Freedom To Speak Up

SFH Board Report – Jan 2024 Kerry Bosworth FTSU Guardian

<u>Purpose</u>

This report provides a review of speaking up cases for Q2 and Q3 2023/24 and the assurance of the FTSU provision at SFH. Included is the learning and improvement actions taken from concerns.

Overview

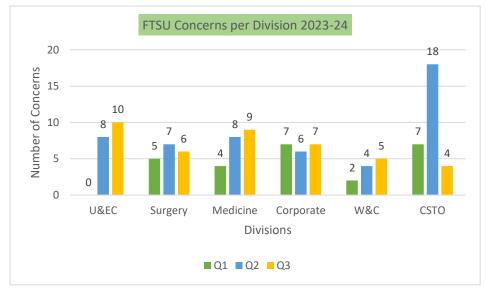
During Q2 and Q3 23/24 there were 92 concerns raised with the FTSU Guardian.

The number of colleagues raising concerns through FTSU continues to demonstrate consistent engagement with FTSU as a route for raising concerns.

Out of the 92 concerns raised in the above periods, 67 were raised openly, 23 were raised confidentially (known to FTSUG only) and there were 2 anonymous concerns.

The majority of concerns are escalated openly to those in a position to support and follow up FTSU concerns, suggesting colleagues feel increased trust and psychological safety in speaking up and trust in sharing the concerns beyond the FTSUG for personal resolution and support.

All Divisions are represented in using FTSU, demonstrating awareness of FTSU across the organisation. There has been increase in FTSU concerns from U&EC, historically there was low uptake on using the FTSU route so this is a positive reassurance that colleagues are able to use FTSU and awareness of this route.



Total quarterly concerns 2023/24 so far: -

Q1=25

Q2=51

Q3=41

In terms of national benchmarking regarding FTSU concerns raised per quarter, the average for all NHS Trusts is 29.2 concerns per quarter (NGO FTSU Annual Data Report 2022/2023).

People Profile

Nursing & Midwifery and Admin/Clerical colleagues continue to raise the most concerns through both quarters; also represented are medical, additional clinical services and AHP colleagues.

The last 2 quarters have shown workers in a leadership position seek support through FTSU. Concerns in this group are more challenging to escalate openly and find resolution but highlights the wellbeing impacts of people in more senior roles.

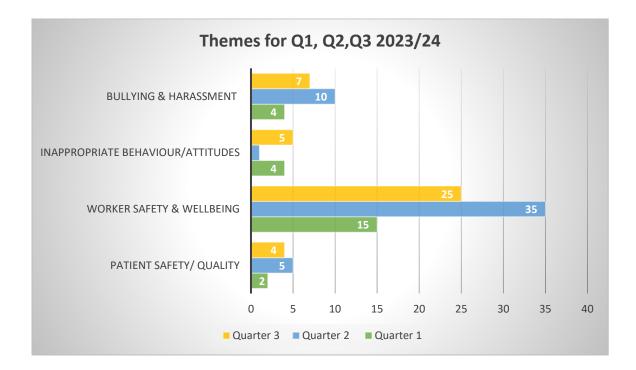
EDI Information

The majority of concerns raised are from females. Ethnicity is predominantly white British however Indian, other Asian origin, African and other white ethnicity are represented.

There has been an increase in engagement with FTSU with the IEN cohorts and concerns raised from this. The FTSUG has been actively supporting IEN meetings and there are 2 FTSU Champions actively engaged in their substantive roles supporting colleagues from an EM background. The new Chair of the EM Network is a FTSU Champion and this will continue to support raising concerns from this workforce.

Concerns featuring concerns around wellbeing related to colleagues with a disability have declined.

The FTSUG remains engaged with all staff networks.



Themes from Q1 Q2 & Q3 2023/24 - total 117

Patient Safety & Quality

- Unsafe care high sustained acuity means unable to give standard of care, handover quality poor at times, multiple nurses caring for one patient leads to omissions of care, junior teams managing challenging cases. Lack of senior support out of hours clinically.
- Business teams managing high workload re lists and patient flow, feel errors being made and governance risks.
- Burnout means staff concerned they are more likely to make a mistake and fear for registrations and accountability of this impacting them.
- Unresolved poor behaviour in teams affecting working and ceilings in leadership prevent escalation out of Division.
- Work environment not conducive to quality care for patients in both clinical and office environments.
- Concerns raised re colleagues' practice.

Bullying & Harassment

- Bullying from a colleague
- Bullying from a line manager- displacement and ostracised when raising concerns feels detriment and unfair.
- Care Values not applied in professional environment.
- Outside of formal grievance where it is felt no resolution will be reached, no informal
 options explored or offered. If formal grievance not upheld or no facts to be found in
 informal process no ongoing support.
- Power imbalance when raising behaviour concerns how to seek support if not in unions.

Worker Safety or Wellbeing

- Poor leadership related to use of and understanding of people and governance processes. Guidance and policies not followed. Informal processes to resolve concerns not worked – limited options and limited impact – often feel must leave or take sickness. Sickness and absence are viewed negatively and information shared inappropriately.
- Ethic minority workers feel unsupported in governance processes and HR processes especially after completing preceptorship and when the IEN wrap around care ceased officially, when leadership is sub optimal in process. Fearful of home and work circumstances if speaks up and is identified.
- Job re evaluation processes where line manager unsupportive of process and unsure how to proceed.
- Number of line management changes, undermines team cohesion and understanding when colleagues are affected by behaviours.
- Line managers not receiving concerns in line with the SFH Speaking Up Policy. Follow up and response times long and feel that this is impacting coming to work especially in informal grievances.
- Unchallenged behaviours have impact on team and individuals unresolved or feel unsupported. Options aren't favourable to engage with. Futile in reporting as feel some behaviours engrained and easier not to challenge.
- Burnout

- Moral Injury and Moral Distress at having to continue to work under pressure but also in behavioural concerns where behaviour is not aligned to values.
- Training issues feel not given enough input to fulfil new roles.

Elements Of Other Inappropriate Attitudes or Behaviours

- Incivility
- Misogyny female stereotypes in communications, e.g., medics called by first name male colleagues referred to re professional title. Personal comments.
- Gaslighting behaviours when hierarchy in roles.
- Leadership poor response to raising concerns poor options offered. Leaders unable to challenge poor behaviours.
- Favouritism interview panels not inclusive, 'friends interviewing friends', no independence out of local leadership, career development not equal opportunities.
- Leadership where do leaders go when have concerns to raise feel career impacting.

In quarters 2 & 3 there were no cases of detriment reported to the FTSUG from using the FTSU route.

FTSU Learning & Triangulation

Concerns regarding patient safety have been escalated to the relevant executive and senior divisional leads, some feeding into current improvement projects within divisional plans and allowing for senior leaders to engage with workers for support.

Within the B&H concerns -3 external reviews raised by formal grievance have been enacted to ensure independence and formal grievances internally has been enacted for some of the concerns in this quarter.

Concerns raised regarding equality and diversity continue to be triangulated with the EDI Lead for wider organisational learning and to allow focus in a proactive way from the lead. Conversations regarding career development, nepotism and recruitment bias have been shared with the People Team and the newly updated Recruitment Policy contains more detailed information regarding panel numbers and shortlisting. Also included is suggestion to consider ethnicity and representation when an international colleague or worker from non-white British background is being interviewed and to seek People Team support.

The majority of concerns fall into the Worker Safety or Wellbeing category. Many concerns feature colleague's experiences in people processes or the inefficacy of resolutions to behavioural concerns. Many of these workers come under SFH business and administration teams and it is noted that some affected colleagues are not sighted to direct regular communication with their line managers, some unclear who they are managed by and structure of leadership so puts ceilings on who to raise with. These concerns have been raised

to the People Team and divisional people teams are able to offer advice and guidance to colleagues who this is applicable to.

Burnout, moral distress and moral injury related to workload, and persistent high acuity is a feature in these past quarters – this impacts all performance and fear of retribution. The FTSUG continues to share these concerns with the Wellbeing Team and OH have been active in referring colleagues to the FTSUG when health is impacted by concerns in the workplace. This then allows confidential advice to be shared with the People Team for colleagues to get support and actions outside of their local leadership and some barriers removed.

The additional resource in OD has allowed the FTSUG to triangulate and focus patterns of concerns, so interventions can be offered outside of formal processes.

NHSEI continues to recommend that all workers have mandated Speak Up, Listen Up & Follow Up training. As an entry step to this, FTSU will be presenting some content from this training within the Leadership Development Programme, launched this year.

The FTSUG continues to have regular meetings with the Director of People and Chief Executive Officer to share themes and progress and is exploring visibility at the Divisional People Boards to be able to share concern themes at a divisional level -New for 2024.

U&EC, Medicine and CSTO teams have actively engaged and invited the FTSUG to visit areas of concern to support independence in raising concerns.

Newark Hospital now has 3 newly recruited Champions who have completed training, after a gap in visibility was identified.

Due to the majority of concerns affecting wellbeing and worker safety and the level of distress this can cause when listening to concerns in terms of vicarious trauma for the FTSUG, the Guardian has been supported to undertake training in mental health first aid, REACT training and trauma support training to support the FTSUG's wellbeing alongside supporting workers where wellbeing is clearly affected. This has been recommended by the NGO in their latest FTSU Guardian report.

The FTSUG is to feature on all of the new Leadership Development programmes being launched in 2024, with the Leadership Fundamentals being launched in January for all new line managers appointed or promoted at SFH. This will allow real cases involving poor leadership to be shared for awareness and the responsibilities of line managers in speaking up and best practice skills shared.

Although SFH is yet to adopt the NHSE/ NGO training in Speak Up, Listen Up or Follow Up as mandatory training, there are discussions how each of these elements can be incorporated into the new Leadership Development Programmes evolving this year.

FTSU Assurance at SFH

The process for mapping SFH against the latest NHSE Freedom To Speak Up Trust Boards Reflection and Review Tool (2022) is underway and ahead of the planned review start in April. This will inform the Speaking Up strategy for 2024/25 and highlight areas of improvement for action planning. The FTSUG and the FTSU Executive are currently mapping this process for maximum input and response.

The FTSUG was asked to co-host a webinar with the NGO, showcasing the investment and progress of FTSU Champions at SFH as best practice sharing, on the back of the release of

new NGO Guidance For FTSU Ambassadors/ Champions 2023. The webinar had over 100 attendees and the FTSU Guardian received positive feedback as well as request for assistance in organisations looking to improve their network.

FTSU Feedback

Feedback from those who use FTSU remains positive. This is requested via MS Forms but mainly consists of personal email feedback to the FTSUG and verbal feedback.

Challenges and Opportunities from feedback-

Although feedback on the FTSU route is positive, due to the continued existing pressures faced and conflicting demands on leaders, it has been observed that there isn't a response as quick as could be or should be regarding speaking up matters. The importance of colleagues feeling a priority and receiving feedback timely is a key part of the process and trust in the process and the People Team have been asked to review when the FTSUG feels this is happening.

The FTSUG also in the feedback is noticing a shift in the level of support colleagues require, with increasingly complex contacts, where the FTSUG spends a significant amount of time supporting colleagues.

Recent feedback -

"I have found their support really helpful; I just wish I felt that the responses were more than just words and actual actions (although this does not lie with FTSU I believe they are fully appreciative of the problems)"

It was wonderful and refreshing having someone actually listen to my concerns without judgment and with empathy, this alone was a healing experience. The situation is still unresolved within my department but I have left for another opportunity.

Thank you for supporting me, I was able to gain the confidence and support I needed as a result of your intervention

Being able to speak to someone outside of my immediate work environment was very helpful and supportive to the concerns raised

Recommendation

The SFH Board is asked to receive assurance from the report regarding the Freedom to Speak Up agenda

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