

# Board of Directors' Meeting 6 May 2021

Agenda item	110/21				
Report	Freedom to Speak Up (FTSU) Quarter 4 Report				
Executive Lead	Director of Governance and Communications				
	Link to strategic pillar:	Link to CQC doma	ain:		
	Our patients and community		Safe		
	Our people		Effective		
	Our service delivery		Caring		
	Our partners		Responsive		
	Our governance		Well Led	$\checkmark$	
	Report recommendations:		Link to BAF / risk:	1	
	For assurance				
	For decision / approval		Link to risk registe	er:	
	For review / discussion				
	For noting				
	For information				
	For consent				
Presented to:					
<b>Dependent upon</b> (if applicable):	N/A				
Executive Summary:	The following report provides a quarterly and therefore, end of year, position. In total, 302 concerns were raised throughout the year, which is a 208% increase on the previous year. Of these, 65 were in relation to patient safety / quality (second only to concerns raised about behaviours / relationships), and 39 concerns related to staff safety. Whilst it is troubling to receive concerns such as this, there is an improving position in that colleagues feel more comfortable to speak up about these issues, which is reflected in the year by year comparison shown in the report at section one. Nurses were the profession with the highest number of concerns raised throughout the year, with over one third of all concerns raised (102), on a variety of different issues.				
Appendices:	Appendix 1 – colleague feedback				

#### **Executive Summary**

# 1. Assessment of issues including themes and trends

In Quarter 4 SaTH has received 78 concerns through the FTSU mechanism bringing the years total to 302. The previous year's concerns are contained in the table below to enable year on year comparisons.

	Q1	Q2	Q3	Q4	Total	Increase	National Avg Increase
2020/21	41	82	103	78	302	↑208%	33.7% Q1,Q2 and Q3
2019/20	22	17	57	49	145	个119%	32%
2018/19	10	18	18	20	66	个106%	73%
2017/18	4	7	12	9	32	N/A	N/A

Quarter 4 normally sees a downturn in concerns following Quarter 3 due to the surge after October as 'speak up' month.

As mentioned in the previous Trust Board report, the figures shown we can see clearly that SaTH is an outlier however we await the overall 2020/21 analysis from the National Guardians Office on data received from all organisations to understand the true benchmarking picture.

The NGO requires all Trusts to submit their data to the national portal following the close of a quarter and is submitted in the following categories:

Category	<u>2017/18</u>	<u>2018/19</u>	2019/20	2020/21
Bullying and	2	56	12	40
Harassment				
Patient Safety	2	10	40	65
Anonymously	2	0	20	5
Detriment	1	6	0	2

More granular themes for SaTH can be seen in the chart below:

Nature of issue	Qtr1	Qtr2	Qtr3	Qtr4	Total
Behavioural /Relationship	4	15	27	28	74
Patient Safety /Quality	4	22	22	17	65
Bullying / Harassment	4	8	15	13	40
Staff Safety	3	12	13	11	39
System / Process	1	14	14	4	34
Leadership/Management	11	9	7	2	29
Lack of support Covid-19	8	2	1	0	11
PPE	4	0	1	0	5
Infrastructure / Environmental	0	0	1	3	4
Pregnancy concerns re Covid-19	2	0	0	0	2
Cultural	0	0	0	0	0
Total	41	82	101	78	302

Profession	Qtr1	Qtr2	Qtr3	Qtr4	Total
Nurses	14	37	30	21	102
Administrative / Clerical workers	20	15	25	10	70
Allied health professionals (other than pharmacists)	1	9	16	8	34
Healthcare assistants	1	6	11	10	28
Doctors	0	5	8	10	23
Midwives	0	2	3	15	20
Cleaning/catering/maintenance/ancillary staff	4	6	5	4	19
Corporate service staff	0	1	1	0	2
Other	0	1	2	0	3
Pharmacists	1	0	0	0	1
Board members	0	0	0	0	0
Dentists	0	0	0	0	0
Manager	0	0	0	0	0
Total	41	82	101	78	303

	Qtr1	Qtr2	Qtr3	Qtr4	Total
Open	0	3	10	44	57
Follow up (feedback emails to be sent)	7	24	23	13	69
Closed	34	55	67	21	176
	41	82	101	78	302

Up until the end of Q4, 57 cases remain open and we continue to work towards closing these in as timely a way as possible. Those remaining open are from the following quarters:

Quarter 2 x 3 Quarter 3 x 10 Quarter 4 x 39

Areas where the cases remain open are from all Divisions and more work needs to be done to understand if there are any themes coming out of length of time to close cases.

#### **Themes**

#### Behaviours/Relationships/Bullying and Harassment

The largest category of concerns are behaviours and relationships and bullying and harassment, and for the purpose of this report have been combined. The behaviours and bullying described to FTSU are at all levels and can often take the form of breakdown in relationships between just two members of staff.

# Actions taken in response:

- Behaviour workshops rolled out throughout the Trust since September, 93 teams have completed workshop1 and 42 teams have completed workshop 1 and 2, 135 workshops in total, 300 teams in the Trust.
- Formal investigations and root cause analyses triggered in areas that have long standing problems.
- Informal conversations undertaken by managers with their teams to understand the issues and resolve.
- Empowering conversations with some staff reporting concerns, to discuss issues with their managers or with the member of staff they are struggling with.
- Facilitated conversations and mediation organised by managers where there has been a breakdown in communications between staff.
- Signposting to the Trust's health and wellbeing offer
- "Making a Difference Together" launched 13th January 2021, the first conversation was completed on SaTH values with a full report and actions and the second on behaviours completed on 14<sup>th</sup> April 2021.
- More robust performance management in areas.
- Civility Saves Lives Toolkit being used in certain areas.
- Fostering a Culture Free from Bullying project led by Nick Dowd looking at Trust policies.
- Full review of leadership development across the organisation starting with Triumvirate Leadership development that will cover roles, responsibilities, giving and receiving feedback, behaviours etc.
- Organisational Development plan
- Human Factors project

# Patient Safety

The largest group speaking up about patient safety in Quarter 4 were doctors which is a positive step forward and in particular Junior Doctors in training which are nationally reported as one of the hardest groups to engage with. Concerns on patient safety were around lack of cover and review at the weekends; process on reporting of scans; drug packaging; safe staffing levels and poor patient care.

#### Actions taken in response:

- 1. Review by Medicine Safety Officer into drug packaging
- 2. Review of cover by clinical lead for the area.
- 3. Options appraisal for further cover for Theatre ODP.
- 4. Business case for additional doctors.
- 5. Review of staffing and increase in cover in areas where poor patient care reported.
- 6. Lack of funding for cover raised at RALIG.
- 7. Timely reviewing of Datixes and patient safety team expanding and giving support to ward managers to review.

# Staff Safety

Concerns raised include, access to vaccinations; health and wellbeing of staff; exposure to COVID; appropriate PPE; lack of supervision for lesser experienced staff; safe staffing levels.

#### Actions taken in response:

- 1. Signposting staff to health and wellbeing resources and where appropriate raising with senior colleagues.
- 2. Risk assessment of staff who may be more vulnerable to exposure of COVID.
- 3. Vaccination programme accelerated and available for all staff.
- 4. Amendment to working week and extension of supernumerary period for nursing staff where appropriate

5. Continual recruitment drive.

# System/Process

Concerns raised were about timely access to CoVID swab; selling annual leave; expediting availability of vaccine to those who were most at risk.

#### Actions taken in response

- 1. Trust wide scheme for colleagues to sell annual leave should they wish.
- 2. Trust wide staff communication on access to CoVID swabs.
- 3. Vaccinations prioritised for those most at risk.

#### **Professional Groups**

In line with national trends nurses are the group of workers who speak up most, however in Quarter 4 there has been a notable rise in concerns raised by midwives and a downturn by administrative/clerical staff. Themes of the concerns raised by professional groups are below.

#### Nurses:

Concerns raised were safe staffing levels; patient safety and unreviewed Datix's; behaviours and attitudes; vaccination availability; staff room facilities; staff being asked to move wards when on shift; correct cleaning procedures for ward. It should be noted that there have been no safe nursing staffing levels concerns raised since January which has been one of the primary concerns raised throughout the year.

#### Actions taken in response:

- 1. Letter of professional standards to all nurses by Director of Nursing about staffing levels.
- 2. Review of Datix's and support to nursing colleagues from patient safety team.
- 3. Management and HR interventions were necessary to address behaviours.
- 4. Vaccination available for all frontline staff.
- 5. Staff room facilities resolved due to ward changes.
- 6. Advice from infection prevention team.
- 7. Values and behaviours workshops run.

#### **Midwives**

Concerns raised were about working conditions; lack of doctor cover; poor culture and poor communication.

#### Actions taken in response:

- 1. Plans already underway to increase Doctor cover and communication from Clinical Lead of Women's and Children's to all maternity staff to detail plans.
- 2. Estates and Microbiology team reviewed safety of the air conditioning in sonographer rooms at PRH site.
- 3. Triangulation of the external review into policies, procedures and practices; FTSU concerns and safe spaces themes.
- 4. Concerns escalated to Care Group Director and Clinical Lead Women's and Children's
- 5. FTSU Lead part of Maternity Transformation Programme, Workstream 2, People and Culture.
- 6. Chief Executive and Director of Nursing attendance at team meetings.
- 7. Senior leadership visibility enhanced.

# Doctors:

Concerns raised were about safe staffing levels; vaccinations; medicine packaging; behaviours; leadership; reviewing of patients and processes.

### Actions taken in response:

- 1. Oversight on safe staffing levels by clinical leads and colleagues and raised at RALIG and other forums.
- 2. Vaccinations available for all frontline workers.
- 3. Review of packaging with the Medicine Safety Officer.
- 4. Medical Director/Clinical Leads addressing leadership/behaviour concerns.
- 5. Options appraisal for additional staffing.

#### Administrative/Clerical Workers:

All concerns raised fell into the behavioural/relationship category and all but one were about problems/issues faced between two people.

#### Actions taken in response:

- 1. Signposted to HR
- 2. Discussion and coaching to raise the issue with their manager or appropriate person.
- 3. Referral to OD team.

# <u>HCAs</u>

Concerns raised were about staffing levels; moving wards; cleaning; behaviours; vaccination process; administration processes

#### Actions taken in response:

- 1. Letter of professional standards to all nurses by Director of Nursing about safe staffing levels
- 2. Vaccination process raised with regional team.
- 3. Timely issuing of off-duty.

# **Allied Health Professionals**

Concerns raised were, improvement suggestions; behaviours and attitudes; linen shortages; office space; annual leave.

#### Actions taken in response:

- 1. Linen audits undertaken daily by domestic team.
- 2. External mediation support for members of staff.
- 3. Temporary clinic and office space found for the team.
- 4. The Trust has given staff the opportunity to sell annual leave should they require it.

# The Board should be assured that all concerns raised with the FTSU team have been escalated to the relevant teams or person.

# 2.0 Action taken to improve FTSU Culture

In Q4 a number of actions have been taken to improve FTSU process, culture and visibility.

- The FTSU team are extremely visible and visit approximately 30 teams per week on their walkarounds. The team now keep a log of where they go and any soft intelligence relating to culture or issues that can be quickly resolved are escalated so things can be 'nipped in the bud' and also so that hotspots are identified in a timely manner.
- The team have undertaken a full scale team awareness raising programme getting out to all the teams in the Trust over the next 12 months period. So far 30 teams/wards out of 300 have been visited, FTSU ambassadors will also be trained to undertake the sessions to assist with the workload.
- Improving our FTSU processes continues including templates for responding to, and escalating concerns.
- Improved database for capturing information and relevant data.
- Working towards triangulation with HR and patient safety colleagues.
- FTSU- Lead now co-lead for NGO West Midlands FTSU Network.
- FTSU Guardian appointed as NGO training co-facilitator for FTSU Guardians.
- Maternity weekend drop in sessions.
- Drop in sessions for therapies
- Online drop-in sessions for wards.
- Night time walk-arounds at RSH, in Quarter 1 will extend to PRH
- FTSU session at FY1 and FY2 teaching days.
- Visits to Doctor's mess with Guardian of Safe Working.
- Improvement of escalation and following up of concerns. Escalation now happens directly from the FTSU team to the relevant manager for action and the team remains in touch with the person handling the case until the case is complete and then following up with the person who has raised concerns for feedback as per section 4. However there is still work to be done to streamline the process and ensure adequate and timely action taken.
- Improved relationships and regular meetings with stakeholders for action and to provide oversight
  of concerns raised. These include monthly 121's with Chief Executive and Workforce Director;
  HR, ER Manager; Head of Nursing, Unscheduled Care; Equality and Diversity Lead; UNISON rep;
  attendance at Junior Doctor Forums; quarterly attendance at Corporate Nursing Senior
  Leadership Team meeting.
- Presentation to SAS Doctors.
- Monthly catch ups with the on-boarding team to gain feedback on which areas in the trust are seeing a high volume of staff leaving.
- Presenting FTSU role to our international nurses.
- Concerns raised have been acted upon in a timely and appropriate manner and recorded as per the National Guardian Office Guidelines.
- FTSU Lead part of the Cultural Steering Group.
- FTSU Lead part of Maternity Transformation Programme Work stream 2.
- Team Time rolled out to support colleague's health and wellbeing, FTSU-Lead sits on the steering group.

#### National Update

#### Ambassador/Champion Guidance

The National Guardians Office has issued guidance on ambassadors/champions in Trusts and SaTH are well placed to respond. The main points are:

- 1. Training for all ambassadors/champions as part of fulfilling the role all ambassadors at SaTH have to undergo the NGO training and complete the HEE online training.
- 2. Those undertaking the ambassador role must either be called ambassadors or champions and not advocates, SaTH addressed this in December 2020.

3. Champions/ambassadors must not deal with cases themselves they are to act in a signposting/promotional capacity, whilst there are a few Trusts who chose this model SaTH does not do this, all cases are handled via the FTSU Guardian and FTSU Lead.

# Annual FTSU Guardian Survey

The National Guardians Office released the findings from the annual FTSU Guardian survey with nine recommendations, SaTH benchmarked well and those where further work is needed will form part of the action plan being put together in Quarter 1.

# 3.0 Learning and Improvement

Below is a list of high level detail of learning points from concerns closed in Quarter 4.

#### **Administration Staff**

Administrative staff raised concerns about not being allowed to work from home due to the requirements of the role meaning they needed to be on site. However management, the worker raising the concern and the HR redeployment team collaborated to find a solution to support the individual but at the same time ensure the service continued to function effectively.

# Ageing Workforce

Following a concern raised about SaTH's ageing workforce and the potential loss of experience and corporate memory HR have begun to factor this in as part of their workforce planning.

#### **Breakdown in Relationships**

FTSU was contacted about a breakdown in relationships in a clinical team between a line manager and a worker. Following conversations with the FTSU team, the individual was empowered sufficiently to address this directly with their manager and the issues were resolved to both parties' satisfaction without further intervention from FTSU or other formal processes within the Trust.

#### SaTH Feedback

NGO guidance expects that all those who have raised concerns to the FTSUG and ambassadors are expected to be asked the following questions:

- 1. Given your experience would you speak up again?" Yes/No/Maybe/Don't know
- 2. Please explain your response"

Responses received up until the end of Quarter 4 can be seen at appendix 1.

# 4.0 Actions

Action	Timescale	Who	Status
FTSU Survey to establish baseline views amongst staff.	Live 14 <sup>th</sup> – 28 <sup>th</sup> December 2020	FTSU – Lead/Comms Team	Complete
FTSU Resourcing Business Case	11 <sup>th</sup> February 2021	FTSU Lead	Business case complete. Await decision from I & I Committee
NGO Case Reviews - Benchmarking	28 <sup>th</sup> February 2021	FTSU Guardian	Complete and action plan being developed.
FTSU Database Review and Development	31 <sup>st</sup> March 2021	FTSU – Lead/IT Developer/External FTSUG	Open In talks with Black Country healthcare to replicate their system which may be made available to the wider healthcare system at nil cost.
FTSU Communication Plan including visibility plan	31 <sup>st</sup> May 2021	Comms Team/FTSU - Lead	Team awareness raising plan complete. Communication plan in process
FTSU Escalation process	31 <sup>st</sup> January 2021	FTSU - Lead	Complete
Convene FTSU Steering Group/Summit to triangulate themes with HR/Patient Safety	31 <sup>st</sup> March 2020	FTSU-Lead/Deputy Head of Workforce/Patient Safety Lead	Open We are in the process of completing the first review of data for the nursing team.
Review FTSU Policy	Date tbc – NGO to release further policy guidance at the beginning of 2021, SaTH policy reviewed will be in line with this.	FTSU - Lead	Open
From Q1 data will be divided into Divisions to monitor more robustly hotspots and where colleagues are not speaking up.	1 <sup>st</sup> April 2021	FTSU - Lead	In progress – 21/22 database includes Divisional breakdown.

Increase FTSU Board reporting to quarterly to ensure oversight and timeliness of reporting and issues.	On-going	FTSU – Lead/Governance	Quarterly dates added to the BoD planner
Refresh FTSU Vision and Strategy in line with Making a Difference Together	31 <sup>st</sup> May 2021	FTSU - Lead	Open
Invite National Guardian, Dr Henrietta Hughes to Board Development day post May 2021	28 <sup>th</sup> February 2021	FTSU Lead/Medical Director	Complete Dr Hughes to attend Board Development Day on 17 <sup>th</sup> June 2021.

# Appendix 1 Responses to Feedback Questions

	Given your experience would you speak up again	Please explain your answer
Colleague 1	Yes	I would speak up again, I found the FTSU service very helpful and supportive. It was the first time I had contacted your team and will ensure I do again in the future if required and also signpost staff towards it when appropriate.
Colleague 2	No	It proved to not be anonymous and we felt that if anything had been escalated to management we would have been punished in some way.
Colleague 3	Maybe	Although the Freedom of Speech Team were very supportive, and got the right connections to have my voice heard. It meant I did not remain anonymous, and it has made no difference to the safety of staff with PPE or with changing EPS shifts.
Colleague 4	Yes	thank you so much for your help and support I am very grateful
Colleague 5	Yes	– Wasn't very impressed by HR response where they said their main objective was to look after SaTHs image – As its public money being spent with the NHS individual s need to know that not only money being spent properly in care but in the investment of staff and attitudes – CULTURALLY and individually the trust is on a long path to be fixed
Colleague 6	Yes	To be able to speak to someone who isn't involved with a situation helps you to see things from a different perspective. My way may not always be the right way but then again it might be. Speaking out helps to not carry your burden, thought or feelings alone.
Colleague 7	Yes	Felt listened to with an open, independent, and fair mind-Through the process, a mutually agreeable resolution was sought and is currently being acted upon - It's as good an outcome as could be hoped for
Colleague 8	Yes	I just wanted to share some positivity, I would like to say that I have always found you to be very approachable and have felt very welcomed and valued on the occasions that I have been to see you, thank you very much for your support through these tough times it is very muchly appreciated
Colleague 9	Yes	I would be speaking up again with yourself and I found you very helpful to me in my process of what was going and is going on in my life at present at the moment. I couldn't thank you enough.
Colleague 10	Yes	I have a strong Moral compass. I have always been brought up to do what is right. I am passionate about our hospitals, we have been labelled negatively and I have been horrified with the media coverage of us having a toxic culture that allows bullying. We need to shake off this reputation and stand out for doing what is right. I have a vision that one day this hospital who cares for my friends, family and others will be a centre of excellence in every aspect of its care and work. I will always choose to speak up where action and change are needed. Even if the consequences make things difficult and cause unimaginable stress. There have been other situations where I have chosen to speak up where it has been very difficult but it has been the right thing to do. I have to say that positive change has so far always been the outcome. The guidance and support I have received from Chan has been very helpful.