



# Annual whistleblowing report 2023-2024

June 2024

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# Background

All NHS Boards within Scotland are required to publish an annual report in respect of their approach and performance in handling whistleblowing concerns as a requirement of the National Whistleblowing Standards since 2021.

This is the third annual report provided regarding this work within Healthcare Improvement Scotland and covers the period of April 2023 – March 2024.

## Introduction

Healthcare Improvement Scotland, as Scotland's national improvement agency, was established in 2011 to enable the people of Scotland to experience the best quality of health and social care and the focus of our efforts are:

- enabling people to make informed choices about their care and treatment.
- helping Health and Social care organisations to improve their services.
- providing evidence and sharing knowledge with services that help them improve.
- enabling people to get the best out of the services they use.
- providing quality assurance that gives people confidence in NHS services.

We are a relatively small employer with circa 550 staff employed across the organisation. We are constituted as a special health board, like Public Health Scotland, and as such operate in a different manner from other NHS Boards.

Healthcare Improvement Scotland also has a unique role within NHS Scotland. If a member of NHS Scotland staff or member of the public has concerns relating to the safety or quality of patient care and has tried to resolve these through their own organisation or through the INWO or feel unable to use these routes, then they can raise their concerns in confidence with us. NHS Scotland staff can contact Healthcare Improvement Scotland directly with concerns under the Public Interest Disclosure Act (PIDA). This legislation protects whistleblowers from detrimental treatment by their employer and gives statutory protection against victimisation to workers who speak out. We can also receive referrals from other organisations when they become aware of potential patient safety or quality of care concerns about a service within the NHS in Scotland, such as the Mental Welfare Commission, the General Medical Council or the Nursing and Midwifery Council.

Healthcare Improvement Scotland has a legal obligation to respond to these concerns.

As such, our staff are aware of our role across the wider NHS system within Scotland and our responsibility to respond to concerns.

# Key performance indicators

## 1. Learnings, changes and improvements as a result of considering whistleblowing concerns

Within the organisation we have a range of support for whistleblowing, as required by the national standards.

We have an established Board Whistleblowing Champion, Keith Charters, who has been in post for three years in this role. We also have nominated Whistleblowing Confidential Contacts: Ann Laing, Head of People and Workplace, and Kenny Crosbie from our inspection team who is also Unison Steward.

Historically, Healthcare Improvement Scotland has also retained several Confidential Contacts across the organisation, previously with a particular focus in relation to dignity at work issues. Recent learning for the organisation has been the need to ensure that there is clarity regarding who should be contacted in relation to any concerns that might be arising within HIS. There has been a case, in a previous reporting year, where a non-whistleblowing confidential contact referred an individual directly to the Board Whistleblowing Champion, inadvertently bypassing the whistleblowing arrangements. Since this time there has been further work and meetings with all Confidential Contacts and, with the support of the Employee Director, there is greater clarity on roles and responsibilities and awareness of the policy and local arrangements.

This work is ongoing.

## 2. Experiences of all those involved in the whistleblowing procedure

In the period of this report (2023-2024), Healthcare Improvement Scotland has not received any reportable whistleblowing concerns.

We have continued to receive grievances from individual members of staff, which have been dealt with through the usual policy and governance requirements.

Our experience indicates that staff will often initially consider whistleblowing as a possible route for raising a concern but, following discussion with Whistleblowing Confidential Contacts (either in that capacity or in their union guise), will ultimately choose the grievance route because of the nature of the issue. We view this positively: the fact that these conversations are happening means that concerns are ending up in the most appropriate channel.

The iMatter survey for 2023-2024 includes questions relating to staff awareness of how to raise concerns and the degree of confidence that these will be dealt with appropriately. The scores from these questions will be analysed in due course.

Activity has taken place with the Partnership Forum and directorates to ensure that staff are aware of processes to be undertaken to raise concerns. This has referenced the use of workforce policies including whistleblowing arrangements.

### 3. Levels of staff awareness and training

Healthcare Improvement Scotland undertook a significant review of our statutory and mandatory training arrangements in 2022 into 2023, led by our internal HIS Campus group.

As part of this work there has been significant focus on ensuring clarity on the required training for all staff and additional, more specialist training, for some individuals in the organisation. When the new statutory and mandatory framework was launched in April 2023, a training 'amnesty' was implemented to enable staff to have a six month period during which to ensure all their training was up to date. As part of this work, we were able to see a substantial number of staff have continued to ensure their whistleblowing training was up to date.

As at the end of March 2024, our training figures for the TURAS courses were:

- NES: Whistleblowing for staff needing an overview – completed by 518 staff out of 573 registered on Learnpro (Mandatory for all)

This represents a completion rate of over 90%.

- NES: Whistleblowing for managers and people who receive concerns – completed by 50 staff out of 61 registered as eligible (Mandatory for role)

This represents a completion rate of 82%.

We continue to remind our employees of the need to complete the training as required.

### 4. The total number of concerns received

As detailed above, Healthcare Improvement Scotland did not receive any whistleblowing concerns from within our workforce during the reporting period of 2023 – 2024.

As previously mentioned, during the reporting period of April 2023 – March 2024, the organisation has continued to receive grievances as per current Once for Scotland Policy arrangements. During this time, we received a total of two formal grievance submissions from individual staff.

As part of the Grievance Policy, there is also an opportunity to resolved issues through informal resolution processes prior to the submission of a formal grievance and this has been a useful process to deal with employee concerns within the organisation.

## 5. Concerns closed at stages 1 and 2

## 6. Concerns upheld

## 7. Time taken to respond

## 8. Compliance to timescales

As no cases or concerns were received, then the KPI sections above are not applicable in terms of this annual report.

# Activity in 2024-2025

Healthcare Improvement Scotland has a high level of team, directorate, and organisational engagement with all our staff on a regular basis, including through All-Staff Huddles and other collective meeting and engagement arrangements. This makes the Senior Executive Team and Board members accessible and provides a useful open forum in which staff can comment and raise concerns. Not everything will be raised via this channel, but it does mean that a lot of issues are dealt with as business-as-usual. This has been particularly important as we have undergone significant organisational change during the last financial year, with significant amendments to working arrangements in three out of seven of our Service Directorates.

As significant work is undertaken to upgrade and enhance our web presence, we will take the opportunity to ensure continued awareness of the organisation's whistleblowing arrangements by enhancing visibility of relevant policy information on our website.

We will ensure continued maintenance of training for all staff.

INWO leads an annual Speak-Up initiative, and we will use its resources as part of our efforts to promote the important role played by our whistleblowing procedures.

During 2024 our board representative will again be part of the Whistleblowing Champions Group to allow us to learn from good practice in other areas of the NHS.

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