working days target to conclude investigations and communicate outcomes to the Whistleblower. Whistleblowers are kept fully informed throughout the investigation process, including when an extension to timescale is required.

The average response time for investigations closed in 2025/26 was 176.5 working days.

9.4 Chart 6 shows the average number of working days to provide a full response to Stage 2 concerns from 2021 to 2025. Due to the complexity of cases and the low number of concerns received each year, the average response time remains high.

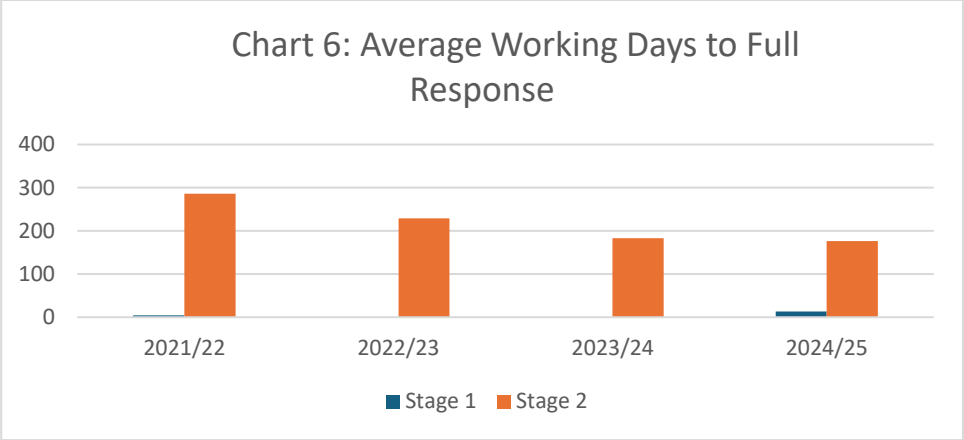


Chart 6

10. Timescales (KPI-8, 9 and 10)

10.1 **Concerns closed within the set timescales (KPI 8)**

10.1.1 Stage 1: As at 31 March 2026, no Stage 1 concerns were received during the reporting period.

10.1.2 Stage 2: As at 31 March 2026, three Stage 2 concerns had been received during the reporting period. All remained under investigation at year end and, consequently, none were concluded within the 20-working-day target timescale.

Concerns closed within 5 working days and 20 working days in the reporting year				
Reporting Period	**Stage**	**Concerns Received**	**Concerns Closed Within Target**	**Percentage Closed Within Target**
2024/25	Stage 2	3	0	0%
2025/26	Stage 1	0	0	0%
2025/26	Stage 2	3	0	0%

Table 7

The three Stage 2 concerns received during 2025/26 remained ongoing at year end. Two Stage 2 investigations carried forward from 2024/25 were concluded during the reporting period, with one remaining open.

The National Whistleblowing Standards recognise that Stage 2 concerns can involve complex issues requiring detailed investigation, support for individuals involved, engagement with multiple parties and careful management of confidentiality. While the target timescale for responding to Stage 2 concerns is 20 working days, extensions may be authorised where additional time is required to ensure a robust, fair and proportionate investigation.

The Stage 2 concerns received during 2025/26 have required detailed investigation due to the complexity and nature of the issues raised. NHS Ayrshire & Arran remains committed to progressing investigations as promptly as possible while ensuring investigations are thorough, fair, proportionate and compliant with the National Whistleblowing Standards.

10.2 **Extension to timescale (KPI 9 and KPI10):**

Table 8 sets out the number of concerns at Stage 1 and Stage 2 where an extension to timescale was authorised during reporting year 2025/26.

Concerns Where an Extension to Timescale was Authorised (Reporting Year 2025/26)				
Reporting Period	**Stage**	**Concerns Received**	**Concerns where Extension Authorised**	**Percentage of Concerns with Approved Extension**
2024/25	Stage 2	3	3	100%
2025/26	Stage 1	0	0	0%
2025/26	Stage 2	3	3	100%

Table 8

10.2.1 Stage 1: Under the terms of the Standards, Stage 1 response should normally be provided within 5 working days. However, in certain circumstances, an extension to this timescale may be required (for example: due to staff absence, difficulty arranging meetings or the involvement of witnesses).

Where an extension is necessary, the person raising the concern must be:
- Advised that additional time is required; and
- Informed when they can expect a response.

As no Stage 1 concerns were received in 2025/26 there are no extensions to report.

10.2.2 **Stage 2:** Under the Whistleblowing Standards, Stage 2 response should normally be provided within 20 working days. However, given the complexity of many Stage 2 concerns, an extension to this timescale may be required to allow for a thorough and proportionate investigation.

Where an extension is necessary, the person raising the concern will be:
- Advised that additional time is required;
- Informed when they can expect a response; and
- Provided with a written update on progress every 20 working days.

During 2025/26, three Stage 2 concerns required investigation, in each case, an extension to the 20-working-day timescale was authorised due to the complexity of the issues raised and the need for detailed investigation."

Two Stage 2 investigations carried forward from 2024/25 reporting period were concluded during 2025/26, with one remaining ongoing at year end.

10.3 **Commentary on Extensions:**

Due to the complexity of the Stage 2 concerns received during 2025/26, it has taken longer than 20 working days to conclude investigations and communicate outcomes to whistleblowers. Whistleblowers are kept fully informed throughout the investigation process, including when an extension to the timescale is required. This approach ensures transparency and maintains trust in the whistleblowing process.

Extensions were managed in line with the Standards to ensure investigations remained robust, fair, and proportionate.

Appendix 1 provides a summary Year End Report for 2025/26 for KPI-4 to KPI-10.

11. Whistleblowing themes, trends and patterns

The table below summarises whistleblowing concerns by theme. This analysis supports the identification of improvement priorities and targeted organisational learning.
Summary of themes

- The highest number of concerns were recorded in Patient Care (3) and Unsafe Working Conditions (3).
- Patient Safety accounted for a further 2 concerns.
- No concerns were reported in the remaining categories.
- Overall, themes are concentrated in patient-facing services and working environment conditions.

Note: A single concern may be categorised under more than one theme.

Theme	2025/26
Patient Care	3
Patient Safety	2
Poor Practice	0
Unsafe working conditions	3
Fraud	0
Changing or falsifying information about performance	0
Breaking legal obligations	0
Abusing Authority	0

Table 9

12. Concerns raised by Service

Chart 7 illustrates the distribution of whistleblowing concerns across the five organisational areas from 2021/22 to 2025/26.

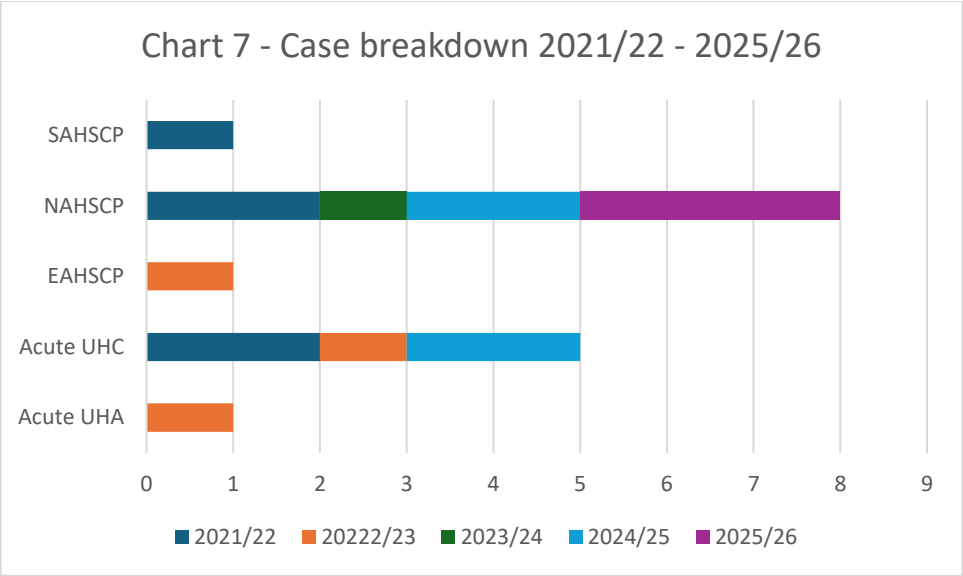


Chart 7

The data shows a clear concentration of activity within NAHSCP. In contrast, the remaining areas demonstrate lower levels of reporting.

This variation may reflect differences in local reporting culture, staff awareness of the Speak Up process, or levels of confidence in raising concerns. It may also indicate differing levels of operational pressure or risk exposure across services. The pattern highlights the importance of continued engagement, visibility, and support for speaking up across all areas to ensure that staff feel able to raise concerns wherever they arise.

13. Primary Care and Contracted Services

13.1 Primary care contractors

Primary care contractors — including GP practices, dental practices, optometry practices and community pharmacies — are covered by the National Whistleblowing Standards.

All practices and community pharmacies are aware of the Standards and the requirement to have local policies in place, along with clear information on how concerns can be raised.

Contractors are also aware of how to access the NHS Ayrshire & Arran Speak Up Service for guidance and support throughout the whistleblowing process. In addition, each contractor group has access to a dedicated Confidential Contact within NHS Ayrshire & Arran who can provide advice and support when concerns arise.

Contractor groups are required to report in line with the same key performance information as NHS Ayrshire & Arran. Where no concerns have been raised within wider primary care or other contracted services, there is no requirement to submit a quarterly return to the Board. However, annual reports must still be submitted, outlining any concerns raised during the reporting period.

As shown in Table 10 below, during 2025/26, one Stage 1 concern was raised within a GP practice. The concern related to a Scottish Ambulance Service (SAS) staff member

and involved patient safety issues affecting vulnerable patients. The concern was passed to SAS and resolved within five working days.

Table 10: Primary Care Contractor Concerns 2025/26

Primary Care Contractor (PCC)	Current PCC Cohort	No of concerns received	
		Stage 1	Stage 2
GP Practices	53	1	0
Dental Practices	65	0	0
Optometry Practices	45	0	0
Community Pharmacy	98	0	0

Table 10

13.2 Other Contracted Services

The Procurement Team maintains a Contract Register which provides a comprehensive record of all local contracts currently in place. All local contracts which are required to be tendered include the standard whistleblowing clauses within the Terms and Conditions of the contract, in line with the requirements of the Standards.

No whistleblowing concerns were reported during 2025/2026.

NHS National Procurement Services retain responsibility for National Procurement Frameworks. A national reporting and recording process is in place to ensure compliance with the Standards.

14. Anonymous / Unnamed Concerns

An anonymous concern is one that is raised in a way that does not identify the individual providing the information. This differs from an unnamed concern, where the individual raises a concern but chooses not to have their name or personal details formally recorded. While the organisation may know the individual's identity in such cases, the concern is treated as unnamed rather than fully anonymous.

Concerns cannot be formally raised anonymously under the National Whistleblowing Standards, nor can they be considered by the Independent National Whistleblowing Officer (INWO). However, NHS Ayrshire & Arran follows the principles of the Standards by considering and, where appropriate, investigating anonymous concerns as far as practicable. Anonymous concerns are also recorded for management information purposes.

For the purposes of this report, an anonymous concern is defined as:

"a concern which has been shared with the organisation in such a way that nobody knows who provided the information."

All anonymous concerns received are considered and investigated by the organisation where appropriate.

During 2025/26, five anonymous concerns were received, all in Quarter 4. These concerns were raised via Confidential Contacts, Speak Up Advocates, the Speak Up

mailbox, and other established channels.

The issues reported related to staff conduct, personal experience, grievance matters, patient safety, and risk management. Where appropriate, concerns were referred to the relevant Director for consideration and action.

15. Independent National Whistleblowing Officer

The Independent National Whistleblowing Officer (INWO) provides an independent review service for individuals who remain dissatisfied following completion of the whistleblowing process.

A clear indicator of the satisfaction of those who raise concerns can be derived from the number of concerns that are escalated to the INWO.

At the end of the fifth year, there was one referral to the INWO. This concern was reviewed by the Independent National Whistleblowing Officer (INWO) and subsequently referred back to NHS Ayrshire & Arran after being determined to meet the definition of whistleblowing under the National Whistleblowing Standards. The concern remains under investigation, with appropriate support provided throughout the process.

16. Whistleblowing and Speaking Up

The NHS Ayrshire & Arran Speak Up model supports a culture of openness and psychological safety, enabling staff to raise concerns with confidence. It provides access to Confidential Contacts and a network of Speak Up Advocates, ensuring timely and accessible support for individuals raising concerns, regardless of role or level within the organisation.

During 2025/26, concerns were raised through a range of established channels, including Confidential Contacts, Speak Up Advocates, the Speak Up mailbox, and the dedicated telephone helpline. This reflects a continued awareness of the available routes for raising concerns.

During the reporting period, it was noted that one Confidential Contact stepped back from the role. Recruitment of additional Confidential Contacts will be progressed to maintain the strength and coverage of the support network.

17. Our plans for 2026/2027

During 2026/27, NHS Ayrshire & Arran will continue to strengthen its whistleblowing arrangements through a programme of improvement, engagement, and learning. Key priorities include:

Continuous Improvement and Learning

- Review and enhance whistleblowing processes, informed by feedback from users, best practice across NHS Boards, and guidance from the Independent National Whistleblowing Officer (INWO).

- Strengthen organisational learning by working with Lead Investigators and Commissioning Directors to ensure that learning is identified, shared appropriately, and used to support improvement across the organisation.

Engagement and Culture

- Promote the National Whistleblowing Standards and ensure staff understand how to raise concerns safely.
- Engage with Confidential Contacts and Speak Up Advocates to identify and address any barriers to speaking up.
- Explore opportunities to further embed a culture of openness, psychological safety, and confidence in raising concerns.

Communication and Awareness

- Deliver regular communications through established channels, including the Daily Digest and eNews.
- Develop alternative approaches to reach staff in areas where access to digital communication is limited.
- Explore ways to gather feedback on awareness and understanding of the whistleblowing process across the organisation.

Support and Development

- Continue to develop and support Confidential Contacts and Speak Up Advocates through training, peer support, and engagement opportunities.
- Maintain links with the INWO to ensure alignment with national expectations and emerging good practice.
- Recruit additional Confidential Contacts to strengthen the support network available to staff.

Sharing Learning and Improvement

- Identify opportunities to share learning and improvements arising from concerns more widely, while maintaining confidentiality.
- Ensure that outcomes and improvements are visible to staff to reinforce trust in the process.

These actions will support continued compliance with the Standards and strengthen organisational culture and confidence in speaking up.

18. Conclusion

Five years after the introduction of the National Whistleblowing Standards, NHS Ayrshire & Arran continues to demonstrate its commitment to fostering a culture where staff and others delivering services on behalf of the organisation feel safe, supported and confident to speak up. Whistleblowing is an important mechanism for identifying concerns, supporting learning and improvement, and strengthening patient safety, service quality and staff experience.

Whilst the number of whistleblowing concerns received during the reporting period remains relatively low, NHS Ayrshire & Arran recognises that the effectiveness of whistleblowing

arrangements cannot be measured by volume alone. Greater importance is placed on ensuring that concerns can be raised without fear of detriment, that they are managed fairly and transparently, that organisational responses are timely and effective, and that learning and improvement result from concerns raised.

NHS Ayrshire & Arran has mature and well-established whistleblowing arrangements, supported by robust governance, oversight and assurance mechanisms. Throughout the reporting period, concerns were managed in line with the National Whistleblowing Standards, supported by clear processes, appropriate oversight and regular reporting. These arrangements provide assurance that concerns are handled appropriately, that individuals who speak up are supported, and that learning arising from concerns is identified and used to inform continuous improvement.

Regular reporting to the Staff Governance Committee and NHS Board, together with ongoing engagement with the Independent National Whistleblowing Officer (INWO), ensures continuous monitoring of compliance with the Standards and provides further assurance regarding the effectiveness of NHS Ayrshire & Arran's whistleblowing arrangements. The low level of external escalation, alongside continued compliance with national reporting requirements, reflects the organisation's commitment to resolving concerns appropriately and maintaining confidence in local processes.

NHS Ayrshire & Arran's whistleblowing arrangements are embedded as a core component of its wider staff governance and organisational assurance framework. Through continued communication, engagement, training and learning, the organisation will further strengthen a culture of openness and psychological safety, ensuring that staff and others delivering services on behalf of the organisation feel confident to raise concerns and that whistleblowing continues to support transparency, accountability and continuous improvement.

The Whistleblowing Oversight Group will continue to provide strategic oversight and assurance on behalf of the organisation, supporting NHS Ayrshire & Arran to maintain alignment with the National Whistleblowing Standards and ensuring that effective governance arrangements remain in place to protect those who speak up and to drive learning and improvement across the organisation

Appendix 1

YEAR END REPORTING – INWO

Reporting Year: 01/04/2025 – 31/03/2026

KPI	Category (link to Guidance)	Description	Total	Percentage
3		No of staff (headcount)	11951	
3		No of staff who completed training	5577	
3		% of total staff who completed training		40%
3		Manager headcount	997	
3		No of managers who completed training	880	
3		% of managers who completed training		88%
4	Received	Total number of concerns received	3	
5	Closed	Total number of concerns closed	0	
5	Stage 1	Number of concerns closed at Stage 1	0	0%
5	Stage 2	Number of concerns closed at Stage 2	0	0%
6	Stage 1 Outcomes	Number of concerns upheld at Stage 1	0	0%
6	Stage 1 Outcomes	Number of concerns partially upheld at Stage 1	0	
6	Stage 1 Outcomes	Number of concerns not upheld at Stage 1	0	0%
6	Stage 2 Outcomes	Number of concerns upheld at Stage 2	NA	0%
6	Stage 2 Outcomes	Number of concerns partially upheld at Stage 2	NA	
6	Stage 2 Outcomes	Number of concerns not upheld at Stage 2	NA	0%
7	Stage 1 Avg Working Days	Average working days for concerns at Stage 1	NA	
7	Stage 2 Ave Working Days	Average working days for concerns at Stage 2	NA	
8	Stage 1 Timescales	Number of concerns at Stage 1 closed within 5 working days	NA	0%
8	Stage 2 Timescales	Number of concerns at Stage 2 closed within 20 working days	NA	0%
9	Stage 1 Extensions	Number of concerns at Stage 1 with authorised extension	0	0%
10	Stage 2 Extensions	Number of concerns at Stage 2 with authorised extension	3	100%