

NHS Highland



Meeting: Board Meeting

Meeting date: 31st March 2026

Title: Quarter 3 Whistleblowing & Confidential Contact Report

Responsible Executive/Non-Executive: Gareth Adkins, Director of People & Culture

Report Author: Dominic Watson, Head of Corporate Governance
Carolynn Lawrie & Hollie Baxter, Confidential Contact Advisors

Report Recommendation:

Moderate Assurance – To give confidence of compliance with legislation, policy and Board objectives noting challenges with timescales due to the complexity of cases and investigations.

1 Purpose

This is presented to the Board for:

- Assurance

This report relates to a:

- Legal requirement

This report will align to the following NHSScotland quality ambition(s):

Safe, Effective and Person Centred

This report relates to the following Strategic Outcome(s)

| | | | | | | | |
|--------------|---|---------------|---|------------------------|--|-------------|--|
| Start Well | | Thrive Well | | Stay Well | | Anchor Well | |
| Grow Well | | Listen Well | x | Nurture Well | | Plan Well | |
| Care Well | | Live Well | | Respond Well | | Treat Well | |
| Journey Well | | Age Well | | End Well | | Value Well | |
| Perform well | x | Progress well | | All Well Themes | | | |

2 Report summary

2.1 Situation

This report is for Quarter 3 covering the period October to December 2025.

This is provided to give assurance to the committee of our performance against the Whistleblowing Standards which have been in place since April 2021.

2.2 Background

All NHS Scotland organisations including Health and Social Care Partnerships are required to follow the National Whistleblowing Principles and Standards which came into effect from 1 April 2021. Any organisation providing an NHS service should have procedures in place that enable their staff, students, volunteers, and others delivering health services, to access the National Whistleblowing Standards.

As part of the requirements, reports are required to be presented to the Board and relevant Committees and IJBs, on an annual basis, in addition to quarterly reports. The Area Partnership Forum plays a critical role in ensuring the Whistleblowing Standards are adhered to in respect of any service delivered on behalf of NHS Highland. Both quarterly and annual reports are presented at the meetings and robust challenge and interrogation of the content takes place.

The Confidential Contact Service, known as OpenLine, provides our Whistleblowing Standards confidential contacts service. OpenLine will ensure:

- that the right person within the organisation is made aware of the concern
- that a decision is made by the dedicated officers of NHS Highland and recorded about the status and how it is handled
- that the concern is progressed, escalating if it is not being addressed appropriately
- that the person raising the concern is:
 - kept informed as to how the investigation is progressing
 - advised of any extension to timescales
 - advised of outcome/decision made

- advised of any further route of appeal to the Independent National Whistleblowing Office (INWO)
- that the information recorded will form part of the quarterly and annual board reporting requirements for NHS Highland. Staff can also raise concerns directly with:
 - their line manager
 - The whistleblowing champion
 - The executive whistleblowing lead

Trade union representatives also provide an important route for raising concerns. In the context of whistleblowing standards, the trade union representatives can assist staff in deciding if:

- an appropriate workforce policy process could be used including early resolution
- whistleblowing policy and procedures could be used to explore and resolve concerns that involve wrongdoing or harm

Information is also included in the NHS Highland Induction, with training modules still available on Turas. The promotion and ongoing development of our whistleblowing, listening and speak up services is a core element of the Together We Care Strategy and Annual Delivery Plan.

2.3 Assessment

Summary of Quarter 3 Whistleblowing covering the period October to December 2025:

- No new cases received in the quarter.
- One case has been closed, with the outcome identifying one element partially upheld, and three elements not upheld. 19 recommendations have been identified (see Appendix 1).

Three cases remain under investigation:

- One relates to potential financial mismanagement that has been investigated previously through workforce policies. A whistleblowing investigation is reviewing if there is anything further organisationally that needs to be considered to prevent recurrence.
- Investigation remains ongoing into the case reopened by INWO, as reported in the last quarter.
- One case relates to quality of care concerns.

The table in Appendix 1 summarises the cases with recommendations that are still in progress and the governance arrangements. It is worth noting that recommendations are dependent on the specific context and circumstances and the associated governance arrangements will vary. However, a review date has been set for the whistleblowing function to check with those tasked with the recommendations on progress to date. This will include considering whether the work requires a further review date set.

Summary of Quarter 3 Confidential Contacts covering December 2025 (support formerly provided by the Guardian Service):

- Nine cases received in the month.
 - Three cases relate to line manager issues
 - Two cases relate to unreasonable workload
 - One case relates to discrimination
 - One case relates to line manager issues and lack of communication
 - One case relates to inappropriate staff behaviour
 - One case was a request for information signposting

- All nine cases closed in the month.

2.4 Proposed level of Assurance

This report proposes the following level of assurance

| | | | |
|-------------|--------------------------|----------|-------------------------------------|
| Substantial | <input type="checkbox"/> | Moderate | <input checked="" type="checkbox"/> |
| Limited | <input type="checkbox"/> | None | <input type="checkbox"/> |

Comment on the level of assurance

The committee is asked to take moderate assurance on basis of robust process, but noting the challenge of meeting the 20 working days within the standards

3 Impact Analysis

3.1 Quality/ Patient Care

The Whistleblowing Standards are designed to support timely and appropriate reporting of concerns in relation to Quality and Patient Care and ensure we take action to address and resolve these.

3.2 Workforce

Our workforce has additional protection in place under these standards

3.3 Financial

The Whistleblowing Standards also offer another route for addressing allegations of a financial nature

3.4 Risk Assessment/Management

The risks of the implementation have been assessed and included.

3.5 Data Protection

The standards require additional vigilance on protecting confidentiality.

3.6 Equality and Diversity, including health inequalities

No issues identified currently

3.7 Other impacts

None

3.8 Communication, involvement, engagement and consultation

N/A

3.9 Route to the Meeting

N/A

4.1 List of appendices

The following appendices are included with this report:

- Appendix 1 – Case recommendations and Governance Summary Report

Appendix 1 – Case Recommendations and Governance Summary

| Case ID | Summary | Recommendations | Actions | Governance Arrangements | Review date | Update |
|--------------|--|--|---|---|---|--------|
| WB19 2025-26 | Concerns about impact of staffing shortages on quality and safety of clinical services | <p>Safe, quality care</p> <ul style="list-style-type: none"> • Integrate findings of investigation into service review to ensure the practice model is consistent with national policy • The service review to: <ul style="list-style-type: none"> ○ reassess the guidance for future similar situations ○ discuss the feedback from staff ○ evaluate the ongoing challenges and any risks associated with paper records and develop plans for transition to electronic records ○ support the team to ensure that there are effective systems in place for ensuring open lines of communication and feedback • Ensure that staff can access current guidance <p>Professional Workforce Standards Planning and Development</p> <ul style="list-style-type: none"> • Integrate findings and recommendations into the governance systems • Ensure that all staff have undertaken the Health and Care Staffing Scotland (informed level) online training • Ensure that findings of service review: <ul style="list-style-type: none"> ○ inform plans for workforce review and address requirements for most efficient use of existing resource ○ Implement efficient use of existing resources, including skills mix and different roles | <ul style="list-style-type: none"> • Implement recommendations through senior management team with support from executive team | <ul style="list-style-type: none"> • Clinical governance | <ul style="list-style-type: none"> • | N/A |

| | | | | | | |
|--|--|---|--|--|--|--|
| | | <ul style="list-style-type: none">• Ensure time and resource to fulfil professional and leadership role• Attendance required for all referral discussions <p>Professional Practice and Accountability</p> <ul style="list-style-type: none">• Compliance with NMC standards with record keeping systems• Safe and effective use of social media platforms for engagement• Implement regular supervision sessions• Review the current model of supervision• Professional collaboration links throughout NHS Highland• Better use of technology to connect teams | | | | |
|--|--|---|--|--|--|--|