### Freedom to Speak Up Arrangements

Author: Director of Safety and Risk Sponsor: Director of People and OD

**Trust Board paper F** 

#### 1. Context

New requirements from NHS Improvement stipulate that Trust Boards must have oversight of their Freedom to Speak Up (F2SU) arrangements, undertake a comprehensive self-assessment and develop a F2SU vision, strategy and plan.

This self-assessment was considered in detail at a Trust Board Thinking Day held on 13<sup>th</sup> September. Board members' comments have been captured in this updated version.

#### 2. Topics Covered in this report

The attached paper is the updated Trust Board Freedom to Speak Up self-assessment.

NHS Improvement is seeking assurance that Boards own the F2SU agenda and can evidence that listening to concerns raised by staff to inform continuous improvement is at the heart of the organisation's activities. Within this, Trust Board members need to constantly reinforce F2SU messages and seek assurance that staff know how to speak up.

#### 3. Questions

- 1. Does the attached self-assessment accurately reflect our current position regarding Freedom to Speak Up arrangements within UHL?
- 2. Is the Board satisfied that we are making sufficient progress on these matters?
- 3. Are we rigorously tracking and responding to safety concerns?

#### 4. Input Sought

Trust Board members are invited to review the updated self-assessment and approve it for submission to NHS Improvement and the National Guardian Office.

The Board is asked to receive a further Freedom to Speak Up report later in the year containing the completed vision, strategy and plan.

### For Reference

Edit as appropriate:

1. The following objectives were considered when preparing this report:					
Safe, high quality, patient centred healthcare	Yes				
Effective, integrated emergency care	Yes				
Consistently meeting national access standards	N/A				
Integrated care in partnership with others	Yes				
Enhanced delivery in research, innovation & ed'	No				
A caring, professional, engaged workforce	Yes				
Clinically sustainable services with excellent facilities	Yes				
Financially sustainable NHS organisation	No				
Enabled by excellent IM&T	Yes				
2. This matter relates to the following governance ini	tiatives:				
Organisational Risk Register Yes					
Board Assurance Framework Yes					
3. Related Patient and Public Involvement actions tal	xen, or to be taken:				

4. Results of any Equality Impact Assessment, relating to this matter:

5. Scheduled date for the next paper on this topic: TBC

6. Executive Summaries should not exceed 2 pages. Yes

7. Papers should not exceed 7 pages. No



# Freedom to Speak Up self-review tool for NHS trusts and foundation trusts May 2018

# How to use this tool

Effective speaking up arrangements help to protect patients and improve the experience of NHS workers. Having a healthy speaking up culture is evidence of a well-led trust.

NHS Improvement and the National Guardian's Office have published a <u>guide</u> setting out expectations of boards in relation to Freedom to Speak Up (FTSU) to help boards create a culture that is responsive to feedback and focused on learning and continual improvement.

This self-review tool accompanying the guide will enable boards to carry out in-depth reviews of leadership and governance arrangements in relation to FTSU and identify areas to develop and improve.

The Care Quality Commission (CQC) assesses a trust's speaking up culture during inspections under key line of enquiry (KLOE) 3 as part of the well-led question. This guide is aligned with the good practice set out in the well-led framework, which contains references to speaking up in KLOE 3 and will be shared with Inspectors as part of the CQC's assessment framework for well-led.

Completing the self-review tool and developing an improvement action plan will help trusts to evidence their commitment to embedding speaking up and help oversight bodies to evaluate how healthy a trust's speaking up culture is.

Self review indicator (Aligned to well-led KLOEs)	To what extent is this expectation being met?	What are the principal actions required for development?	How is the board assured it is meeting the expectation? Evidence
Our expectations			
1. Leaders are knowledgeable about FTSU			
1.1 Senior leaders are knowledgeable and up to date about FTSU and the executive and non-executive leads are aware of guidance from the National Guardian's Office.	Green	<ul> <li>Senior Leaders across UHL to share the guidance and the F2SU agenda</li> </ul>	<ul> <li>F2SUG reports quarterly to Executive Trust Board and Quality Outcomes Committee</li> <li>Guidance from National Guardians Office referenced in reports and circulated as required.</li> <li>Director of Safety and Risk is the exec link</li> <li>Quarterly meetings with Director of HR, Director of Safety and Risk and the Non-Executive Director</li> <li>Monthly meetings with the CE</li> <li>Action F2SU bulletins circulated to TB members</li> </ul>
1.2 Senior leaders can readily articulate the trust's	Amber	F2SUG to	• F2SUG to report this quarterly to
FTSU vision and key learning from issues that workers		disseminate this in	Trust Board to discuss the

have spoken up about and regularly communicate the value of speaking up.		CE Briefing • To ensure F2SU partners provide feedback on the themes and share the learning within their team meetings	<ul> <li>effectiveness of this</li> <li>From June 2018 data is submitted Clinical Management Group Assurance Performance Review Meeting</li> <li>Included in all corporate inductions</li> <li>Evidence of the importance on staff supported to speak up empathised at CE briefing Sept 18</li> </ul>
1.3They can provide evidence that they have a leadership strategy and development programme that emphasises the importance of learning from issues raised by people who speak up.	Amber	<ul> <li>F2SU Vision, strategy and plan under development together with the NHSI Culture and Leadership programme diagnostics</li> </ul>	<ul> <li>From June 2018 data is submitted Clinical Management Group Assurance Performance Review Meetings</li> <li>Quarterly F2SU reports taken to executive team meetings and sub-committee of Board for scrutiny of themes, issues and any detriment.</li> <li>F2SU will form part of the wider UHL culture, leadership and behaviours piece.</li> </ul>
1.4 Senior leaders can describe the part they played in creating and launching the trust's FTSU vision and strategy.	Amber	<ul> <li>Draft F2SU vision, strategy and plan to go back to TB later in</li> </ul>	<ul> <li>Focus groups held prior to F2SUG commencing in post</li> <li>F2SUG Action Work plan</li> </ul>

		<ul> <li>2018</li> <li>Further consideration at Executive Team to challenge if we are paying sufficient attention to staff concerns and taking reasonable and robust action on issues raised.</li> </ul>	<ul> <li>submitted to Executive Board June 2018</li> <li>New F2SU vision, strategy and plan to be worked up through consultation with senior leaders and executive teams. This will be part of the wider Quality Improvement Commitment</li> <li>Trust Board Thinking Day – 13<sup>th</sup> September on F2SU</li> <li>All directors and NEDs undertake safety walkabouts to test out in practice concerns raised through F2SU reporting</li> </ul>
<ul> <li>2. Leaders have a structured approach to FTSU</li> <li>2.1 There is a clear FTSU vision, translated into a robust and realistic strategy that links speaking up with patient safety, staff experience and continuous improvement.</li> </ul>	Amber	Review robust governance arrangements to review concerns raised and actively track responses and actions	<ul> <li>F2SU role is promoted as part of the Essential Patient Safety training, corporate, junior doctors, nursing associates, and student nurse induction.</li> <li>F2SU feedback will be used to inform continuous improvement</li> </ul>
2.2 There is an up-to-date <u>speaking up policy</u> that reflects the minimum standards set out by NHS Improvement.	Green	3 yearly review of the Trusts Freedom to Speak Up: Raising	<ul> <li>Freedom to Speak up: Raising Concerns (Whistleblowing) Policy was approved by Policy</li> </ul>

		Concerns (Whistleblowing) Policy	<ul> <li>and Guideline Committee on 18.8.17 Trust Ref. A15/2001</li> <li>This policy contains all elements as outlined in the NHS Improvement/NHS England standard integrated policy issued on 1 April 2016.</li> </ul>
2.3 The FTSU strategy has been developed using a structured approach in collaboration with a range of stakeholders (including the FTSU Guardian) and it aligns with existing guidance from the National Guardian.	Amber	<ul> <li>Report data to trust board quarterly</li> <li>Update vision, strategy, plan in line with latest guidance</li> <li>National guidance, behavioural standards and internal data will inform UHL's strategy and plan.</li> </ul>	<ul> <li>F2SUG provides data quarterly to Executive Trust Board and Quality Outcomes Committee</li> <li>Guidance from National Guardians Office referenced in reports and circulated as required.</li> </ul>
2.4 Progress against the strategy and compliance with the policy are regularly reviewed using a range of qualitative and quantitative measures.	Amber	<ul> <li>Bi-monthly meetings between F2SUG, NED, DPOD, DSR and F2SUG will monitor this and twice yearly monitoring will be highlighted at TB</li> </ul>	<ul> <li>Qualitative and quantitative measures ('noise and data') reviews quarterly at EQB.</li> </ul>

3.1 All senior leaders take an interest in the trust's speaking up culture and are proactive in developing ideas and initiatives to support speaking up.	Amber		<ul> <li>Breakfast with the boss (CE breakfast)</li> <li>3636 staff concerns reporting line/junior doctors gripe tool collated in the F2SU report</li> <li>3636 process directly engages the moist senior leaders in the trust in listening to and responding to serious staff concerns</li> </ul>
3.2 They can evidence that they robustly challenge themselves to improve patient safety, and develop a culture of continuous improvement, openness and honesty.	Amber	<ul> <li>Send CMG F2SU survey/questionnaire by End of October 2018</li> </ul>	<ul> <li>Consider asking for evidence of this at PRMs and send F2SU survey</li> </ul>
3.3 Senior leaders are visible, approachable and use a variety of methods to seek and act on feedback from workers.	Amber	<ul> <li>Trust plan to participate in NHSi Quality Improvement initiative</li> </ul>	<ul> <li>Safety Walkabouts</li> <li>Breakfast with the boss</li> <li>Open door policy by many senior leaders</li> <li>Mortality and morbidity meetings</li> </ul>
3.4 Senior leaders prioritise speaking up and work in partnership with their FTSU Guardian.	Amber	<ul> <li>Send CMG F2SU survey/questionnaire by End of October 2018</li> </ul>	<ul> <li>5 Steps approach in responding to staff concerns created</li> </ul>

3.5 Senior leaders model speaking up by acknowledging mistakes and making improvements.	Amber	<ul> <li>The Trust has committed to undertaking the NHS Improvement Culture and Leadership programme.</li> <li>Item on this at CE briefings in 2019</li> </ul>	<ul> <li>'Civilitysaveslives' key component of the consultants conference Sept 2018</li> <li>F2SUG working with OD department with the NHSi Quality Improvement initiative</li> <li>UHL Leadership Day and Consultant Conference (September 2018) had sessions on this.</li> </ul>
3.6 The board can state with confidence that workers know how to speak up; do so with confidence and are treated fairly.	Amber	<ul> <li>Board colleagues test this out on safety walkabout visits.</li> </ul>	<ul> <li>AS part of the wider Quality Improvement initiative this will be monitored.</li> <li>F2SU survey to be sent out to all staff October 2018</li> <li>'5 Steps' video produced and well publicised throughout the Trust to encourage staff to speak up and to instruct managers how concerns should be handled.</li> </ul>
4. Leaders are clear about their role and responsib	oilities		
4.1 The trust has a named executive and a named non- executive director responsible for speaking up and both	Green		<ul> <li>Quarterly meetings with DPOD, DSR, F2SUG and NED</li> </ul>

are clear about their role and responsibility.			
4.2 They, along with the chief executive and chair, meet regularly with the FTSU Guardian and provide appropriate advice and support.	Green		<ul> <li>Monthly meetings with the CE</li> <li>Commence bimonthly meetings with DWOD, DSR, F2SUG and NED</li> <li>From June 2018 data is submitted Clinical Management Group Assurance Performance Review Meeting</li> <li>F2SUG provides data quarterly to Executive Trust Board and Quality Outcomes Committee</li> <li>F2SUG carries out regular walkabouts with the Chairman</li> </ul>
<ul> <li>4.3 Other senior leaders support the FTSU Guardian as required.</li> <li>5. Leaders are confident that wider concerns are identified to the senior leaders are confident that wider concerns are identified to the senior leaders are confident that wider concerns are identified to the senior leaders are confident that wider concerns are identified to the senior leaders are confident to the senior leaders are confident to the senior leaders are identified to the senior leaders are confident to the senior leaders are identified to the senior leaders are confident to the senior leaders are confident to the senior leaders are identified to the senior leaders are confident to the senior leaders are confid</li></ul>	Green	aged	<ul> <li>F2SUG has direct access to senior leaders as required and has received good response to concerns raised.</li> </ul>
J. Leaders are connuent that while concerns are iden	itilieu anu mana	ayeu	
5.1 Senior leaders have ensured that the FTSU Guardian has ready access to applicable sources of data to enable them to triangulate speaking up issues to proactively identify potential concerns.	Green		<ul> <li>Speaking up Data reported quarterly to Exec Board</li> <li>Data on speaking up submitted quarterly to the National Guardian's office</li> </ul>

			Relevant HR data
5.2 The FTSU Guardian has ready access to senior leaders and others to enable them to escalate patient safety issues rapidly, preserving confidence as appropriate.	Green		<ul> <li>F2SUG has direct access to senior leaders as required</li> </ul>
6. Leaders receive assurance in a variety of forms			
6.1 Workers in all areas know, understand and support the FTSU vision, are aware of the policy and have confidence in the speaking up process.	Amber	<ul> <li>Full vision, strategy and plan yet to be completed and circulated – will work up a comms strategy to communicate these once finalised.</li> </ul>	<ul> <li>F2SU six monthly survey has identified an increase in staff's awareness of the role</li> </ul>
6.2 Steps are taken to identify and remove barriers to speaking up for those in more vulnerable groups, such as Black, Asian or minority ethnic (BAME), workers and agency workers	Green		<ul> <li>Cultural Ambassadors</li> <li>UHL BAME Voice Staff Network May 2018 quarterly F2SUG to attend these meetings</li> </ul>
6.3 Speak up issues that raise immediate patient safety concerns are quickly escalated	Green		<ul> <li>3636 staff concerns escalated to Director on Call</li> <li>F2SU concerns escalated to exec team</li> </ul>

6.4 Action is taken to address evidence that workers have been victimised as a result of speaking up, regardless of seniority	Green		<ul> <li>Quarterly data submitted to NGO highlights there has been no repercussions to staff from speaking up</li> <li>F2SUG actively monitors all staff concerns to ensure there is no detriment to staff from speaking up</li> </ul>
6.5 Lessons learnt are shared widely both within relevant service areas and across the trust	Amber	<ul> <li>F2SUG to disseminate this in CE Briefing from Aug 2018</li> <li>To ensure F2SU partners provide feedback on the themes and share the learning within their team meetings</li> </ul>	<ul> <li>F2SUG to report this quarterly to Trust Board to discuss the effectiveness of this</li> <li>From June 2018 data is submitted Clinical Management Group Assurance Performance Review Meeting</li> </ul>
6.6 The handling of speaking up issues is routinely audited to ensure that the FTSU policy is being implemented	Green	<ul> <li>3 yearly review of the Trusts Freedom to Speak Up: Raising Concerns (Whistleblowing) Policy</li> </ul>	<ul> <li>Freedom to Speak up: Raising Concerns (Whistleblowing) Policy was approved by Policy and Guideline Committee on 18.8.17 Trust Ref. A15/2001</li> <li>Consider building external review of our compliance with this template into the internal audit (PWC) programme</li> </ul>

			2019/20
6.7 FTSU policies and procedures are reviewed and improved using feedback from workers	Green	<ul> <li>3 yearly review of the Trusts Freedom to Speak Up: Raising Concerns (Whistleblowing) Policy</li> </ul>	<ul> <li>Freedom to Speak up: Raising Concerns (Whistleblowing) Policy was approved by Policy and Guideline Committee on 18.8.17 Trust Ref. A15/2001</li> </ul>
6.8 The board receives a report, at least every six months, from the FTSU Guardian.	Green		<ul> <li>From June 2018 data is submitted Clinical Management Group Assurance Performance Review Meeting</li> <li>F2SUG provides data quarterly to Executive Trust Board and Quality Outcomes Committee</li> <li>Quarterly report to go QOC</li> <li>Consider taking a staff story to Trust Board 2019</li> </ul>
7. Leaders engage with all relevant stakeholders			
7.1 A diverse range of workers' views are sought, heard and acted upon to shape the culture of the organisation in relation to speaking up; these are reflected in the	Amber	F2SUG and DSR working on model to achieve this – discuss this with new Chief Nurse once in post in	<ul> <li>Quality and Improvement Initiative across the wider trust will ensure the F2SU is part of the initiative</li> </ul>

FTSU vision and plan.		October	UHL BAME Voice Staff Network May 2018 quarterly F2SUG to attend these meetings
7.2 Issues raised via speaking up are part of the performance data discussed openly with commissioners, CQC and NHS Improvement.	Green		<ul> <li>Commissioners and NHSI have access to Board reports</li> <li>FTSUG met with CQC Inspectors on the 10/1/18 as part of the well-led inspection</li> </ul>
7.3 Discussion of FTSU matters regularly takes place in the public section of the board meetings (while respecting the confidentiality of individuals).	Green	<ul> <li>Quarterly F2SU report planned for 2018/2019 (in pubic part of the meeting)</li> </ul>	<ul> <li>F2SUG provides data quarterly to QOC (subcommittee of TB)</li> </ul>
7.4 The trust's annual report contains high level, anonymised data relating to speaking up as well as information on actions the trust is taking to support a positive speaking up culture.	Amber	<ul> <li>20198/19 annual report will include more data</li> </ul>	<ul> <li>Annual report and accounts of Leicester's Hospitals published in June 2018 includes F2SU information</li> </ul>
7.5 Reviews and audits are shared externally to support improvement elsewhere.	Green		<ul> <li>F2SUG provides data quarterly to Executive Trust Board</li> </ul>
7.6 Senior leaders work openly and positively with regional FTSU Guardians and the National Guardian to continually improve the trust's speaking up culture	Green		<ul> <li>F2SUG provides data quarterly to Executive Trust Board</li> <li>National Guardian attended Trust September 2017</li> <li>F2SUG attends regional and national meeting</li> </ul>

7.7 Senior leaders encourage their FTSU Guardians to develop bilateral relationships with regulators, inspectors and other local FTSU Guardians	Green		<ul> <li>F2SUG attends Regional meetings quarterly and annual national conference</li> <li>FTSUG met with CQC Inspectors on the 10/1/18 as part of the well-led inspection</li> <li>F2SUG provides data quarterly to QOC (subcommittee of TB)</li> </ul>
7.8 Senior leaders request external improvement support when required.	Green		<ul> <li>External reviews have been requested for complex cases (e.g Dermatology services, OMFS, Haemoglobulinopathy service</li> </ul>
8. Leaders are focused on learning and continual imp	provement		
8.1 Senior leaders use speaking up as an opportunity for learning that can be embedded in future practice to deliver better quality care and improve workers' experience.	Amber	<ul> <li>F2SUG to disseminate this in CE Briefing from October 2018</li> <li>To ensure F2SU partners provide feedback on the themes and share the learning within their team meetings</li> </ul>	<ul> <li>F2SUG to report this quarterly to Trust Board to discuss the effectiveness of this</li> <li>From June 2018 data is submitted Clinical Management Group Assurance Performance Review Meeting</li> <li>Trust plan to participate in NHSi Quality Improvement initiative</li> </ul>

8.2 Senior leaders and the FTSU Guardian engage with other trusts to identify best practice.	Green		<ul> <li>F2SUG attends Regional meetings quarterly and annual national conference to share best practice</li> <li>F2SUG has monthly supervision with the LPT F2SUG</li> <li>Monthly drop ins with F2SUG for LPT and Head of Chaplaincy to show collaborative working</li> </ul>
8.3 Executive and non-executive leads, and the FTSU Guardian, review all guidance and case review reports from the National Guardian to identify improvement possibilities.	Green		<ul> <li>F2SUG provides data quarterly to Executive Trust Board and Quality Outcomes Committee</li> <li>Guidance from National Guardians Office referenced in reports and circulated as required.</li> </ul>
8.4 Senior leaders regularly reflect on how they respond to feedback, learn and continually improve and encourage the same throughout the organisation.	Amber	<ul> <li>F2SUG to disseminate this in CE Briefing from Aug 2018</li> <li>To ensure F2SU partners provide feedback on the themes and share the learning within their team meetings</li> </ul>	<ul> <li>F2SUG to report this quarterly to Trust Board to discuss the effectiveness of this</li> <li>From June 2018 data is submitted Clinical Management Group Assurance Performance Review Meeting</li> </ul>

8.5 The executive lead responsible for FTSU reviews the FTSU strategy annually, using a range of qualitative and quantitative measures, to assess what has been achieved and what hasn't; what the barriers have been and how they can be overcome; and whether the right indicators are being used to measure success.	Amber	The DSR will     incorporate this into     wider quality and     safety learning,     triangulating F2SU     data with other     information sources.	<ul> <li>DSR writing with colleagues to produce vision, strategy and plan, this will be part of the Trust's Quality and Improvement Initiative.</li> </ul>
8.6 The FTSU policy and process is reviewed annually to check they are fit for purpose and realistic; up to date; and takes account of feedback from workers who have used them.	Green		<ul> <li>Freedom to Speak up: Raising Concerns (Whistleblowing) Policy was approved by Policy and Guideline Committee on 18.8.17 Trust Ref. A15/2001</li> </ul>
<ul> <li>8.7 A sample of cases is quality assured to ensure:</li> <li>the investigation process is of high quality; that outcomes and recommendations are reasonable and that the impact of change is being measured</li> <li>workers are thanked for speaking up, are kept up to date though out the investigation and are told of the outcome</li> </ul>	Amber	<ul> <li>DSR, F2SUG, NED to review quality of investigation</li> <li>Review 2 cases by December 2018</li> </ul>	<ul> <li>F2SUG monitors and reviews and chases all staff concerns</li> </ul>
<ul> <li>Investigations are independent, fair and objective; recommendations are designed to promote patient safety and learning; and change</li> </ul>			

will be monitored			
8.8 Positive outcomes from speaking up cases are promoted and as a result workers are more confident to speak up.	Amber	DSR and F2SUG considering how we can best achieve this – consideration given to using F2SU staff stories at the Board	<ul> <li>F2SU partners to provide feedback on the themes and share the learning within their team meetings</li> </ul>
9. Individual responsibilities			
Chief executive and chair			
9.1 The chief executive is responsible for appointing the FTSU Guardian.	Green		<ul> <li>Focus groups held prior to the F2SUG commenced in post</li> <li>External candidate successful appointed Feb 2017</li> </ul>
9.2 The chief executive is accountable for ensuring that FTSU arrangements meet the needs of the workers in their trust.	Green		<ul> <li>F2SUG meets monthly with CE to discuss concerns raised.</li> <li>F2SUG to report this quarterly to Trust Board to discuss the effectiveness of this</li> <li>From June 2018 data is submitted Clinical Management Group Assurance Performance</li> </ul>

	Review Meeting
Green	Annual report 2017/2018     includes F2SU
Green	<ul> <li>F2SUG attends Regional meetings quarterly and annual national conference.</li> <li>Information from the National Guardian Office is included in quarterly reports so the Trust Board are aware of recent initiatives.</li> </ul>
Green	<ul> <li>F2SUG meets monthly with the CE and has direct access to the CE</li> <li>F2SUG undertakes monthly safety walkabouts in the chairman</li> </ul>
-	Green

10.1 Ensuring they are aware of latest guidance from National Guardian's Office.	Green	Guidance from National     Guardians Office referenced in     reports and circulated as     required.
10.2 Overseeing the creation of the FTSU vision and strategy.	Green	<ul> <li>Exec Leads were part of the interview panel for the post</li> <li>Quarterly meetings with Director of HR, Director of Safety and Risk and the Non-Executive Director</li> </ul>
10.3 Ensuring the FTSU Guardian role has been implemented, using a fair recruitment process in accordance with the example job description and other guidance published by the National Guardian.	Green	<ul> <li>Focus groups held prior to F2SUG commencing in post</li> <li>Stakeholder interviews held</li> <li>External candidate appointed</li> </ul>
10.4 Ensuring that the FTSU Guardian has a suitable amount of ring fenced time and other resources and there is cover for planned and unplanned absence.	Green	<ul> <li>Appointed a full time F2SUG</li> <li>Director of Safety of Risk covers leave</li> </ul>

10.5 Ensuring that a sample of speaking up cases have been quality assured.	Amber	<ul> <li>DSR, F2SUG, NED to review quality of investigation</li> <li>Review 2 cases by December 2018</li> </ul>	F2SUG monitors and reviews and chases all staff concerns
10.6 Conducting an annual review of the strategy, policy and process.	Green		<ul> <li>Freedom to Speak up: Raising Concerns (Whistleblowing) Policy was approved by Policy and Guideline Committee on 18.8.17 Trust Ref. A15/2001</li> </ul>
10.7 Operationalising the learning derived from speaking up issues.	Amber	<ul> <li>Triangulate this with other data and incorporate this into the Trust's Quality Strategy</li> </ul>	<ul> <li>F2SY Guardian's dashboard clearly details actions taken from concerns raised and issues raised to Trust committees</li> </ul>
10.8 Ensuring allegations of detriment are promptly and fairly investigated and acted on.	Green		<ul> <li>Quarterly data submitted to NGO highlights there has been no repercussions to staff from speaking up</li> </ul>

10.9 Providing the board with a variety of assurance about the effectiveness of the trusts strategy, policy and process.	Green		<ul> <li>F2SUG to report this quarterly to Trust Board to discuss the effectiveness of this</li> <li>From June 2018 data is submitted Clinical Management Group Assurance Performance Review Meeting</li> </ul>
11. Non-executive lead for FTSU			
11.1 Ensuring they are aware of latest guidance from National Guardian's Office.	Green		<ul> <li>Quarterly meetings with Director of HR, Director of Safety and Risk and the Non-Executive Director</li> <li>Guidance from National Guardians Office referenced in reports and circulated as required.</li> </ul>
11.2 Holding the chief executive, executive FTSU lead and the board to account for implementing the speaking up strategy.	Amber	The Quality and Outcomes Committee (sub-committee of Trust Board) will track and monitor this through quarterly reports	<ul> <li>F2SUG to report this quarterly to Trust Board</li> <li>From June 2018 data is submitted Clinical Management Group Assurance Performance Review Meeting</li> </ul>

11.3 Robustly challenge the board to reflect on whether it could do more to create a culture responsive to feedback and focused on learning and continual improvement.	Green	F2SUG to report this quarterly to Trust Board
Role-modelling high standards of conduct around FTSU.	Green	F2SUG to report this quarterly to Trust Board to discuss the effectiveness of this
Acting as an alternative source of advice and support for the FTSU Guardian.	Green	Quarterly meetings with Director of HR, Director of Safety and Risk and the Non-Executive Director
Overseeing speaking up concerns regarding board members.	Green	<ul> <li>No concerns raised with regards to board members at this time however FSUG has link to the Non-Executive link to F2SU therefore would discuss concerns with the non-exec link.</li> </ul>
Human resource and organisational development dir	ectors	
Ensuring that the FTSU Guardian has the support of HR staff and appropriate access to information to enable them to triangulate intelligence from speaking up issues with other information that may be used as measures of	Green	Open access to HR team

FTSU culture or indicators of barriers to speaking up.			
Ensuring that HR culture and practice encourage and support speaking up and that learning in relation to workers' experience is disseminated across the trust.	Amber	<ul> <li>F2SUG to disseminate this in CE Briefing from Aug 2018</li> <li>To ensure F2SU partners provide feedback on the themes and share the learning within their team meetings</li> </ul>	<ul> <li>F2SUG to report this quarterly to Trust Board to discuss the effectiveness of this</li> <li>From June 2018 data is submitted Clinical Management Group Assurance Performance Review Meeting</li> </ul>
Ensuring that workers have the right knowledge, skills and capability to speak up and that managers listen well and respond to issues raised effectively.	Amber	<ul> <li>Audit this in 2019</li> <li>Actively seek feedback from staff who have raised concerns</li> <li>Pay attention to the F2SU section of staff exit interviews</li> </ul>	<ul> <li>The 5 steps initiative promoted by the F2SUG enables managers to respond to staff concerns in a positive manner.</li> <li>The F2SUG has proactively promoted the role across the Trust and will continue to do so, six monthly surveys will enable the trust to continue to monitor this.</li> </ul>
Medical director and director of nursing			

Ensuring that the FTSU Guardian has appropriate support and advice on patient safety and safeguarding issues.	Green		<ul> <li>F2SUG has open access to the exec team</li> </ul>
Ensuring that effective and, as appropriate, immediate action is taken when potential patient safety issues are highlighted by speaking up.	Green		<ul> <li>3636 staff concerns escalated to Director on Call</li> <li>F2SU concerns escalated to exec team</li> </ul>
Ensuring learning is operationalised within the teams and departments that they oversee.	Amber	<ul> <li>F2SUG to disseminate this in CE Briefing from Aug 2018</li> <li>To ensure F2SU partners provide feedback on the themes and share the learning within their team meetings</li> </ul>	<ul> <li>F2SUG to report this quarterly to Trust Board to discuss the effectiveness of this</li> <li>From June 2018 data is submitted Clinical Management Group Assurance Performance Review Meeting</li> </ul>