

REPORT TO BUSINESS SERVICES COMMITTEE – 9th SEPTEMBER 2021

NATIONAL WHISTLEBLOWING STANDARDS

1 Reason for Report / Summary

- 1.1 To seek approval to amend the Aberdeenshire Council Disclosure of Information (Whistleblowing) Policy to meet the requirement of the National Whistleblowing Standards (“The Standards”) for Integration Joint Boards to ensure that all Health and Social Care Partnership (H&SCP) staff across both the Local Authority and NHS must be able to raise a concern about the delivery of NHS Services through the Standards.

2 Recommendations

The Committee is recommended to:

- 2.1 **Note the requirement to meet the National Whistleblowing Standards (the Standards) by the Integration Joint Board to ensure that all those working in the Health and Social Care Partnership (H&SCP), irrelevant of employer, must be able to raise a concern through the Standards about NHS Services; that the concern is handled in line with the requirements of these Standards; and anyone raising a concern will have access to the Independent National Whistleblowing Officer (INWO);**
- 2.2 **Approve the proposal to amend the Aberdeenshire Council Disclosure of Information (Whistleblowing) policy to signpost Council employed staff working in the H&SCP to raise concerns about NHS Service through the Standards;**
- 2.3 **Note that any concerns about Aberdeenshire Council services should continue to be raised via the Aberdeenshire Council Disclosure of Information (Whistleblowing) policy; and**
- 2.4 **Approve the proposed governance arrangements and the inclusion of whistleblowing performance information in the H&SCP Annual Performance Report, as required by the Standards.**

3 Purpose and Decision-Making Route

- 3.1 A report was submitted to the Integration Joint Board (IJB) Committee Meeting on 21st July 2021 highlighting the requirement for the IJB to ensure access to the Standards for all staff working in the H&SCP to raise concerns about NHS Services and advising of the Council Legal and HR advice to amend the Disclosure of Information (Whistleblowing) policy.
- 3.2 The IJB approved the governance process detailed later in the report (**Appendix 1**).

3.3 The proposal was subject to a 21-day consultation with the Trade Unions commenced on 27th July 2021. No comments were received.

4 Discussion

- 4.1 Whistleblowing can be defined as a member of staff (or ex-staff member) raising a concern that relates to speaking up in the public interest, where an act or omission has created, or may create, a risk of harm or wrong-doing.
- 4.2 Risks could relate to, for example, poor practice, fraud, lack of compliance with statutory duties or unsafe working environments.
- 4.3 It is important to differentiate between a whistleblowing concern and a grievance or complaint about how an employee has been treated at work. These situations relate to an individual's personal experience in a work matter. In those cases, employees should refer to existing employee relations' policies and procedures, such as grievance or harassment procedures, relevant to their employer organisation.
- 4.4 The National Whistleblowing Standards (the Standards) came into effect for all NHS services across Scotland on 1 April 2021 and aim to achieve a positive concern raising culture. The Standards can be accessed using this link [Independent National Whistleblowing Officer | INWO \(spsso.org.uk\)](#)
- 4.5 Whistleblowing concerns can be raised by anyone providing services for the NHS, or working with NHS staff, agency workers, contractors (including third sector service providers), students, trainees and volunteers.
- 4.6 The Standards set out the principles, the procedure for raising a concern about NHS services, the governance arrangements, and the sector specific information.
- 4.7 The Standards emphasise that those in leadership roles should promote a culture where raising whistleblowing concerns is encouraged and valued to support an ethos that promotes learning and good governance in delivering safe and effective services. The full detail of the requirements and options for H&SCPs can be accessed using this link [Health and social care partnerships | INWO \(spsso.org.uk\)](#)
- 4.8 A Steering Group and Working Group were established in July 2020 and included representation from across Grampian to ensure cross system input, a consistent approach and to identify areas that required additional support prior to implementation. (**Appendix 2**).
- 4.9 NHS Grampian will lead on further developments to meet NHS Board requirements, for example creating a form of words to be inserted into service level agreements and contracts to ensure the Standards are being complied with and reported on; continue to develop Confidential Contacts; continue to promote the Standards by highlighting improvements made; and continue to support

recording of concerns, compiling and publication of reports and system-wide learning.

- 4.10 A quarterly report of whistleblowing concerns raised in the H&SCP will be provided by NHS Grampian.
- 4.11 The H&SCP governance of the Standards will be through the Clinical and Adult Social Work (CASW) group to CASW Committee and information about whistleblowing concerns will be included in the quarterly report from this Committee to the IJB.
- 4.12 This will promote an integrated approach with consistent governance arrangements to ensure lessons are learned across organisations. It will support managers in the H&SCP to promote the same procedure for all staff to, irrelevant of employer.
- 4.13 It is a requirement of the Standards that that an annual report is published setting out performance in handling whistleblowing concerns raised, including performance against the requirements of the Standards, 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 information will be included in the H&SCP Annual Performance Report.

5 Council Priorities, Implications and Risk

- 5.1 This report helps deliver the Strategic Priority “Education & Health & Wellbeing” within the Pillar “Our People”. Implementing the requirement will ensure the same level of support and parity of access to the Standards for all staff working in the H&SCP. Robust governance and learning from whistleblowing concerns promotes human rights and public protection and ensures safe and effective services.
- 5.2 The table below shows whether risks and implications apply if the recommendations are agreed.

Subject	Yes	No	N/A
Financial		x	
Staffing	x		
Equalities and Fairer Duty Scotland	[IIA attached as Appendix 3]	x	
Children and Young People’s Rights and Wellbeing	[IIA attached as Appendix 3)	x	
Health and Wellbeing	[IIA attached as Appendix 3]	x	
Town Centre First	[IIA attached as Appendix 3]	x	

- 5.3 The staffing implications arising from the implementation of the recommendation are implicit within the content of this report.

- 5.4 An integrated impact assessment has been carried out as part of the development of the proposals set out above. It is included as **Appendix 3** and no impact has been identified.
- 5.5 The following Risks have been identified as relevant to this matter on a Corporate Level:
- *ACORP005* Working with other organisations – It is a requirement of the Standards that IJBs enable Local Authority staff working in the H&SCP to access to the Standards to raise concerns about NHS Services. However, the IJB is not the employer organisation and requires approval from Aberdeenshire Council to support this requirement. The risk is that the IJB will not be able to meet this requirement without this approval
- 5.6 The following Risks have been identified as relevant to this matter on a Strategic Level:
- *BSSR005* One Aberdeenshire, people working effectively with each other across public services and across communities. The risk is that there is a lack of equity and confusion about how to raise whistleblowing concerns about NHS Services depending on which employing organization the employee works for. This could cause risk in ensuring that services are as safe and effective as possible.

6 Scheme of Governance

- 6.1 The Head of Finance and Monitoring Officer within Business Services have been consulted in the preparation of this report and their comments are incorporated within the report and are satisfied that the report complies with the Scheme of Governance and relevant legislation.
- 6.2 The Committee is able to consider and take a decision on this item in terms of Section C.1.1f of the List of Committee Powers in Part 2A of the Scheme of Governance as it relates to human resources and organisational development.

Pamela Milliken
Chief Officer, Health and Social Care Partnership

Report prepared by Janine Howie, Interim Partnership Manager, Strategy and Business.
Date 6 August 2021

List of Appendices

- Appendix 1 - Extract of Item 12, IJB
- Appendix 2 - Summary of Developments to Implement the Standards
- Appendix 3 - Integrated Impact Assessment

Appendix 1 - Extract of Item 12, IJB

EXTRACT OF MINUTE OF INTEGRATION JOINT BOARD OF 21 JULY, 2021

12. THE NATIONAL WHISTLEBLOWING STANDARDS

There had been circulated a report dated 24 June, 2021 by the Chief Officer advising that the National Whistleblowing Standards (the Standards) had come into effect for all NHS services across Scotland on 1 April 2021 and aimed to achieve a positive concern raising culture. The report provided information on the Standards, which set out the principles and procedures for raising concerns about NHS services, the governance arrangements and the sector specific information, and highlighted the work of a Steering Group and Working Group established in July 2020 to develop a consistent approach and to identify areas that would require additional support to be ready for implementation.

The Joint Board heard further from the Partnership Manager, Strategy and Business Services that to meet the requirements of the Standards, IJBs must ensure that all Health and Social Care Partnership staff across both the Local Authority and NHS, as well as any students, trainees or agency staff must be able to raise a concern about the delivery of HNS services through the Standards, and an amendment to the Council's Disclosure of Information (Whistleblowing) Policy would be considered in line with the usual Council procedure, in order to promote an integrated approach with consistent governance arrangements. She advised that a quarterly report of whistleblowing concerns raised would be provided and an information of whistleblowing performance would be included in the Health and Social Care Partnership Annual Performance Report.

There was discussion on the need to inform, educate and engage with staff, to ensure that appropriate support was available and easily accessible, acknowledging the need to protect the person raising the concern throughout the process, the need to ensure wider access to resources and that staff in third sector organisations would have access to support through the Standards.

The Joint Board **agreed:-**

- (1) to note the requirement to meet the National Whistleblowing Standards (the Standards) and ensure that all those working in the Health and Social Care Partnership (H&SCP), whoever their employer is, must be able to raise a concern through the Standards about NHS Services;
- (2) to note that any employee working in the H&SCP, as well as any students, agency workers, contractors. raising concerns about NHS services must have the concerns handled in line with the Standards;
- (3) to note the work to implement the Standards developed to date and acknowledge that further consideration of this issue was ongoing by Aberdeenshire Council;

- (4) to note that any concerns about Aberdeenshire Council services should continue to be raised via the Aberdeenshire Council Disclosure of Information (Whistleblowing) policy;
- (5) to approve the proposed governance arrangements and the inclusion of whistleblowing performance information in the H&SCP Annual Performance Report.

Appendix 2 – Summary of Developments to Implement the Standards

- **Culture and Communications** – The launch was widely promoted from the 1st of April. Posters were circulated with QR codes to easily link to the NHS Grampian public facing dedicated whistleblowing webpage, to an electronic concern reporting form and to the INWO website. Webpages are linked so easy to find. There were briefings and meetings with the third sector and primary care.
- **Training and Support** – Turas e-learning modules are available with a module targeted at staff and a module for managers. Council employed staff working in the H&SCP can access TURAS on request. Whistleblowing Confidential Contacts are available to support anyone who has a whistleblowing concern and are raised at: gram.confidentialcontact@nhs.scot.
- **Processes and Procedures** – The Steering Group members are the point of contact for the Confidential Contacts to arrange independent investigations. If concerns are raised directly to a service, it is recommended that the concern raiser, and/or person raised to, should contact a Confidential Contact.
- **Reporting and Responsibilities** – NHS Boards must work with their service providers (including primary care) to ensure they get the required information so they can produce an annual report that covers all the NHS services provided through the board. Integration joint board (IJB) reporting must also be covered in this report, unless a separate annual report covering all IJB services is published by the IJB itself.

Aberdeenshire Council

Integrated Impact Assessment

National Whistleblowing Standards

Assessment ID	IIA-000033
Lead Author	Janine Howie
Additional Authors	Amy Richert
Service Reviewers	Geraldine Fraser
Subject Matter Experts	Susan Forbes, Lynne Gravener
Approved By	Pamela Milliken
Approved On	Tuesday August 10, 2021
Publication Date	Thursday August 12, 2021

1. Overview

This document has been generated from information entered into the Integrated Impact Assessment system.

The Standards were implemented for NHS employees, contractors, volunteers, students etc on the 1st April. The Standards state that Local Authority staff working in the H&SCP must also have access to the standards for concerns raised about NHS services. This would involve an amendment to the current Aberdeenshire Council Disclosure of Information (Whistleblowing) Policy.

During screening 3 of 10 questions indicated that detailed assessments were required, the screening questions and their answers are listed in the next section. This led to 2 out of 5 detailed impact assessments being completed. The assessments required are:

- Equalities and Fairer Scotland Duty
- Health Inequalities

In total there are 27 positive impacts as part of this activity. There are 0 negative impacts, all impacts have been mitigated.

A detailed action plan with 1 points has been provided.

This assessment has been approved by pamela.milliken@aberdeenshire.gov.uk.

The remainder of this document sets out the details of all completed impact assessments.

2. Screening

Could your activity / proposal / policy cause an impact in one (or more) of the identified town centres?	No
Would this activity / proposal / policy have consequences for the health and wellbeing of the population in the affected communities?	Yes
Does the activity / proposal / policy have the potential to affect greenhouse gas emissions (CO2e) in the Council or community and / or the procurement, use or disposal of physical resources?	No
Does the activity / proposal / policy have the potential to affect the resilience to extreme weather events and/or a changing climate of Aberdeenshire Council or community?	No
Does the activity / proposal / policy have the potential to affect the environment, wildlife or biodiversity?	No
Does the activity / proposal / policy have an impact on people and / or groups with protected characteristics?	Yes
Is this activity / proposal / policy of strategic importance for the council?	No
Does this activity / proposal / policy reduce inequality of outcome?	Yes
Does this activity / proposal / policy have an impact on children / young people's rights?	No
Does this activity / proposal / policy have an impact on children / young people's wellbeing?	No

3. Impact Assessments

Children's Rights and Wellbeing	Not Required
Climate Change and Sustainability	Not Required
Equalities and Fairer Scotland Duty	No Negative Impacts Identified
Health Inequalities	No Negative Impacts Identified
Town Centre's First	Not Required

4. Equalities and Fairer Scotland Duty Impact Assessment

4.1. Protected Groups

Indicator	Positive	Neutral	Negative	Unknown
Age (Younger)	Yes			
Age (Older)	Yes			
Disability	Yes			
Race	Yes			
Religion or Belief	Yes			
Sex	Yes			
Pregnancy and Maternity	Yes			
Sexual Orientation	Yes			
Gender Reassignment	Yes			
Marriage or Civil Partnership		Yes		

4.2. Socio-economic Groups

Indicator	Positive	Neutral	Negative	Unknown
Low income	Yes			
Low wealth	Yes			
Material deprivation	Yes			
Area deprivation	Yes			
Socioeconomic background	Yes			

4.3. Positive Impacts

Impact Area	Impact
Age (Older)	<p>This process provides a supportive environment for all HSCP staff to raise concerns about NHS services without fear of reproach.</p> <p>The NHS standards highlight that raising concerns can be particularly challenging for people with protected characteristics including staff who are older.</p> <p>The policy supports them to do so.</p>
Age (Older)	<p>The policy can be used by HSCP staff to raise concerns about NHS services including those specifically provided to older people with the potential to positively impact on standards of care for this group.</p>

Impact Area	Impact
Age (Younger)	<p>This process provides a supportive environment for all HSCP staff to raise concerns about NHS services without fear of reproach.</p> <p>The NHS standards highlight that raising concerns can be particularly challenging for people with protected characteristics. Case study examples are provided to accompany that standards and highlight that younger people and students may not feel comfortable in directly challenging poor practice that they may observe in NHS services. The policy supports them to do so.</p>
Age (Younger)	<p>The policy can be used by HSCP staff to raise concerns about NHS services including those specifically provided to children and young people with the potential to positively impact on standards of care this group.</p>
Age (Younger)	<p>The policy enables all HSCP staff to raise concerns about all NHS services including concerns regarding the care and treatment of children and young people with a view to ensuring high quality services are provided.</p>
Disability	<p>This process provides a supportive environment for all HSCP staff to raise concerns about NHS services without fear of reproach.</p> <p>The NHS standards highlight that raising concerns can be particularly challenging for people with protected characteristics including those who have a disability.</p> <p>The policy supports them to do so.</p>
Disability	<p>The policy can be used by HSCP staff to raise concerns about NHS services including those specifically provided to people living with disabilities with the potential to positively impact on standards of care.</p>
Gender Reassignment	<p>This process provides a supportive environment for all HSCP staff to raise concerns about NHS services without fear of reproach.</p> <p>The NHS standards highlight that raising concerns can be particularly challenging for people with protected characteristics including those who are considered within the protected characteristic of gender reassignment.</p> <p>The policy supports them to do so.</p>
Gender Reassignment	<p>The policy can be used by HSCP staff to raise concerns about NHS services including those regarding discrimination due to gender reassignment with the potential to positively impact on standards of care.</p>
Pregnancy and Maternity	<p>This process provides a supportive environment for all HSCP staff to raise concerns about NHS services without fear of reproach.</p> <p>The NHS standards highlight that raising concerns can be particularly challenging for people with protected characteristics including those who are pregnant or on maternity leave.</p> <p>The policy supports them to do so.</p>

Impact Area	Impact
Race	<p>This process provides a supportive environment for all HSCP staff to raise concerns about NHS services without fear of reproach.</p> <p>The NHS standards highlight that raising concerns can be particularly challenging for people with protected characteristics including the consideration of the protected characteristic of race. The policy supports them to do so.</p>
Race	<p>The policy can be used by HSCP staff to raise concerns about NHS services including concerns regarding racial discrimination with the potential to positively impact on standards of care.</p>
Religion or Belief	<p>This process provides a supportive environment for all HSCP staff to raise concerns about NHS services without fear of reproach.</p> <p>The NHS standards highlight that raising concerns can be particularly challenging for people with protected characteristics including those where the protected characteristic relates to religion or belief.</p> <p>The policy supports them to do so.</p>
Religion or Belief	<p>The policy can be used by HSCP staff to raise concerns about NHS services including those related to religious discrimination with the potential to positively impact on standards of care this group.</p>
Sexual Orientation	<p>This process provides a supportive environment for all HSCP staff to raise concerns about NHS services without fear of reproach.</p> <p>The NHS standards highlight that raising concerns can be particularly challenging for people with protected characteristics including those who are considered within the protected characteristic of sexual orientation.</p> <p>The policy supports them to do so.</p>
Sexual Orientation	<p>The policy can be used by HSCP staff to raise concerns about NHS services including those regarding discrimination due to sexual orientation with the potential to positively impact on standards of care.</p>
Sex	<p>This process provides a supportive environment for all HSCP staff to raise concerns about NHS services without fear of reproach.</p> <p>The NHS standards highlight that raising concerns can be particularly challenging for people with protected characteristics. Case study examples are provided to accompany that standards and highlight that younger people and students may not feel comfortable in directly challenging poor practice that they may observe in NHS services. The policy supports them to do so.</p>
Sex	<p>The policy can be used by HSCP staff to raise concerns about NHS services including those regarding gender discrimination with the potential to positively impact on standards of care.</p>

Impact Area	Impact
Area deprivation	The policy can be used by HSCP staff to raise concerns about NHS services regardless of the circumstances of those receiving the service which should positively impact on those on living in areas where deprivation is high.
Low income	<p>This process provides a supportive environment for all HSCP staff to raise concerns about NHS services without fear of reproach.</p> <p>The NHS standards highlight that raising concerns can be particularly challenging for people whose employment may be less secure, such as agency staff or those who need a visa to work in the UK, including those in low paid roles. Case studies included with the standards indicate that raising concerns about more senior staff practices can be more challenging for those in lower paid roles.</p> <p>The policy supports them to do so.</p>
Low income	The policy can be used by HSCP staff to raise concerns about NHS services regardless of the circumstances of those receiving the service which should positively impact on those on low incomes.
Low wealth	<p>This process provides a supportive environment for all HSCP staff to raise concerns about NHS services without fear of reproach. The NHS standards highlight that raising concerns can be particularly challenging for people whose employment may be less secure, such as agency staff or those who need a visa to work in the UK, including those experiencing low wealth. Case studies included with the standards indicate that raising concerns about more senior staff practices can be more challenging for those in lower paid roles or who are fearful of raising a concern due to risk of losing their income. The policy supports them to do so</p>
Low wealth	The policy can be used by HSCP staff to raise concerns about NHS services regardless of the circumstances of those receiving the service which should positively impact on those on experiencing low wealth.
Material deprivation	The policy can be used by HSCP staff to raise concerns about NHS services regardless of the circumstances of those receiving the service which should positively impact on those experiencing material deprivation.
Socioeconomic background	<p>This process provides a supportive environment for all HSCP staff to raise concerns about NHS services without fear of reproach. The NHS standards highlight that raising concerns can be particularly challenging for people whose employment may be less secure, such as agency staff or those who need a visa to work in the UK, including those from lower socioeconomic backgrounds. Case studies included with the standards indicate that raising concerns about more senior staff practices can be more challenging for those in lower paid roles. The policy supports them to do so</p>

Impact Area	Impact
Socioeconomic background	The policy can be used by HSCP staff to raise concerns about NHS services regardless of the socioeconomic status of those receiving the service which should have a positive impact.

4.4. Evidence

Type	Source	It says?	It Means?
External Data	The independent Whistle blowing officer	<p>"It is important for everyone involved in this procedure to be aware that some people may feel at greater risk than others as a result of raising a concern. For example: employees whose employment may be less secure, such as agency staff or those who need a visa to work in the UK students and others who are due to be assessed on their work people from any of the recognised equalities groups. Some people may consider themselves to be more likely to be treated unfairly as a result of raising a concern, particularly if they are in more than one of the above groups. It is particularly important to make sure people are aware of the support available through this procedure, and that any concerns they raise are treated seriously."</p> <p>Case study examples are also provided to accompany the standards and highlight a range of scenarios where the standards would be used to the benefit of people with protected characteristics for example a Case study which outlines that younger people and students may not feel comfortable in directly challenging poor practice that they may observe in NHS services.</p>	Having a consistent policy, and associated support, for HSCP staff raising concerns about NHS Services provides a framework for all staff which can benefit those with protected characteristics and those covered by the fairer scotland duty.

Type	Source	It says?	It Means?
External Data	Independent national whistleblowing officer	<p>Whistleblowing is defined in the Public Services Reform (Scottish Public Services Ombudsman) Healthcare Whistleblowing Order 2020 as:</p> <p>"when a person who delivers services or used to deliver services on behalf of a health service body, family health service provider or independent provider (as defined in section 23 of the Scottish Public Services Ombudsman Act 2002) raises a concern that relates to speaking up, in the public interest, about an NHS service, where an act or omission has created, or may create, a risk of harm or wrong doing."</p> <p>This includes an issue that:</p> <p>has happened, is happening or is likely to happen affects the public, other staff or the NHS provider (the organisation) itself. People also often talk about 'raising concerns' or 'speaking up'. These terms can also refer to whistleblowing. The issue just needs to meet the definition above, whatever language is being used to describe it.</p>	<p>There is a legislative framework in place which ensures we must have sufficient whistleblowing procedure in place to minimise the risk of harm or wrongdoing to all patients. This applies equally to those with protected characteristics and those who must be considered under the fairer scotland duty.</p> <p>The proposal within the report will ensure this is in place to enable HSCP staff to follow the NHS standards when raising concerns a bout NHS services.</p>

4.5. Engagement with affected groups

Specific engagement has not been carried out locally for this report . The standards are consulted upon and set nationally. The local focus will continue to be on awareness raising on the new standards for all staff groups affected.

4.6. Ensuring engagement with protected groups

Awareness raising across all staff groups on the policy;

- Culture and Communications – The launch was widely promoted from the 1st of April.

Posters were circulated with QR codes to easily link to the NHS Grampian public facing dedicated whistleblowing webpage, to an electronic concern reporting form and to the INWO

website. Webpages are linked so easy to find. There were briefings and meetings with the third sector and primary care.

- Training and Support – Turas e-learning modules are available with a module targeted at staff and a module for managers. Whistleblowing Confidential Contacts are available to support anyone who has a whistleblowing concern and are raised at: gram.confidentialcontact@nhs.scot

4.7. Evidence of engagement

A Steering Group and Working Group were established in July 2020 and included representation from across Grampian to ensure cross system input, a consistent approach and to identify areas that will require additional support to be ready for implementation.

It is a requirement of the Standards that that an annual report is published setting out performance in handling whistleblowing concerns raised, including performance against the requirements of the Standards, 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 information will be included in the HSCP Annual Report.

4.8. Overall Outcome

No Negative Impacts Identified.

The nature of this policy is to ensure that AHSCP staff have access to a consistent approach to reporting concerns about NHS services. There are no negative impacts identified as a result of this approach.

4.9. Improving Relations

The steering group will consider any issues that have been raised through the whistleblowing policy, the issues which have been raised and the actions taken. Where these relate to various groups / areas the associated actions will be reflected in the AHSCP annual report.

4.10. Opportunities of Equality

Ensuring all have equal access to the procedure for raising concerns will advance equality of opportunity.

5. Health Inequalities Impact Assessment

5.1. Health Behaviours

Indicator	Positive	Neutral	Negative	Unknown
Healthy eating		Yes		
Exercise and physical activity		Yes		
Substance use – tobacco		Yes		
Substance use – alcohol		Yes		
Substance use – drugs		Yes		
Mental health	Yes			

5.2. Positive Impacts

Impact Area	Impact
Mental health	<p>"It can be stressful and isolating to raise a concern, but when someone does raise a concern, they are trusting the organisation and giving it an opportunity to put right a wrongdoing or reduce risk. The organisation must repay this trust by protecting the person throughout the process and making sure they do not suffer any harm as a result of speaking up." Independent National Whistleblowing officer.</p> <p>Ensuring that a consistent approach is in place for all AHSCP staff to raise concerns, in confidence, with additional support available will ensure that the staff member's mental health is supported throughout.</p>

5.3. Evidence

Type	Source	It says?	It Means?
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Type	Source	It says?	It Means?
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5.4. Overall Outcome

No Negative Impacts Identified.

No negative outcomes noted. The AHSCP will work alongside NHS Grampian to ensure the correct support systems are in place to support people raising concerns.

6. Action Plan

Planned Action	Details
<p>The assessed impacts of the policy, as outlined within this assessment, are positive. Ongoing monitoring has been considered and is outlined as follows. There are no additional actions required.</p> <p>The paper proposes that the AHSCP governance of the policy will be via the Clinical and Adult Social Work Governance structure to the IJB.</p> <p>Further to this it is a requirement of the Standards that that an annual report is published setting out performance in handling whistleblowing concerns raised, including performance against the requirements of the Standards, 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 information will be included in the H&SCP Annual Performance Report.</p>	<p>Lead Officer Janine Howie</p> <p>Repeating Activity No</p> <p>Planned Start Wednesday July 21, 2021</p> <p>Planned Finish Saturday August 21, 2021</p> <p>Expected Outcome To be further monitored via the process outlined above.</p> <p>Resource Implications None.</p>