Freedom To Speak Up

Sherwood Forest Hospitals
NHS Foundation Trust

SFH Board Report – July 2023 Kerry Bosworth FTSU Guardian

Purpose

This report provides a review of speaking up cases for Q4 2022/23 and Q1 2023/24 and the assurance of the FTSU provision at SFH. Included is the learning and improvement actions taken from concerns, highlighted with a case study.

Overview

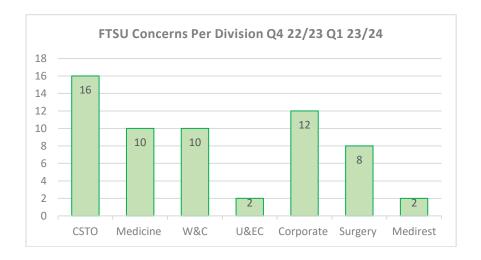
During Q4 22/23 and Q1 23/24 there were 60 concerns raised with the FTSU Guardian.

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

Out of the 60 concerns raised in the above periods, 43 were raised openly, 16 were raised confidentially (known to FTSUG only) and there was 1 anonymous concern.

The majority of concerns are now 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.

All Divisions are represented in using FTSU , demonstrating awareness of FTSU across the organisation .



People Profile

Nursing & Midwifery and Admin/Clerical colleagues have raised the most concerns through both quarters; also represented are medical, clinical service and technical support teams and AHP colleagues. There has been an increase in Q1 2023/24 of concerns raised from medical and AHP colleagues which is welcomed as these groups historically have been less represented in FTSU at SFH.

EDI Information

The majority of concerns raised are from females. Ethnicity is predominantly white British however Indian, other Asian origin and dual ethnicity origin are also represented in both quarters .To increase visibility and awareness amongst ethnic minority colleagues the FTSUG

now has a regular session with new International Educated Nurses cohorts and also has regular engagement with the Ethnic Minority Staff Network to promote speaking up. The network Co-Chair is a FTSU Champion and therefore promotes speaking up regularly.

There have been 10 colleagues with disabilities raising concerns which is an increase from previous quarters.

Themes from Q4 2022/23 & Q1 2023/24

Patient Safety & Quality (6 Concerns)

- Unsafe care expected to care and work in areas unfamiliar with
- Acuity unable to provide expected level of care and cohorts of patients are of a different speciality - not usual patient cohort hence lack of knowledge and skills
- Behaviours in teams undermine safety processes
- Unchallenged behaviours impact quality and team working
- Work environment not conducive to quality care for patients

Bullying & Harassment (10 Concerns)

- Bullying from a colleague
- Bullying from a line manager
- Bullying culture within a team unmanaged behaviours , poor leadership

Attitudes and Behaviours within B&H

- Racism microaggressions in work environment
- Ableism –microagressions and lack of leadership awareness of disability and equality policies and support
- Leadership manipulation , favouritism and power imbalance when speaking up

Worker Safety or Wellbeing (25 concerns)

- Poor leadership related to use of and understanding of HR processes. Guidance and policies not followed. Informal processes to resolve concerns not worked – limited options and limited impact
- Poor experience of being in a HR process length of time / not a priority, feeling ostracised, feeling uncared for. Wellbeing affected by being in the process
- Unchallenged behaviours have impact on team and individuals unresolved or feel unsupported. Options aren't favourable to engage with. Futile in reporting
- Impact of poor work experience on wellbeing, colleagues feeling taking sickness is only option especially when concerns are about relationships at work

Elements Of Other Inappropriate Attitudes or Behaviours (19 Concerns)

- Incivility
- Misogyny conscious bias and unconscious bias undermining female workers
- Gaslighting behaviours
- Leadership poor response to raising concerns poor options offered. Leaders unable to challenge poor behaviours
- Leadership styles care values used as a threat but not exhibiting the values themselves
- Favouritism interview panels not inclusive, 'friends interviewing friends', career development not equal opportunities.

- Leadership lack of support in job re-evaluation processes and impact
- Inappropriate language relating to disability.

Detriment For Speaking Up

Following a case of detriment for speaking up raised in this period, this was escalated to the FTSU Executive and FTSU SID. An investigation led by the SID for FTSU was conducted and concluded that no detriment had occurred from speaking up.

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.

Concerns around bullying and harassment have been escalated to the senior People Team. Review of the concerns with line managers to improve line manager performance and offer resolutions. Unresolved B&H concerns have executive oversight and/or in HR processes. Concerns raised regarding disabilities have been triangulated with the EDI Lead for wider organisational learning and themes raised at the WAND Staff Network. The senior people team have supported conversations with line managers and colleagues with disabilities to improve the response to the nature of these concerns.

The majority of concerns fall into the Worker Safety or Wellbeing category, closely followed by Elements of Inappropriate Attitudes or Behaviours. Many concerns feature colleague's experiences in HR 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. They are more likely to have an offsite /WFH manager, who manage a considerable number of colleagues which may contribute to this nature of concern. 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.

Wellbeing teams and OH have been asked to receive some of the concerns affecting health to support colleagues and there is a direct referral route between FTSU and these services to support colleagues who feel unable to do this via their line manager.

Leadership barriers remains a constant theme in FTSU concerns. Escalation is usually to the senior People Team. Individual mediation has been offered in some circumstances. Grievance policies are offered but rarely used due to fear or futility perceptions. Recognising this, FTSU now has input and presence in more of our leadership training and education programmes, with planned further involvement this year as the new Leadership Development Plan launches. This will not only be for new leaders but existing leaders.

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 continue to have regular meetings with the Director of People and Chief Executive Officer to share themes and progress .

The FTSUG has been working proactively to support individual divisions to help engage with their workforce and foster a culture of speaking up for improvement. The CSTO Division has proactively approached the FTSUG to ask for support in raising concerns and understanding in their teams, in response to its NSS results. Successfully this has demonstrated to their team that speaking up is important but that FTSU can run alongside usual escalation routes to give colleagues options of who to talk to.

Case Review

Colleague raised concerns regarding behaviours of some colleagues within the MDT that could impact patient pathway decision making

Themes were -

- Concerns about patient safety and quality
- Behaviours were around incivility and professionalism
- Colleague had challenged the behaviour but felt this could happen to others less confident to respond.
- Leadership raised with their line manager but unsure as to who to raise to further as involved MDT working and unaware of structures etc. Felt Datix not right tool for escalating concerns about behaviours
- Workload high acuity meant unsure this could be presented at any governance / leadership meetings
- Felt Trust Values were not central to the behaviour experienced
- Felt some fear in speaking up and concerned about impact

FTSU Actions and Follow Up

- FTSUG ensured wellbeing and assurance that speaking up would be safe
- Appropriate Executive was escalated to and reassurance in response enabled the person to feel safe to share
- Action was taken to feed this into existing improvement project already underway regarding this pathway and enabled the concern raiser to be part of that, by arranging them to meet with the senior project lead and share their experiences for improvement
- Executive overview enabled creation of this opportunity and learning without having to navigate direct challenges to the colleagues from the concern raiser
- Positive feedback from the concern raiser after the conclusion of their escalation. Felt listened to and appropriate action taken in regard to the concern

FTSU Assurance at SFH

National Staff Survey Results 2022

SFH is above the national average for all the speak up questions and gives encouragement that colleagues feel able to have their say.

The NGO released their analysis of the NHS Staff Survey in June 2023 Fear & Futility - What does the Staff Survey tell us about speakingup in the NHS? June 2023

Nationally there were declines on all questions relating to raising concerns, particularly related to raising concerns about clinical practice and the follow up question to this, which asks about confidence in the organisation addressing these concerns. There has been reflection of this trend in SFH results for these questions but still bench mark well above the national average. There is less shift down in the questions relating to speaking up about **anything** causing

concerns and the response to this. Again SFH bench marks well above the national average and could be an indicator that confidence in raising concerns around culture is present.

The NGO has created a FTSU Sub Score to replace the FTSU Index which calculates a score for each organaisation against the national average for the 4 speak up questions in the NSS.The national average for 2022 NSS is 6.4 (out of 10); SFH score is 6.9 . For Acute/Acute Community Trusts category this puts SFH in the top 5 nationally

The revised SFH Speak Up Policy has been approved at JSPF. The new policy incorporates the NHSE Freedom To Speak Up Policy launched last year which is mandated for all providers to adopt by Jan 2024.

New Champions have been recruited this quarter increasing the Champion numbers to 27. New Champions have been recruited from under represented teams and areas. This will increase visibility of FTSU.

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.

Recent feedback -

"Very supportive and straightforward process. Was able to explain my thoughts without judgement."

"Felt listened to and gave me the confidence to be able to speak to the person I needed to without doing the wrong thing."

"Very easy to access and discuss, for providing support and then checking back in with me".

"Always a scary feeling, when you just don't know where to turn to, and who will listen and help. You did. Things have turned around for us. Thank you for all your time and input for us

Recommendation

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

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