

Annual Whistleblowing Report 2024-2025

NHS Education for Scotland

June 2025

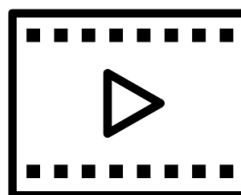
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1. Whistleblowing 2024-2025: At-a-glance

NHS Education for Scotland Whistleblowing 2024-2025 At-a-glance

Activities during Speak up Week included a video introduction from Karen Reid and an all staff webinar, which was hosted by Gillian Mawdsley.



NES enrolled on the 'Equally Safe at Work' initiative - an employer accreditation programme.

88% of line managers completed the required training.

Concerns	Stage one	Stage two
Upheld	-	1
Partially upheld	-	-
Not upheld	-	-

1
**CONCERN
RECEIVED**

In the national 2024 'iMatter' survey, NES achieved the **highest score** (in NHS Scotland) on the whistleblowing statements:

- Confident to safely raise concerns about issues in the workplace.
- Confident that concerns will be followed up and responded to.

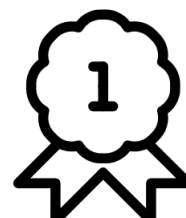


Figure 1: Whistleblowing 2024-2025 'at a glance' summary.

2. Introduction

- 2.1. The Public Services Reform (The Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020¹ created the new role of a National Whistleblowing Officer (INWO) for the NHS in Scotland. The INWO is based in the Scottish Public Services Ombudsman (SPSO) and has the authority to establish the overall procedure for handling whistleblowing concerns in NHS Scotland. The high-level principles and procedure for handling concerns are outlined in the April 2021 National Whistleblowing Standards² (the Standards).
- 2.2. In line with the Standards, all NHS Scotland boards are required to publicly report on any whistleblowing concerns on a quarterly basis and to publish an annual report. This report brings together the 2024-2025 quarterly whistleblowing performance reports, which were tabled at the Staff Governance Committee meetings on 22 August 2024, 11 November 2024, 20 February 2025, and 01 May 2025. The NES Board received an update on these activities at its meetings on 26 September 2024, 21 November 2024, 27 March 2025 and 22 May 2025. This report was tabled at the Staff Governance Committee (01 May 2025) and at the NES Board (22 May 2025).
- 2.3. This is the fourth NHS Education for Scotland (NES) Annual Whistleblowing Report, presenting whistleblowing performance for the period 01 April 2024 to 31 March 2025 (inclusive).
- 2.4. Since the introduction of the Standards, NES has continued to build on the knowledge and insights gained, while fostering a culture in which all individuals feel empowered to raise concerns in the public interest. Ongoing efforts have focused on engaging with staff to cultivate a workplace environment that values openness and transparency, and on ensuring that all concerns raised are investigated thoroughly and impartially.
- 2.5. This annual report is structured as follows:
 - An overview of the whistleblowing procedure (p. 5).
 - A chronological summary of activities during 2024-2025 (p. 8).
 - The whistleblowing annual return and Key Performance Indicators (KPIs) (p. 12).
 - A concluding section (p. 15).
 - Background information on whistleblowing (Appendix A, p. 16) and a summary of the KPIs (Appendix B, p. 18).

¹ Crown Copyright (2020) 'Scottish Statutory Instruments. 2020 No. 5. The Public Services Reform (The Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020'. Available at: <https://www.legislation.gov.uk/ssi/2020/5/made> (Accessed: 22 October 2020).

² Independent National Whistleblowing Officer (2021) 'The National Whistleblowing Standards - April 2021'. Edinburgh: Scottish Public Services Ombudsman. Available at: <https://inwo.spsso.org.uk/sites/inwo/files/Standards/NationalWhistleblowingStandards-AllParts.pdf> (Accessed: 24 January 2022).

3. The whistleblowing procedure

- 3.1. The National Whistleblowing Standards came into force for all NHS Scotland boards on 01 April 2021, replacing any local whistleblowing policies. Appendix A provides a summary of the context that informed the development of current whistleblowing arrangements in NHS Scotland.
- 3.2. The Standards comprise of:
- The whistleblowing principles, which underpin the approach to handling any concerns.
 - Definitions of “whistleblowing” and “whistle-blower”.
 - An overview of the procedure, including who can raise a concern and a summary of how such concerns are handled.
 - The required governance arrangements.
 - Arrangements for Health and Social Care Partnerships, organisations providing student and trainee placements, and volunteers.
- 3.3. Concerns may be best addressed initially through routine operational processes. Staff are encouraged to raise issues locally, with the reassurance that such concerns will be addressed professionally, promptly, and constructively. Early resolution at this stage can be instrumental in preventing issues from escalating. While not typically part of the formal whistleblowing procedure, these early steps can serve as important precursors and may help demonstrate that reasonable efforts were made to resolve matters. Where business-as-usual processes have been exhausted, or are simply unsuitable – for example, in cases involving serious or high-risk concerns – a formal whistleblowing concern may be the most appropriate course of action. Whistleblowing is generally considered as a measure of last resort.
- 3.4. “Whistleblowing” is defined as³:
- “...when a person who delivers services or used to deliver services on behalf of a health service body, family health service provider or independent provider (as defined in section 23 of the Scottish Public Services Ombudsman Act 2002) raises a concern that relates to speaking up, in the public interest, about an NHS service, where an act or omission has created, or may create, a risk of harm or wrongdoing.”*

³ Crown Copyright (2020) ‘Scottish Statutory Instruments: 2020 No. 5. Public Services Reform: Scottish Public Services Ombudsman. Public Health. National Health Service. The Public Services Reform (The Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020’. The Stationery Office. Available at: https://www.legislation.gov.uk/ssi/2020/5/pdfs/ssi_20200005_en.pdf (Accessed: 21 April 2022).

- 3.5. Under the Standards, all whistle-blowers are entitled to support, legal protection, and confidentiality. A formal whistleblowing concern may be raised when:
- The issue is not solely related to a personal employment or Human Resources matter.
 - The concern is in the public interest (for example, patient safety).
 - The concern is raised within six months, which is the generally accepted time limit.
 - Business-as-usual processes have been followed through and concluded (where applicable).
- 3.6. If a whistle-blower chooses not to raise their concern under the Standards, the organisation will determine the most appropriate course of action. It is considered 'good practice' to investigate any concerns raised, regardless of whether they fall within the remit of the Standards.
- 3.7. Anonymous and "unnamed" concerns cannot be formally investigated under the Standards. An anonymous concern is one where the whistle-blower's identity is unknown, whereas an unnamed concern is one where the individual raising the issue does not wish their details to be recorded within the whistleblowing system. Both these types of concerns limit the protections available to the whistle-blower and cannot be referred to the INWO. However, it is considered good practice to investigate all issues raised regardless of whether they fall under the Standards.
- 3.8. The Standards outline a three-stage procedure. At the conclusion of stage two, whistle-blowers are directed to the (INWO) (Table 1).

Table 1: Summary of the stages involved.

Stage one: NHS Education for Scotland	<ul style="list-style-type: none"> • Little or no investigation required. • A response, with an explanation of outcome, is normally issued within five working days. • Any actions taken in response to the concern raised are outlined. • Information on the stage two process is provided.
Stage two: NHS Education for Scotland	<ul style="list-style-type: none"> • For issues that are complex and require investigation. • The stage two process is also used for issues that have been escalated from stage one. • Acknowledged within three working days. • A detailed response is normally issued within 20 working days.
Stage three: Independent National Whistleblowing Officer	<ul style="list-style-type: none"> • Offer of independent external review.

- 3.9. To support the Standards, all NHS Scotland boards are required to have a dedicated Whistleblowing Champion as a Non-Executive Director. The role provides independent oversight of the whistleblowing agenda and assures the board of the organisation's compliance with the Standards. The Whistleblowing Champion has no operational responsibility regarding the application of the whistleblowing policy or the investigation of concerns. This dedicated role replaced the previous position of the then-nominated Non-Executive Director, who held additional whistleblowing responsibilities⁴.
- 3.10. Board members are required to monitor the number of concerns raised on a quarterly basis during their public board meetings. An annual report outlining whistleblowing performance must also be produced.
- 3.11. Confidential Contacts are appointed in each NHS Scotland board to provide support and advice to whistle-blowers (or potential whistle-blowers). They offer a safe and supportive environment to discuss concerns and can direct individuals to appropriate support, where applicable. Confidential Contacts are not involved in the operational investigation or management of concerns. Their role is to encourage individuals to speak up and help build trust in the process.
- 3.12. The National Whistleblowing Standards are part of the 'Once for Scotland' Workforce Policies programme⁵. These are single, standardised policies that apply to all NHS Scotland employees. There are currently 18 policies under this banner, and include Bullying and Harassment, Grievance, Whistleblowing and the workforce policies investigation process.

⁴ Gray, P. (2015) 'Non-Executive Whistleblowing Champion. Letter to NHS Scotland Health Board Chairs (29 September 2015)'. Edinburgh: Scottish Government.

⁵ Crown copyright (NHS Scotland) (2024) 'Workforce policies'. Available at: <https://workforce.nhs.scot/policies/> (Accessed: 11 April 2024).

4. Activities during 2024-2025

- 4.1. This section of the report provides a summary of activities, actions and responses undertaken in support of the whistleblowing agenda. During 2024-2025, the organisation continued to promote the Standards, encourage staff to raise concerns in the public interest, and respond appropriately to any whistleblowing issues raised.
- 4.2. Following its presentation to the NES Executive Team, the Staff Governance Committee and the NES Board, the third Annual Whistleblowing Report was published in May 2024. It was subsequently shared with the INWO team in June 2024. In parallel, Gillian Mawdsley, in her role as Non-Executive Director and Whistleblowing Champion, presented her annual assurance report to the Board at its May 2024 meeting.
- 4.3. Chaired by Christina Bichan, Director of Planning and Performance, the NES Whistleblowing Steering Group met on five occasions throughout 2024-2025 to discuss and progress the whistleblowing agenda. Topics discussed included:
- A benchmarking exercise on the role of Confidential Contacts.
 - Planning and delivery of the third 'Speak-up Week' (30 September 2024 to 04 October 2024).
 - Updates to the Line Manager's Handbook and the NES 90-day induction site.
 - A Continuing Professional Development (CPD) session for NES Confidential Contacts.
 - Publication of biographies for each Confidential Contact.
 - Review of the 2024 'iMatter' results (based on the NHS Scotland-wide staff survey).
 - Planning for learning sessions aimed at line managers and for those taking part in 'Learning at Work Week' (LAWW).
 - Availability of sexual harassment training.
 - Preparations for the upcoming Speak-up Week (29 September 2025 to 03 October 2025).
 - Consideration of recruiting an additional Confidential Contact.
- 4.4. There has been ongoing engagement with the INWO team throughout the year. Correspondence included:
- A request to all NHS Scotland boards to consider publishing information about their Confidential Contacts on external websites.
 - A timetable outlining planned activities for the 2024 Speak-up Week.
 - A letter to all NHS Scotland boards regarding expectations for quarterly and annual whistleblowing reporting.

- 4.5. A dedicated whistleblowing email address was established in September 2024, providing a clear, distinct, and discreet channel for correspondence aligned specifically with whistleblowing matters.
- 4.6. In June 2024, the Executive Team agreed that NES should enrol on the 'Equally Safe at Work' initiative, which is managed by 'Close the Gap'. This employer accreditation programme is designed to advance gender equality in the workplace. It supports organisations in understanding how gender inequality and workplace violence affect women in the workforce, while providing a framework for driving change. To achieve accreditation, NES must meet criteria across six key themes that align with workplace gender equality: leadership; data; flexible working; occupational segregation; workplace culture; and violence against women. The first meeting of the Equally Safe at Work working group was held in September 2024. Amongst other items discussed, the group reviewed a set of milestones outlining the actions required for accreditation. All working group members were encouraged to enrol on the training delivered by Close the Gap, entitled 'Equally Safe at Work: Applying a gender lens workshop'.
- 4.7. As in the national 2023 'iMatter' staff experience survey, the same two optional whistleblowing statements were included in the 2024 edition (Table 2). Although the average scores for 2024 are slightly lower, the overall results indicate that staff remain confident in their ability to raise concerns and in the organisation's commitment to follow through and respond appropriately. NES recorded the highest scores for both measures compared to the rest of NHS Scotland⁶.

Table 2: Whistleblowing statements – NES results obtained during the 2023 and 2024 iMatter Staff Experience Report (Source: Staff Governance Committee meeting paper of 07 November 2024).

These statements on raising concerns were optional.	2023		2024	
	Number of respondents	Average score	Number of respondents	Average score
I am confident that I can safely raise concerns about issues in my workplace.	1048/1075	86	1054/1079	85
I am confident that my concerns will be followed up and responded to.		83		81

⁶ Scottish Government (2024) 'iMatter Health & Social Care Staff Experience Survey 2024'. Edinburgh: Scottish Government. Available at: <https://www.gov.scot/publications/imatter-health-social-care-staff-experience-survey-2024/documents/> (Accessed: 17 April 2025).

- 4.8. Karen Reid, Chief Executive, launched the 2024 Speak-up Week on 30 September through a pre-recorded video message, accompanied by an intranet article and an all-staff email. In her message, she emphasised the importance of fostering a speak up culture across the organisation and underscored the value of diverse perspectives and experiences of all staff. She also highlighted that:
- NES is committed to listening to concerns with respect and openness.
 - NES is committed to protecting whistleblowers from any form of retaliation.
 - Hearing concerns, ideas, or suggestions for improvement is a cornerstone of NES's commitment to quality and excellence.
 - Whistleblowing plays a vital role in upholding the highest standards of safety and quality.
 - NES is actively participating in the 'Equally Safe at Work' scheme.
- 4.9. Speak-up Week was also marked by an interactive all-staff webinar on 02 October 2024, focused on the importance of speaking up. Hosted by Gillian Mawdsley (Non-Executive Director and Whistleblowing Champion), the panel featured Lynnette Grieve, Karen Wilson, Graham Paxton, Christina Bichan, Pamela Renwick, and Lindsay Donaldson. Discussions centred on empowering individuals across the NHS to voice their concerns, build trust, and support a culture of psychological safety. With over 100 in attendance, the webinar also provided staff with an opportunity to hear from directly from the Confidential Contacts and to find out more about arrangements for raising concerns.
- 4.10. The NES Confidential Contacts – Karen Wilson (Director of NMAHP and Deputy Chief Executive (Clinical)), Graham Paxton (Principal Lead), Pamela Renwick (General Manager), and Lindsay Donaldson (Deputy Medical Director) – play a key role in promoting a speak-up culture within NES. They may serve as the first point of contact for individuals seeking to raise a concern, as well as for those looking for advice on alternative procedures or sources of information. Biographies of all four Confidential Contacts were published during quarter three.
- 4.11. Notable contextual developments during 2024-2025 include:
- On 01 October 2024, the Scottish Workforce and Staff Governance Committee (SWAG) approved the next suite (phase 2.2) of refreshed NHS Scotland-wide workforce policies, along with four accompanying guides. Of relevance here, the documents included a Gender-Based Violence policy and a guide on sexual harassment.
 - The Worker Protection Act 2023 came into force on 26 October 2024 and placed a new duty on all employers to take reasonable steps to prevent sexual harassment of their employees⁷.

⁷ Independent National Whistleblowing Officer (INWO) (2025) 'Legislation comes into force'. Available at: <https://inwo.spsso.org.uk/news/legislation-comes-force> (Accessed: 30 January 2025).

- 4.12. During quarter three, NES received one whistleblowing concern – the only such concern reported in 2024-2025. This is discussed further in section 5: Whistleblowing annual return and key performance indicators.
- 4.13. In preparation for the Annual Staff Governance Monitoring Return, the Staff Governance Committee received a copy of the proposed Scottish Government submission at its November 2024 meeting. The Staff Governance Monitoring process aims to provide assurance to the Scottish Government that the Staff Governance Standard⁸ is being fully and properly applied in all boards, and where there are areas of concern, that support is provided. It also aims to provide assurance that good practice is being identified and shared to help drive continuous improvement. A tabled summary of the 2023-2024 whistleblowing cases was included in the return.
- 4.14. In February 2025, an employee survey, designed by 'Close the Gap', was issued to all NES staff. It aimed to capture staff attitudes and behaviours towards gender equality and violence against women.
- 4.15. In the Scottish Government letter dated 06 February 2025, the Cabinet Secretary for Health and Social Care requested an annual return from the National Whistleblowing Champion and Non-Executive Director, Gillian Mawdsley. A response was provided on 31 March 2025 and included information on activities delivered since April 2024.
- 4.16. All NES line managers are required to complete the line manager-level training on TURAS Learn. As of 10 April 2025, NES's compliance rate was 88% (330/373), with 43 yet to complete the training. This is discussed further in section 5: Whistleblowing annual return and key performance indicators.
- 4.17. NES continues to promote a culture of speaking up, where everyone feels safe to voice concerns and where issues are addressed and resolved at the earliest opportunity.

⁸ NHS Scotland (no date) 'Staff Governance Standard'. Available at: <https://www.staffgovernance.scot.nhs.uk/what-is-staff-governance/staff-governance-standard/> (Accessed: 21 September 2023).

5. Whistleblowing annual return and key performance indicators

- 5.1. This section of the report outlines NES's whistleblowing annual return and the ten Key Performance Indicators (KPIs). Each KPI is annotated within the relevant paragraph and summarised in Appendix B (p. 18).
- 5.2. Between 01 October 2024 to 31 December 2024, NES received one whistleblowing concern (on 02 October 2024 and acknowledged the next day). The concerns were related to the safety of a staff member and the lack of urgency given towards staff protection. Due to the complexity of matters raised, the concerns were investigated as a stage two case, which were subsequently upheld. In tandem with the report write up, it was agreed to work with colleagues to help close off the remedial actions. The investigation report was issued on 26 November 2024, covering a period of 40 working days to conclude. Further work is ongoing to ensure the adequate completion of the requested actions (KPI1). The case has provided learning opportunities for all parties involved – including those directly linked to the issues raised, the case investigators, and others (KPI1, KPI2). The stress and inconvenience experienced by the whistleblower were noted (KPI2). A quantitative summary of KPIs 4-10 can be seen in Table 3 below.

Table 3: KPIs 4-10.

KPI	Description	Total	Percentage
4	The total number of concerns received.	1	-
5	The total number of concerns closed.	1	-
	Number of concerns closed at stage one.	0	-
	Number of concerns closed at stage two.	1	100%
6	Number of concerns upheld at stage one.	0	-
	Number of concerns partially upheld at stage one.	0	-
	Number of concerns not upheld at stage one.	0	-
	Number of concerns upheld at stage two.	1	100%
	Number of concerns partially upheld at stage two.	0	-
	Number of concerns not upheld at stage two.	0	-
7	Average working days for concerns at stage one.	-	-
	Average working days for concerns at stage two.	40	-
8	Number of concerns at stage one closed within five working days.	0	-
	Number of concerns at stage two closed within 20 working days.	0	-
9	Number of concerns at stage one with authorised extension.	0	-
10	Number of concerns at stage two with authorised extension.	1	100%

- 5.3. With respect to whistleblowing learning opportunities, three learning modules are available to all NES employees⁹:
- An **overview module** for individuals who require a general understanding of the National Whistleblowing Standards.
 - A **module for line managers** (and others in similar roles) who are likely to receive concerns from colleagues as part of their routine responsibilities.
 - A **module for senior managers** who are involved with not only receiving concerns, but also in investigating, responding to, and reporting on whistleblowing concerns to the Board.

- 5.4. Within NES, all line managers are required to complete the line manager level training (which forms part of NES's suite of 'essential learning'). As of 10 April 2025, NES's compliance rate for line manager level training was 88% (330/373), with 43 yet to complete the training (Table 4) (KPI3). This is a slight change from the quarter three position (90%, 307/343). Compliance with essential learning was once again included in the personal objectives for all staff, with the intent of improving overall organisational performance (KPI3).

Table 4: Mandatory whistleblowing training for line managers (data as of 10 April 2025).

Mandatory module for line managers (as of 10 April 2025)	Applicable line manager headcount	Number of managers who completed the training	Percentage
Whistleblowing: for line managers	373	330	88%

- 5.5. Aside from the mandatory line manager level training, all core NES employees have the option to complete any of the three available modules (Table 5) (KPI3).

Table 5: Whistleblowing training for core NES employees (data as of 10 April 2025).

Modules available to all core employees (as of 10 April 2025)	Number of core employees (headcount) ¹⁰	Number of core employees who completed the training ¹¹	Percentage
Whistleblowing: an overview	1219	822	67%
Whistleblowing: for line managers	1219	389	32%
Whistleblowing: for senior managers	1219	269	22%

⁹ SPSO (2021). 'National Whistleblowing Standards training, Turas Learn'. Available at: <https://learn.nes.nhs.scot/40284/national-whistleblowing-standards-training> (Accessed: 31 May 2021).

¹⁰ The number of core employees is 1219 (as of 10 April 2025) and does not include the relevant exclusions applied to the essential learning compliance report (for example, for those on extended leave and the like).

¹¹ An employee may have completed more than one module.

- 5.6. Staff are typically reminded of their essential learning requirements via communications such as all-staff newsletters and targeted emails. The Staff Governance Committee routinely receives and scrutinises reports on essential learning compliance and seeks assurance on performance.
- 5.7. Staff had the opportunity to find out more about the whistleblowing agenda during the 2024 Speak-up Week (KPI3). Karen Reid, Chief Executive, opened Speak-up Week with a video message to all staff, reaffirming NES's commitment to speaking up (see paragraph 4.8). Gillian Mawdsley, Whistleblowing Champion, hosted an all-staff webinar as part of the week's activities (see paragraph 4.9).
- 5.8. Since the launch of the Standards in April 2021, NES has formally recorded one concern under stage one and three concerns under stage two of the procedure.

6. Conclusion

- 6.1. This is NES's fourth Annual Whistleblowing Report, which provided an opportunity to reflect on activities throughout 2024-2025 and on learning to date. NES remains committed to ensuring that staff and others have the confidence to raise public interest concerns, and to foster a workplace culture that is open, honest and inclusive.
- 6.2. Over the past year, continued engagement has taken place via staff, the Whistleblowing Steering Group, the Staff Governance Committee and the NES Board. The four Confidential Contacts continue to serve as a key resource, offering a trusted point of contact for staff and others seeking advice.
- 6.3. Looking ahead, priorities for the coming year include increasing awareness, strengthening trust in the process, and ensuring that all staff feel supported and empowered to raise concerns in the public interest. Options to expand the pool of Confidential Contacts will also be explored. In conclusion, NES recognises its role in setting a tone and culture that values staff contributions, empowers them to speak up with confidence, and remains dedicated to supporting those who do.

Nancy El-Farargy
NHS Education for Scotland
June 2025

7. Appendix A: Context and background

Table 6: The context and background behind the current whistleblowing arrangements in NHS Scotland.

Staff Governance Standard – a framework for NHS Scotland organisations and employees¹².	The Staff Governance Standard outlines the responsibility of employers to ensure that staff feel safe to speak up about any wrongdoing. It also places a responsibility on staff to speak up on issues that may cause upset and alarm, in line with the whistleblowing policy.
Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry – Executive Summary¹³.	The report highlighted the need for a common patient-centred culture, clear standards and measures of compliance, and openness, transparency and candour throughout ‘the system’. The resulting 290 recommendations aimed to put patients and their safety first, with cultural change required at all levels. The recommendations included patient, public and local scrutiny, performance management and clear metrics on quality.
Freedom to speak up: An independent review into creating an open and honest reporting culture in the NHS¹⁴.	The review highlighted the need for additional measures to ensure that all NHS staff can freely raise any patient safety concerns. The report was related to NHS England, however, the Scottish Government welcomed it and used its findings to further support, encourage and promote whistleblowing in NHS Scotland. The findings were also considered in relation whistleblowing arrangements in place at the time and the potential change to NHS Scotland’s whistleblowing approach.
Report to the Cabinet Secretary for Health and Sport into Cultural Issues related to allegations of bullying and harassment in NHS Highland¹⁵.	The 2019 report by John Sturrock QC investigated allegations of bullying and harassment in NHS Highland. This was commissioned by the Scottish Government and was submitted to the then Cabinet Secretary for Health and Sport, Jeane Freeman. Proposals for improvement included an independent whistleblowing process and the provision of an independent “guardian” for anyone wishing to report inappropriate behaviour, and for those whom such behaviour is alleged.

¹² Scottish Government (2012) ‘Staff Governance Standard: A Framework for NHSScotland Organisations and Employees’. 4th edition. Edinburgh: Scottish Government. Available at: <https://www.staffgovernance.scot.nhs.uk/media/1342/staff-governance-standard-edition-4.pdf> (Accessed: 28 June 2019).

¹³ Crown Copyright (2013) ‘Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry, Chaired by Robert Francis QC: Executive Summary’. London: The Stationery Office. Available at: [http://webarchive.nationalarchives.gov.uk/20150407084003/http://www.midstaffpublicinquiry.com/sites/default/files/report/Executive summary.pdf](http://webarchive.nationalarchives.gov.uk/20150407084003/http://www.midstaffpublicinquiry.com/sites/default/files/report/Executive%20summary.pdf) (Accessed: 3 August 2015).

¹⁴ Francis, R. (2015) ‘Freedom to speak up. An independent review into creating an open and honest reporting culture in the NHS.’ Available at: https://webarchive.nationalarchives.gov.uk/20150218150953/https://freedomtospeakup.org.uk/wp-content/uploads/2014/07/F2SU_web.pdf (Accessed: 11 November 2019).

¹⁵ Sturrock, J. (2019) ‘Report to the Cabinet Secretary for Health and Sport into: Cultural issues related to allegations of bullying and harassment in NHS Highland’. Edinburgh: Scottish Government. Available at: <https://www.gov.scot/publications/report-cultural-issues-related-allegations-bullying-harassment-nhs-highland/> (Accessed: 30 June 2019).

Cont. Table 6:

The Scottish Government response¹⁶ to the Sturrock review.	<p>The Scottish Government's response to the 2019 Sturrock report highlighted the required learning and reflection for all NHS Scotland boards and committed to building a more open, honest and inclusive culture. Several initiatives were subsequently put in place across NHS Scotland, and these included:</p> <ul style="list-style-type: none"> • The establishment of an Independent National Whistleblowing Officer (INWO) for NHS Scotland, to investigate the handling of any whistleblowing complaints. • The appointment of dedicated Whistleblowing Champions (as Non-Executive Directors) to each NHS Scotland board. • A review of the 'Once for Scotland' workforce policies¹⁷. • A standardised 'Once for Scotland' procedure for handling any whistleblowing concerns.
The Public Services Reform (The Scottish Public Services Ombudsman (Healthcare Whistleblowing) Order 2020¹⁸.	<p>The order gave power to the Scottish Public Services Ombudsman to take on the INWO role, which in turn gave whistle-blowers the opportunity to seek independent external review. The INWO also has a national leadership role in providing direction, support and guidance to NHS Scotland boards regarding the National Whistleblowing Standards¹⁹. These Standards were launched in April 2021 and outline the NHS Scotland-wide procedure for handling any whistleblowing concerns.</p>
The Public Interest Disclosure Act 1998²⁰.	<p>The act aims to protect employees who make disclosures in the public interest and allows them to bring action with respect to victimisation. The qualifying disclosures for protection are:</p> <ul style="list-style-type: none"> • A criminal offence. • Failing to comply with a legal obligation. • A miscarriage of justice. • A risk to health and safety. • A risk to the environment. • Concealment of any of the above.

¹⁶ Scottish Government (2019) 'The Scottish Government Response to the Sturrock Review: into cultural issues related to allegations of bullying and harassment in NHS Highland'. Edinburgh: Scottish Government. Available at: <https://www.gov.scot/publications/scottish-government-response-report-bullying-harassment-nhs-highland/> (Accessed: 30 June 2019).

¹⁷ Crown copyright (NHS Scotland) (2024) 'Workforce policies'. Available at: <https://workforce.nhs.scot/policies/> (Accessed: 11 April 2024).

¹⁸ Crown Copyright (2020) 'Scottish Statutory Instruments. 2020 No. 5. The Public Services Reform (The Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020'. Available at: <https://www.legislation.gov.uk/ssi/2020/5/made> (Accessed: 22 October 2020).

¹⁹ Independent National Whistleblowing Officer (2021) 'The National Whistleblowing Standards - April 2021'. Edinburgh: Scottish Public Services Ombudsman. Available at: <https://inwo.spso.org.uk/sites/inwo/files/Standards/NationalWhistleblowingStandards-AllParts.pdf> (Accessed: 24 January 2022).

²⁰ Crown Copyright (1998) 'Public Interest Disclosure Act 1998. Chapter 23'. Available at: <http://www.legislation.gov.uk/ukpga/1998/23/data.pdf> (Accessed: 29 October 2019).

8. Appendix B: Key Performance Indicators

Table 7: Overview of the Key Performance Indicators (KPIs) reported.

Key Performance Indicators (KPIs)		Report location
KPI 1	A statement outlining learning, changes or improvements to services or procedures as a result of consideration of whistleblowing concerns.	Paragraph 5.2.
KPI 2	A statement to report the experiences of all those involved in the whistleblowing procedure (where this can be provided without compromising confidentiality).	Paragraph 5.2.
KPI 3	A statement to report on levels of staff perception, awareness and training.	Paragraphs 4.8, 4.9, 5.4, 5.5, and 5.7.
KPI 4	The total number of concerns received.	Paragraph 5.2, Table 3.
KPI 5	Concerns closed at stage one and stage two of the whistleblowing procedure as a percentage of all concerns closed.	Paragraph 5.2, Table 3.
KPI 6	Concerns upheld, partially upheld, and not upheld at each stage of the whistleblowing procedure as a percentage of all concerns closed in full at each stage.	Paragraph 5.2, Table 3.
KPI 7	The average time in working days for a full response to concerns at each stage of the whistleblowing procedure.	Paragraph 5.2, Table 3.
KPI 8	The number and percentage of concerns at each stage which were closed in full within the set timescales of five and 20 working days.	Paragraph 5.2, Table 3.
KPI 9	The number of concerns at stage one where an extension was authorised as a percentage of all concerns at stage one.	Paragraph 5.2, Table 3.
KPI 10	The number of concerns at stage two where an extension was authorised as a percentage of all concerns at stage two.	Paragraph 5.2, Table 3.

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