

**To:** Audit and Risk Committee

**For meeting on:** 2 July 2014

**Agenda item:** 11

**Report by:** Philippa Harding, Board Secretary

**Report on:** Whistleblowing Review - scope

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## Background

1. The Audit and Risk Committee has made whistleblowing one of its priorities in 2014/15. This paper provides the Committee with an outline scope for a whistleblowing review, for consideration and comments. The aim of the review is to ensure that Monitor's internal and external whistleblowing policies are operating as effectively as possible. The review will focus on the policies that are in place, key individuals' experiences and perceptions of how they are operating, consideration of best practice benchmarks and whether any improvements are required with regard to Monitor's internal operations.
2. Subject to the Committee's confirmation that it is content with the proposed scope of the review, it is anticipated that the work would be undertaken over the summer, with the outcome and proposed next steps reported to the Audit and Risk Committee meeting on 19 November 2014. This timeframe is suggested in order to enable the review to take account of the independent review into creating an open and honest reporting culture in the NHS, chaired by Sir Robert Francis QC, which is due to complete its work in November 2014.

## Scope

3. It is proposed to adopt the same structure as that used by the NAO in its recent high level review of whistleblowing (*Making a whistleblowing policy work*, March 2014), in which the following were examined:
  - a) **systems** to support whistleblowing arrangements, including the clarity of governance arrangements and the availability of intelligence;
  - b) **structures** that are in place to enable [and manage] whistleblowing; and
  - c) **behaviours** to support and enable a positive environment in which whistleblowing is accepted.

4. A number of questions are suggested to guide thinking in relation to each area:

a) Systems:

What are the systems that Monitor has in place to support whistleblowing arrangements in relation to:

- a. Internal whistleblowers?
- b. External whistleblowers (about NHS FTs)?

Focus on accountability and governance for whistleblowing:

- Is there a clear policy responsibility?
- Is there clear day-to-day oversight?
- How is quality assurance achieved?
- Are there clear reporting lines?

b) Structures:

What are the structures that Monitor has in place to support whistleblowing arrangements in relation to:

- a. Internal whistleblowers?
- b. External whistleblowers (about NHS FTs)?

Focus on how whistleblowers can raise their concerns and whether these are managed efficiently:

- Is there clarity about the potential types of whistleblowing concern that might be raised?
- Are there clear and multiple routes for whistleblowers to raise their concerns?
- Are there clear and consistent cross-organisational procedures for the management of whistleblowing concerns?
- How are lessons learned from and action taken in response to concerns raised?

c) Behaviours:

What behaviours are exhibited across Monitor to support and enable a positive environment in relation to:

- a. Internal whistleblowers?
- c. External whistleblowers (about NHS FTs)?

Focus on how good practice behaviours can operate in practice:

- Is there an appropriate level of understanding of the issues associated with whistleblowing across the organisation?
- Do managers feel comfortable engaging with whistleblowers?
- Do whistleblowers feel that the organisation treats them appropriately?

## **Method**

5. It is proposed that a high level approach should be taken to the review, with existing information used to answer the questions raised above. This will include:
  - Monitor policy and governance documents;
  - Benchmarking policy documents;
  - Best practice guidance;
  - Internal reporting on whistleblowing; and
  - Monitor procedural documents.
6. In addition to desktop research, a number of interviews and group discussions are proposed with key members of staff across the organisation, including:
  - Enquiries and Complaints Manager;
  - Representative of the Legal Services directorate;
  - Representative of the Organisation Transformation directorate; and
  - Representatives of the functional directorates.

## **Conclusion**

7. The whistleblowing review is proposed to focus on the operation of Monitor's whistleblowing policies, rather than on the content of the policies themselves, although it is possible that amendments may be recommended in light of the review.
8. The Audit and Risk Committee's views on the proposed scope of the review invited and, subject to these, the Committee is asked to confirm that it is content with the scope of the review.

**Philippa Harding**  
**Board Secretary**

**Making a difference for patients:**

*Monitor's mission is to make the health sector work better for patients. This report proposes a scope for a review of the operation of Monitor's whistleblowing policy, with a view to ensure that it is as effective as possible. The opportunity for staff to whistle blow is important to protect and reassure them (ensuring that they work effectively for patients) and it is vital that the concerns of members of the public or health care employees about those institutions regulated by Monitor are dealt with effectively and appropriately.*

**Public Sector Equality Duty:**

*Monitor has a duty under the Equality Act 2010 to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations between people from different groups. In drafting this report consideration has been given to the impact that the issues dealt with might have on these requirements and on the nine protected groups identified by this Act. It is anticipated that the issues dealt with in this paper are likely to have a beneficial impact upon the requirements of or the protected groups identified by the Act, as this paper will lead to a review of the process by which they are able to raise concerns about the health care services they receive.*

**Exempt information:**

*None of this report is exempt from publication under the Freedom of Information Act 2000.*