


Board of Directors' Meeting
10 November 2022

Agenda item	219/22			
Report	Freedom to Speak Up (FTSU) Report Q2 2022-23			
Executive Lead	Director of Governance and Communications			
Report Author	Helen Turner, Lead FTSU Guardian			
	Link to strategic pillar:		Link to CQC domain:	
	Our patients and community		Safe	
	Our people	√	Effective	
	Our service delivery		Caring	
	Our partners		Responsive	
	Our governance	√	Well Led	√
	Report recommendations:		Link to BAF / risk:	
	For assurance	√		
	For decision / approval		Link to risk register:	
	For review / discussion			
	For noting			
	For information			
For consent				
Presented to:	-			
Dependent upon (if applicable):	N/A			
Executive Summary:	<p>The following report provides the FTSU update for Quarter 2 2022/23.</p> <p>In total, 73 concerns were raised in Quarter 2, which is a 2% increase on the previous quarter and a 35% decrease on Q2 20/21.</p> <p>In Quarter 2 there was an increase in the number of patient safety themes overall and an increase in Doctor's reporting concerns.</p> <p>The trend of attitudes and behaviours and bullying and harassment continues to be high but most noticeable in Q2 is the rise in patient safety concerns and given the multi-factorial pressures on the Trust this is to be expected.</p>			
Appendices:	N/A			
				

1. Assessment of Themes

In Quarter 2 SaTH received 73 contacts through the FTSU mechanism. This is slightly higher than the previous quarter following a declining trend in Q3 and Q4 quarter. Average contacts over a 2-year period up to Q4 21/22 are 84.

The previous year's contacts are contained in the table below to enable quarter and year on year comparison.

	Q1	Q2	Q3	Q4	Total	Increase	National Avg Increase
2022/23	71	73	N/A	N/A	144	N/A	N/A
2021/22	100	113	90	66	369	↑18%	Not available yet.
2020/21	41	82	103	78	302	↑208%	26%
2019/20	22	17	57	49	145	↑119%	32%
2018/19	10	18	18	20	66	↑106%	73%
2017/18	4	7	12	9	32	N/A	N/A

The NGO has not yet released the complete data for the 21/22 period, so we are unable to benchmark the increase of concerns at SaTH against the national rise or decline.

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	Q3	Q4	Q1	Q2
	21/22	21/22	22/23	22/23
Bullying and Harassment	4	11	6	1
Patient Safety	11	12	15	23
Worker Safety or Wellbeing	NA	NA	16	12
Other inappropriate behaviours or attitudes	NA	NA	25	22
Anonymously	0	1	0	3
Detriment	1	1	0	0

Board is to note the additional categories for data submission to the NGO since April 2022 of 'worker safety and wellbeing' and 'other inappropriate behaviours and attitudes'.

The NGO also requires us to report anonymous concerns at the point of contact rather than as confidential when the contact later reveals their identity and from Q2 this is what we have started to do.

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

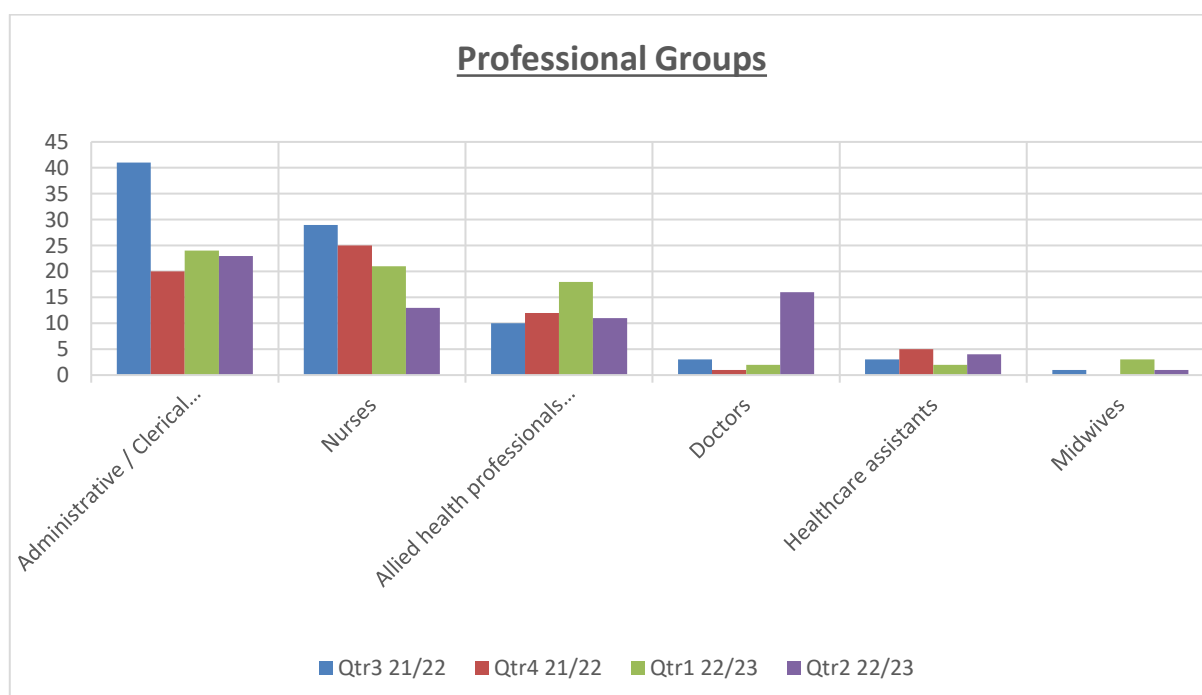
Nature of issue	Qtr3	Qtr4	Qtr1	Qtr2
	21/22	21/22	22/23	22/23
Behavioural /Relationship	37	21	25	22

Patient Safety /Quality	11	12	15	23
Policies, procedures, and processes	22	12	4	12
Worker Safety	11	5	16	12
Bullying / Harassment	4	11	7	1
Other/Unknown	1	4	4	3
Service Changes	2	1	0	0
Leadership/Management	1	0	0	0
PPE/Equipment	1	0	0	0
Total	90	66	71	73

Concerns Raised by Profession

Profession	Qtr3	Qtr4	Qtr1	Qtr2
	21/22	21/22	22/23	22/23
Administrative / Clerical Workers & Cleaning/Maintenance/Ancillary	41	20	24	23
Nurses	29	25	21	13
Allied health professionals (other than pharmacists)	10	12	18	11
Doctors	3	1	2	16
Healthcare assistants	3	5	2	4
Other	0	3	1	2
Midwives	1	0	3	1
Corporate service staff	3	0	0	0
Bank Staff	0	0	0	2
Students	0	0	0	1
Total	90	66	71	73

A bar chart has been added which illustrates more clearly the rise, decline or steady state of the professional groups raising concerns over the last four quarters.



The NGO has published a further update to its categories which as a team we are recording to be able to report to the NGO, however because of the numbers of concerns raised at SaTH we will continue to report on the professional categories as outlined above so the Board can see progression of numbers of contacts/concerns. The categories above also split out nursing and midwives and given the context SaTH operates in it is important to show the split.

<u>Professional/Worker Group</u>	Qtr1 2022/23	Qtr2 2022/23	Total
Nursing and midwifery registered	25	14	39
Administrative and clerical	13	14	27
Allied health professionals	18	7	25
Estates and ancillary	10	9	19
Medical and dental	2	16	18
Additional clinical Services	2	7	9
Additional professional scientific and technical	0	2	2
Other	1	1	2
Healthcare scientists	0	1	1
Students	0	1	1
Not known	0	1	1
Total	71	73	144

	Qtr2 20/21	Qtr4 20/21	Qtr1 21/22	Qtr2 21/22	Qtr3 21/22	Qtr4 21/22	Qtr1 22/23	Qtr2 22/23	Total
<u>Contacts</u>	20/21	20/21	21/22	21/22	21/22	21/22	22/23	22/23	
Open	1	3	6	24	17	29	6	42	128
Closed	81	75	94	89	73	37	65	31	545

Overall, up until the end of Quarter 2, 22/23 128 contacts remain open.

Since the last Board report:

2020/21 8 remained open, this has now been reduced to 4.

2021/22 82 remained open, this has been further lowered to 76.

2022/23 Of the 71 concerns raised in Q1 now only 6 remain open.

Reasons for open cases:

- Complex employee relations issues.
- Complex improvement suggestion
- Complex cultural change in areas takes time to embed and therefore following up can be a further three – six months after the issue is dealt with or longer in some cases.
- Complex issues requiring significant time to address.
- Sporadic engagement from those who have raised concerns.
- Lack of engagement from those dealing with concerns and sporadic follow up due to multiple issues of FTSU team.
- Difficulties resolving concerns amid complex team dynamics

Themes

Behaviours/Relationships/Bullying and Harassment

A third of the contacts made this quarter are about behaviours and relationships and bullying and harassment, and for the purpose of this report have been combined.

The main staff group speaking up about behaviours are administrative and clerical colleagues; followed by nurses and AHPs. What is noticeable all are individual concerns rather than team concerns.

Although there has been much work undertaken to improve the Trust's culture, an urgent meeting was convened in May following triangulation of FTSU data and the staff survey results and a subsequent presentation to the Senior Leadership Committee by the Deputy Director of Workforce on a revised approach.

One of its pillars includes Civility, Respect and Inclusion which the FTSU leads alongside the Head of Culture and which the Board of Directors will have taken part in, in their Board seminar session in September.

Actions taken in response:

1. Of the 23 contacts made 11 were not escalated through the FTSU mechanism, this was due to several reasons including just wanting a safe space to talk; advice on how to proceed with issues; decided to escalate through other routes; contacting FTSU and then no follow up with the team following the initial contact.
2. Investigation into racism and discriminatory behaviour.
3. Learning for a team on the Trust's recruitment process.
4. 2 x colleagues followed the grievance process.
5. Cultural review into a team and associated actions.
6. Changing shifts to support colleagues in the first instance.

Patient Safety

In Quarter 2 there were 23 patient safety contacts which equates to 13 individual concerns, five individual concerns were about unsafe staffing levels; lack of response to Datix; attitude to HCAs when raising patient safety issues; supply of food in ED; treatment of patient by staff member; pressures on the ED department and subsequent risk; deteriorating patient awareness; lack of housekeepers and pressures on nurses and therefore patient care; deconditioning of patients.

Actions taken in response

1. Escalated to Executive colleagues and subsequent meetings. Ward 38 opened to decompress ED; boarding on wards; larger AMU in progress.
2. Meeting between patient safety and colleague who raised concern about no answer to Datix, met and discussed outcomes.
3. Investigation by senior team into treatment of patient by staff member.
4. Nurses undertook deteriorating patient training.
5. Investigation into attitudes towards housekeeper by senior team when requesting urgent medical assistance.
6. Staffing concerns on ward have been escalated but we await outcome.

Policies, Procedures and Processes

In Quarter 2 there were 12 contacts about policies, procedures, and processes which equate to 11 individual concerns. These were about the Trust's recycling policy; process and progress of re-banding; accommodation policy; process around acting up; recruitment process; IG breach; data protection in the Trust in general; lack of datix and IT training for porters; the impact of not locking

down bank shifts.

Actions taken in response:

1. Escalated to Estates – explained key workstreams for recycling and ‘doing the right thing’.
2. Team escalated issues around progress of re-banding themselves and it continues to be explored.
3. Confirmation of accommodation policy and temporary housing found for colleague.
4. Recruitment process not followed and learning for team to ensure panel is consistent.
5. IG breach Datixed and escalated to numerous channels therefore not for escalation through FTSU.
6. Working with our Education team to assist with Datix and IT training for Porter colleagues.
7. Reminders to nursing colleagues to lockdown shifts to ensure timely payment for Bank colleagues, however this remains, a problem so a staff story on the impact will be taken to the weekly nursing meeting.

Worker Safety

In Quarter 2 there were 12 contacts which equates to 12 individual concerns. These were incorrect communications; working clinically whilst pregnant; psychological impact of COVID; request for FTSU to represent them at a meeting with management; lack of clinical supervisor for Junior Doctors; flexible working and low morale.

Actions taken in response:

1. Visiting guidance updated on SaTH internet.
2. Non-clinical shifts given to support pregnant colleague.
3. Signposting to Matron and psychological services for support with impact of COVID.
4. Signposted to guidance on COVID and isolating.
5. Signposted to Unions.
6. Signposted to Guardian of Safe Working to resolve lack of clinical supervisor issue.
7. Signposted to HR to discuss flexible working.

Professional Groups

The professional group to raise most concerns in this quarter were administrative/clerical workers/cleaning/catering/maintenance and ancillary staff, followed by doctors, then nurses and then AHPs. The most noticeable shifts in numbers are the amount of Doctors; raising concerns and the decrease in nurses and AHPs raising concerns.

Administrative/clerical workers/cleaning/catering/maintenance and ancillary staff

In this category contacts made remain steady and at previous quarter levels. Of the 23 contacts made this equated to 22 individual concerns. The main themes were attitudes and behaviours and policies and procedures, followed by worker safety.

Actions taken to address concerns include:

1. Advice on handling a conflict situation
2. Signposting back through their management structure and if there was no progress offered further support through FTSU.
3. Advice on breakdown of relationship within a team.
4. Escalated to Estates – explained key workstreams for recycling and ‘doing the right thing’.
5. Team escalated issues around progress of re-banding themselves and it continues to be explored.

6. Confirmation of accommodation policy and temporary housing found for colleague.
7. Recruitment process not followed and learning for team to ensure panel is consistent.
8. IG breach Datixed and escalated to numerous channels therefore not for escalation through FTSU.
9. Working with our Education team to assist with Datix and IT training for Porter colleagues.
10. Investigation into attitudes towards housekeeper by senior team when requesting urgent medical assistance.
11. Changing shifts to support colleagues in the first instance.
12. Signposted to COVID guidance.
13. Signposting to the unions.
14. Signposting to EDI team.
15. Learning for team on following recruitment protocol regarding panel members.
16. Signposting to HR for advice on flexible working
17. Escalated to Chief Executive

Doctors

There was a noticeable increase in Doctor's raising concerns and of the 16 contacts made this equated to 7 individual concerns. Of the 16 contacts, 12 were about patient safety; 1 x unknown; 2 x attitudes and behaviours and 1 x worker safety.

Actions taken in response to concerns raised:

1. Escalated to Executive colleagues and subsequent meetings. Ward 38 opened to decompress ED; next patient model introduced; larger AMU to be established and building works in progress. Despite actions taken, both ED departments are still under significant pressure and risks outlined remain.
2. Signposted Junior Doctor to Guardian of Safe Working to discuss lack of clinical supervision.
3. 2 x Doctors have dropped out, one of the concerns was about behaviours of a SHO, the other concern is unknown.
4. Meeting with patient safety colleague and Doctor who raised concern about no answer to Datix met and discussed outcome

Nurses

In Quarter 2 there has been a noticeable decrease in nurses raising concerns with FTSU, this needs careful monitoring given the pressures the Trust is under, we would normally see a rise in concerns. This could also be that nurses are raising concerns through other more conventional routes for resolution. Of the 14 contacts made all were individual concerns. 6 were about attitudes and behaviours, 5 x patient safety and 3 x worker safety.

Actions taken in response to concerns raised:

1. Cultural review into a team and review of working practices.
2. Visiting guidance updated on SaTH internet
3. Non-clinical shifts given to support pregnant colleague
4. Signposting to Matron and psychological services for support with impact of COVID.
5. Investigation by senior team into treatment of patient by staff member.
6. Investigation into racism and discriminatory behaviour on a ward.
7. Signposting to HR and Unions to discuss recruitment outcome.
8. Advice on next steps being considered
9. One concern not being followed up as already been raised through another avenue.
10. Signposting to HR to discuss flexible working

HCA's

In Quarter 2, there were 4 x HCA contacts, all individual concerns raised with the FTSU team, 2 x patient safety; 1 x worker safety and 1 x attitudes and behaviours.

Actions taken in response:

1. Advised to escalate poor behaviours to ward manager.
2. Deteriorating patient training rolled out on a ward to relevant nurses.
3. Escalated to matron to discuss current working post, there was no satisfactory outcome and colleague is now doing bank shifts instead.
4. Short staffing, immediate action taken to find HCA from another ward and longer-term review of staffing template.

Midwives

In Q2 there was 1 concern about patient safety which was escalated to the senior team and an investigation is on-going.

Feedback

Would You Speak Up Again	Please Explain Your Answer
Maybe	Reluctant as just causes more trouble, gives the managers the belief you are a troublemaker
Yes	I would speak out again as it is the correct thing to do and enabled me to process what had gone on
Yes	It provides a confidential, safe space to highlight concerns. It also means those concerns can't be 'brushed under the carpet'.
Yes	I am happy with your help. Following reporting the incident, things become little bit better. I hope, things will be better in future. If I had any concerns definitely, I will get in touch with you. Thank you so much
Yes	I wanted to say that I'm sat in corporate induction because of you and the support you gave me over the summer, making me feel able to take my job within the trust having raised a concern. Thank you so much.
Yes	I felt appreciated and listened to
Yes	You are an excellent Guardian
No answer	I did not know what to do I had convinced myself that the only answer is to hand in my notice, I decided to contact FTSU as last resort before handing in my notice
Yes	After contacting you I got in touch with HR, meeting was arranged, and my flexible working was agreed
No answer	I've been at SATH for a couple of years, but I have to say that whilst speaking up was easy, actually getting a response to change (even if the answer is that I'm wrong for this, this and this reason - which I'm fine with!) was very difficult. It was one of the reasons I became an investigating officer. I think the culture was changing, but slowly I think.

2.0 Action taken to improve FTSU Culture

- Drop-in sessions with Director of Nursing and Chief Executive open to all staff
- Developing Civility and Respect 'social movement' with Head of Culture and Dr Chris Turner workshop at Board away day.
- 151 visibility visits to wards and teams
- Comprehensive plan and delivery to promote staff survey by OD colleagues has resulted in being ahead of target at time of writing.
- FTSU presentation at twice monthly corporate induction.
- Mandating of speaking up training from 1st June 2022.
- Reviewing and improving of processes – more to be done and will be re-evaluating again when new guidance from regulators is released.
- Fixed term Guardian, Musili Oshevire started on 5th September and has begun to review all FTSU processes.
- Presentations at international nurses and student midwife inductions
- Concerns raised have been escalated in a timely and appropriate manner and recorded as per the National Guardian Office Guidelines.
- Health and wellbeing actions by the Trust through the HWB team - Wednesday walk-arounds
- Release of first FTSU quarterly newsletter
- Features in Chatterbox on FTSUG and ambassadors
- Preparation for October speak up month.
- Presentation at PACE meeting
- Attendance at quarterly Midland's network meetings.
- Frequent messaging through Chief Executives message on speaking up
- Updated FTSU intranet page
- Recruitment of new ambassadors
- Attendance at GoSW drop-in sessions.
- Managers Handbook developed

Due to pressures at the Trust meetings with stakeholders have not been as regular in Quarter 2 as previous months and action needs to be taken to reinstate these meetings.

Learning and Improvement

As previously stated, learning and improvement remains a challenge, many contacts that come to FTSU are often individual difficulties and queries. Improvement may also happen through another mechanism and not necessarily because of the escalation through FTSU which means they can be difficult to capture.

The FTSU teams lack of formal triangulation with other functions means there is a missed opportunity to promote and record the learning and improvement that maybe taking place through the Trust.

To address this a quarterly FTSU Summit meeting is being convened and chaired by Anna Milanec, Director of Governance and Communications with the first meeting taking place in December.

Also to be noted, is that there are outstanding concerns recorded within the database and despite significant attempts by teams to improve relationships and working practices a status quo exists.

The improvements made directly from FTSU speak ups are now available on the FTSU intranet page and we also work with our improvement hub colleagues to present them in the improvement methodology favoured by the Trust.

Recruitment

A concern raised by a student nurse about safe staffing and use of students to fill staffing gaps saw a student feel listened to and safe to raise concerns and therefore take a substantive nursing role at the Trust.

Deteriorating Patient

A HCA raised concerns about nurses being able to identify a deteriorating patient in a timely manner and consequently training on deteriorating patients was rolled out to nurses who needed it and were ultimately very grateful for it.

Speak Up, Listen Up and Follow Up

The Trust is working in unprecedented conditions not unique to SaTH but across the whole of the NHS. Colleagues are reporting burning out, cynicism and not being able to give the care they wish to. Those to whom concerns such as these are escalated to are often unable to resolve and embed satisfactorily the concerns for example staffing shortages not through the lack of will or hard work but are firefighting because of the enormous pressures and simply because some of the answers are outside of SaTH's gift such as underfunding; chronic staff shortages; lack of adult social care and beds in the community.

When colleagues are burnt out and simply trying to get through the day and do not have the required infrastructure in which to be able to do their job, it poses further challenges to creating a culture as defined by Sir Robert Francis:

- Creating a culture of openness and transparency
- Creating a culture where speaking up and raising concerns are everyday business
- Ensuring that there are no repercussions for those that raise concerns
- Ensuring that the Trust is a safe and kind place to work

Burnout and cynicism often lead to a feeling of futility and therefore a lack of energy and motivation to speak up. As one colleague professed to a FTSUG "we need some hope."

To refer again to the three pillars as outlined by the previous Guardian, leadership, engagement, and communication that are key to creating a psychologically safe environment.

To further assess the impact of the Trust in creating not just a speaking up culture but one where we listen and follow up, one of our key indicators are specific questions that will come through our staff survey and triangulation through the FTSU Summit Group.

FTSU Priorities 22/23 – Progress Q2

In October, the FTSU vision and strategy was signed off by board with four key priorities which the FTSU team were already progressing.

1. Ensure all groups who face barriers to speaking up are supported to raise concerns, in particular working with our BAME colleagues.
 - 30 voices project underway
 - Work closely with our EDI team and support promotional activities
 - Schwarz round 'when I experienced racism at work' part of speak up month

2. Ensure FTSU processes are fit for purpose and in line with best practice.
 - FTSUG has begun a desk top review of all processes in line with case review guidance from the NGO.
 - Quarterly FTSU Summit Meeting specifically for triangulation and review of processes.

3. Working with our leaders to 'listen up' and 'follow up'
 - FTSU to deliver on STEP programme
 - Managers handbook developed, out for consultation and published
 - Mandated online training for all staff, current figures stand at
 - 46% completed core worker training module
 - 43% completed manager training module
 - 29% completed senior leader training
 - Further scrutinising of the senior leader figures is required including the senior leaders and confirming the correct colleagues are on the list.
- Alongside our cultural team colleagues, lead the Civility and Respect social movement.
 - Programme presented to Board on 9th September
 - Train the trainer programme delivered

