

NHS Ayrshire & Arran



Meeting:	Ayrshire and Arran NHS Board
Meeting date:	Monday 11 August 2025
Title:	Whistleblowing Report – Quarter 1, April - 30 June 2025
Responsible Director:	Jennifer Wilson, Nurse Director
Report Author:	Linda Lee, Interim Whistleblowing Coordinator Shona McCulloch, Head of Corporate Governance

1. Purpose

This is presented to the NHS Board for:

- Discussion

This paper relates to:

- Government policy/directive

This aligns to the following NHSScotland quality ambition(s):

- Safe
- Effective
- Person Centred

2. Report summary

2.1 Situation

The National Whistleblowing Standards and Once for Scotland Whistleblowing policy (the Standards) were introduced on 1 April 2021. NHS Board Members are asked to discuss the report on organisational activity in relation to Whistleblowing concerns raised in 2025/26 Quarter 1 (1 April - 30 June 2025).

2.2 Background

The Standards set out how the Independent National Whistleblowing Officer (INWO) expects all NHS Boards to manage, record and report whistleblowing concerns. It is a requirement of the Standards that whistleblowing data is reported quarterly to the NHS Board.

The Standards also require that Boards publish an annual report setting out performance in handling whistleblowing concerns. The annual report will report 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. This report will summarise and build on the quarterly reports produced by the Board

In NHS Ayrshire & Arran, the agreed governance route for reporting on whistleblowing is to the Staff Governance Committee and then to the NHS Board. The NHS Board report will be shared with Integration Joint Boards following the NHS Board meeting.

2.3 Assessment

One concern was received in quarter 1 (Q1). This was not appropriate to be taken forward using the Standards and therefore it is not possible to provide a detailed report. No immediate risk was identified to patient safety in the concern received in Q1 and therefore no action was required. A short update on recent whistleblowing activity to support the Standards is provided below.

2.3.1 The concern raised in Q1 was received via a Confidential Contact. The complainant subsequently provided detail of their concern and asked that it be taken forward under the Whistleblowing Standards. The concern was discussed by the Whistleblowing Decision Team at two separate meetings with further information from the complainant provided for the second meeting. The outcome from both meetings was that the concern was not appropriate to be reviewed using the Standards as the difficulties described related to workplace experience and management culture. The group could see no evidence to indicate a risk of harm or detriment to patient outcomes. The complainant was offered an HR investigation be commissioned so the concerns described could be reviewed through guidance of the NHSScotland Workforce Investigation Policy and it was suggested that the culture concern could benefit from Organisation Development discussion and input. The Deputy Director of People, Safety and Culture plans to engage with the complainant to discuss and agree the best route for their concerns to be reviewed.

2.3.2 Case update: There are three investigations ongoing as described in Table 1. The investigations for these are complex and required extensions to the 20 day target for responding which were agreed with the complainants. There has been ongoing engagement with the complainants for all cases.

Case	Area	Stage	Status	Update
Q2 2024/25	NAHSCP	Stage 2	Open – Investigation concluded	Investigation report being finalised with Lead Investigator and Commissioning Director. No Improvement Plan required. Outcome letter being progressed.
Q3 2024/25	UHC	Stage 2	Open – Investigation concluded	Investigation report complete and Improvement Plan being finalised with Commissioning Director. Outcome letter being progressed.
Q4 2024/25	UHC	Stage 2	Open – Investigation ongoing	Lead Investigator is progressing the investigation and has met with complainant. Investigation includes HR support. Complex concern.

Table 1

2.3.3 Improvement plans: there are no ongoing Improvement Plans currently.

2.3.4 Training update: Monthly reports are produced to monitor completion of the Turas Whistleblowing eLearning modules. Table 2 shows the position for Q1 2025/26.

Programme	Nos Completed		Increase	Total No of staff	% staff completed
	31/03/2025	30/06/2025			
An overview (Staff)	4653	4855	202	11690	41.5%
For Senior Managers	468	476	8	1059	74.8%
For Line Managers	294	317	23		

Table 2

The data shows a limited increase over the quarter, however, there are numbers “in progress” for each programme and there will be focus in our communications to remind and encourage those who have started the programmes to complete them.

In progress at 30/06/2025		
Whistleblowing : An overview	Whistleblowing : For senior managers	Whistleblowing : For Line managers
362	171	101

The whistleblowing training provided through Turas Learn has three programmes:

- staff who need an overview of the Standards – 1 hour
- staff who are line managers or work in a similar role, who are likely to receive concerns from colleagues in their day-to-day work – around 2 hours
- senior managers who are involved with not only receiving concerns, but also investigating, responding to, and reporting on whistleblowing concerns to the board – 3 hours.

The learning programmes are available on Turas Learn <https://learn.nes.nhs.scot/40284>

2.3.5 Speak Up Week: is a national annual engagement event which was launched by the INWO in 2022. [Speak Up Week 2025](#) will take place from 29 September to 3 October. Building on previous years and feedback, the theme this year is 'Listen, Act, Build Trust'. We are working with our Communications colleagues to plan our engagement and communications in support of Speak Up Week 2025.

2.3.6 INWO: A clear indicator of the satisfaction of those who raise concerns can be derived from the number of concerns that are escalated to the Independent National Whistleblowing Officer (INWO). At this current time, there have been no referrals to the INWO.

If a concern is escalated to the INWO, the INWO investigates each case independently and reports on the findings which are published on the [INWO website](#). Locally, these reports are reviewed to benchmark our processes where appropriate and to identify any areas for learning or improvement to local process to ensure best practice. In Q1, the INWO published two investigation reports which are being reviewed. One related to a service area within a health board and the importance of ensuring that there is an open Speak up culture within services, that concerns are handled in line with the whistleblowing standards and that whistleblowers are protected from detriment associated with speaking up. The second report published related to provision of a specialist GP service within a health and social care partnership. An initial assessment has not identified any immediate learnings for our

processes. Any learning identified will be reported and discussed through the Whistleblowing Oversight Group.

2.3.7 Quality

Procedures for raising concerns should provide good-quality outcomes 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.

2.3.8 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.

2.3.9 Financial

There is no financial impact.

2.3.10 Risk assessment/management

If staff do not have confidence in the fairness of the procedures through which their concerns are raised, or do not feel assured that concerns raised will be acted upon, there is a risk that they will not raise valid concerns about quality, safety or malpractice. The opportunity to investigate and address these concerns will have been lost, with potentially adverse impact on quality, safety and effectiveness of services.

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 are fulfilling the organisation's Values of 'Caring, Safe and Respectful' and promoting a culture of psychological safety.

2.3.11 Equality and diversity, including health inequalities

A local Equality Impact Assessment (EQIA) for the Standards is in place and published on our [public facing web](#). This assesses the impact of the Whistleblowing Standards on staff and those who provide services on behalf of the NHS with protected characteristics.

2.3.12 Other impacts

- Best value: Governance and accountability and performance management. The delivery of an effective process for whistleblowing concerns will support the Board's commitment to safe, effective and person-centred care. Effective handling of concerns supports the delivery of the Healthcare Quality Strategy.
- Compliance with Corporate Objectives: Create compassionate partnerships between patients, their families and those delivering health and care services which respect individual needs and values. This should result in the people using our services having a positive experience of care and getting the outcome they expect.

2.3.13 Communication, involvement, engagement and consultation

There is no requirement for formal engagement with external stakeholders in relation to the formulation of this paper. There has been wide communication of the Standards across the organisation.

2.3.14 **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 17 July 2025
- Staff Governance Committee on 23 July 2025.

2.4 **Recommendation**

For discussion. NHS Board Members are asked to discuss the performance for Quarter 1 (April – 30 June 2025).