



MEETING TITLE Trust Board meeting (held in Public)		MEETING DATE 01/11/2022	
TITLE of PAPER	Freedom to Speak Up – Bi-annual Report 2022/23	PAPER REF	2.2
KEY PRIORITIES	Safe and Sustainable: Provide a safe, effective, caring and sustainable service for all patients Best People: Attract, develop and retain a highly skilled, engaged and diverse workforce		
PURPOSE OF THE PAPER	The purpose of the paper is to provide the Trust Board with an update for the first 6 months of 2022/23, to share the learning identified and to provide an update on the response of YAS to recently published national developments and guidance.		
For Approval	<input type="checkbox"/>	For Assurance	<input checked="" type="checkbox"/>
For Decision	<input type="checkbox"/>	Discussion/Information	<input checked="" type="checkbox"/>
AUTHOR / LEAD	Steve Page, Director of Transition	ACCOUNTABLE DIRECTOR	Steve Page, Director of Transition
DISCUSSED AT / INFORMED BY – Monthly meetings with the FTSU Guardian, the Head of Investigations & Learning and members of the Executive Team including the CEO. Quarterly Quality Committee and Audit Committee reports			
PREVIOUSLY AGREED AT:	Committee/Group: Audit Committee	Date: 18 October 2022	
RECOMMENDATION(S)	It is recommended that the Board: <ul style="list-style-type: none"> • Notes the contents of this report • Receives assurance on the actions taken and supports proposals for further development. 		
RISK ASSESSMENT		Yes	No
Corporate Risk Register and/or Board Assurance Framework amended <i>If 'Yes' – expand in Section 4. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Equality Impact Assessment <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Resource Implications (Financial, Workforce, other - specify) <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Legal implications/Regulatory requirements <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
ASSURANCE/COMPLIANCE			
Care Quality Commission Choose a DOMAIN(s)		All All	
NHSI Single Oversight Framework Choose a THEME(s)		2. Quality of Care (safe, effective, caring, responsive) 6. Leadership & Improvement Capability (Well-Led)	

Board of Director Meeting (held in Public)

1 November 2022

Freedom to Speak up Bi-annual Report 2022/23

1. PURPOSE/AIM

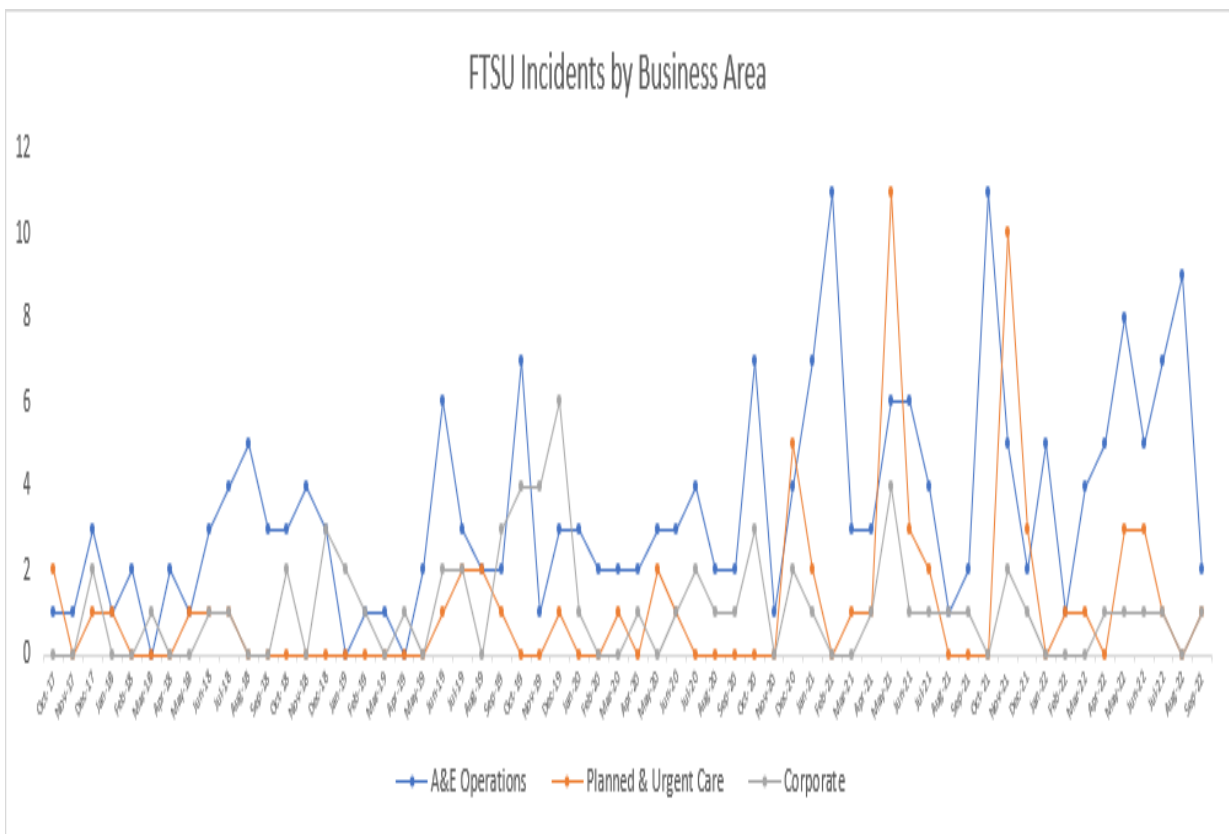
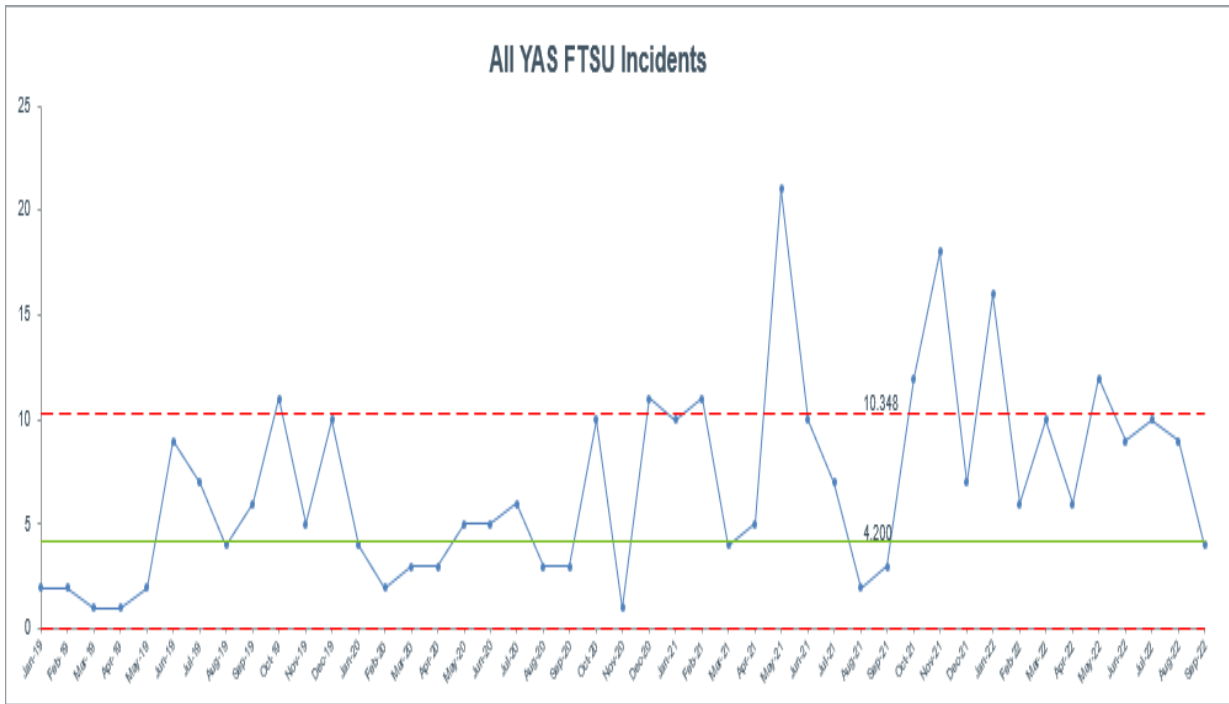
- 1.1 The purpose of the paper is to provide the Audit Committee with an update for the first 6 months of 2022/23, to share the learning identified and to provide an update on the response of YAS to recently published national developments and guidance.

2. BACKGROUND/CONTEXT

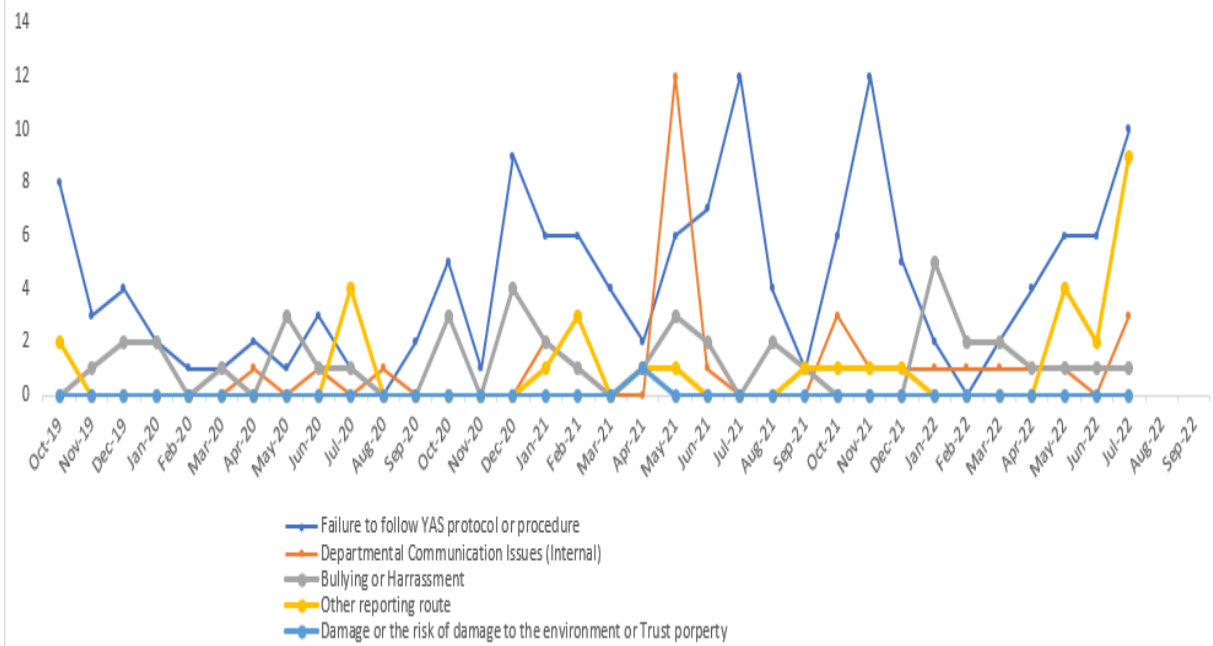
- 2.1 Freedom to Speak Up (FTSU): An independent review into creating an open and honest reporting culture in the NHS (Francis) was published in February 2015. The aim of the review was to provide advice and recommendations to ensure that NHS staff would feel safe to raise concerns, confident that they will be listened to, and the concerns will be acted upon.
- 2.2 Yorkshire Ambulance Service (YAS) NHS Trust implemented the recommendations set out in the Freedom to Speak Up Review in 2016.
- 2.3 The process for managing concerns raised via FTSU has been subject to continuous improvement since its initial launch, to ensure a focus on effective learning and improvement.
- 2.4 All NHS Trusts in England are required by the National Guardian's Office (NGO) to submit brief details of all concerns raised through the FTSU process. This provides an opportunity to compare YAS FTSU activity with other Trusts.

3. CONCERNS QUARTERS 1 AND 2 2022/23

- 3.1 This report covers those concerns raised over the first six months of the year (1st April 2022 – 30 September 2022).
- 3.2 During this period, 43 concerns were raised and logged on the Datix system. These are presented in the below graph, broken down by reporting category. The most recent comparative data published by the National Guardian's Office in for Q1 2022/23. The Trust is mid-range for numbers of cases reported in NHS ambulance Trusts.



FTSU Incidents by sub-category



3.3 The following table provides a summary of the issues raised and their management plan. The issues remain live on the FTSU log until assurance is received by the FTSU Guardian on follow up action and feedback. The FTSU Guardian remains in contact with the person raising the concern until closure.

Department	Issue	Action Outcome
A&E Operations		
Departmental Communication issues	<ul style="list-style-type: none"> Concern that the Team Leader is on the opposite side to some of their team members. Team leader unable to access next of kin details on ESR in an emergency 	Referred to Ops management for action. Referred to HR
A&E Operations Bullying and Harassment	<ul style="list-style-type: none"> Lack of support for colleagues and fear of reprisal 	Referred to Ops management.
Failure to follow policy or procedure	<ul style="list-style-type: none"> LAT crews (2 separate concerns) being asked to work outside their scope of practice. 	Referred to A/E ops management and EOC management.
Failure to follow policy or procedure	<ul style="list-style-type: none"> Allegation that some members of staff facing a disciplinary process are resigning before they attend the panel. 	Referred to HR for further review
Failure to follow policy or procedure	<ul style="list-style-type: none"> Concern that there has not been any improvement in management behaviours after a restructure 	Referred to Ops management team and HR
Leadership and culture	<ul style="list-style-type: none"> Member of staff asked by Team Leader to crew up with another member of staff because of sexual orientation 	Referred to HR and Ops management/ Diversity and Inclusion Lead made aware
Staff welfare - failure to follow policy or procedure	<ul style="list-style-type: none"> Lack of adequate support/inconsistency of support for NQPs (4 separate concerns) <ul style="list-style-type: none"> Not enough hours afforded to work with a senior paramedic Reporter feels like cheap labour having to work as a paramedic with little paramedic shift support and less pay than senior paramedics No clinical hub support when making decision to leave patients at home 	Referred to Ops management team and Associate Director Paramedic Practice. Review meeting to be arranged to consider issues in detail.
Failure to follow policy or procedure	<ul style="list-style-type: none"> Concern that there is no asset register for some items of equipment that is used by the community first responders 	Referred Ops Management
Failure to follow policy or procedure	<ul style="list-style-type: none"> Concerns that some members of staff are abusing the special leave policy 	Referred to HR
	<ul style="list-style-type: none"> Concern that shortlisting process was influenced by personal views 	Referred to HR – process for the post reviewed

Department/category	Issue	Action Outcome
A&E Operations		
Staff welfare	<ul style="list-style-type: none"> Worried about staff welfare following the death of a work colleague 	Referred to Health and wellbeing and A/E Ops management
Staff welfare	<ul style="list-style-type: none"> Concerns about alleged increased alcohol dependency by staff who are struggling to cope 	Referred to H&WB and Ops management
Staff welfare	<ul style="list-style-type: none"> Concern that PIC process not working as intended and staff responding to trauma cases not getting support needed 	Referred to Ops management team
Staff welfare	<ul style="list-style-type: none"> Alleged inappropriate behaviour by a hospital security personnel towards ambulance female crews 	Referred to Ops management team
Staff welfare	<ul style="list-style-type: none"> Concerns about an alleged inhuman rota and that management were not listening 	Referred to Ops management team and to HR
Staff welfare	<ul style="list-style-type: none"> Concerns about several colleagues now resorting to food handouts from colleagues 	Referred to Health and wellbeing
Integrated Urgent Care		
Failure to follow policy or procedure	<ul style="list-style-type: none"> Inappropriate access of a staff member's medical record 	Referred to IUC management
Failure to follow policy or procedure	<ul style="list-style-type: none"> No clear fire procedure, concern that team leader on duty seemed uninterested when alarm was raised by colleagues about potential fire 	Referred to IUC management
Staff welfare	<ul style="list-style-type: none"> Issues relating to real time adherence, staff allegedly wrongly placed out of code (2 separate concerns) 	Referred to IUC transformation Prog
Failure to follow policy or procedure	<ul style="list-style-type: none"> Individual not working full shift times and potentially abusing system 	Referred to IUC management
Patient Transport Service		
Departmental communication	<ul style="list-style-type: none"> Concerns about lack of a patient elevator lift card at the Royal Hallamshire Hospital when private ambulance have access to lift cards 	Signposted to the PTS management team.
Corporate and Support Services		
Bullying and Harassment	<ul style="list-style-type: none"> Member of staff feels discriminated because of race 	Referred to HR for action.
Leadership and culture	<ul style="list-style-type: none"> Concern about culture in department 	Reviewing current information and previous interventions to inform response
Leadership and culture	<ul style="list-style-type: none"> Member of staff feels discriminated against; lack of progression due to race 	Referred to HR for follow up
Leadership and culture	<ul style="list-style-type: none"> Concerns about detrimental treatment after raising concerns with manager, claims of racial discrimination 	Referred to HR/ ongoing HR process

4. KEY THEMES

- 4.1 There is a continued theme relating to team culture and leadership behaviour in some areas. The Trust values and behaviours, developed with extensive staff engagement, are well recognised by staff and continue to underpin the action on this and other themes. The *Say Yes to Respect* campaign was launched before the Pandemic and is being used as part of the response with specific teams in the current year.
- 4.2 In a small number of cases, concerns raised, triangulated with other available information, have identified a need for targeted independent reviews in specific work areas. No new reviews have been commissioned in the last quarter. Management teams are receiving support for implementation of recommendations from previous reviews from the HR and OD team. Discussions are under way to strengthen the ongoing follow up and assurance of completed reviews and action plans via the targeted culture work programme led by the OD team.
- 4.3 There have been several alleged racial FTSU concerns over the last year with 3 concerns being recorded in this period, this theme has been shared with directors and senior managers. Issues are also being considered on a broader level alongside the findings and recommendations from a recently completed independent review in the South Yorkshire operational area.
- 4.4 The issues raised relating Newly Qualified Paramedics have been raised with the Operations management team and Associate Director of Paramedic Practice and follow up work is ongoing. A meeting is being arranged to review the issues raised and plans for development in more detail. It has been agreed that there will be a deep dive into the issues in Quality Committee.
- 4.5 It was agreed in Audit Committee that additional Quality Committee time should be scheduled to enable more detailed scrutiny and assurance on the learning and action arising from the targeted reviews and OD support. This would include a focus on the anticipated outcomes of planned interventions.

5. PROMOTING FREEDOM TO SPEAK UP

- 5.1 A communication campaign is in progress relating to Freedom to Speak Up and the value of speaking up. This includes publication of new explanatory material for staff and leaders and more information to highlight the value in learning and improvement.
- 5.2 The updated guidance is being supplemented by a programme of direct discussions with departmental leadership teams to reinforce the positive value and address any challenges or concerns. To-date this has included bespoke sessions with A&E Operations, PTS, EOC, and Fleet, Estates and Facilities. Further sessions are planned with Fleet, Estates and Facilities, IUC and the Academy training team following initial discussion with department heads.
- 5.3 The FTSU Guardian has also undertaken a series of station visits across North Yorkshire.

- 5.4 October is national Freedom to Speak Up month. Internal materials are being prepared and these will be promoted during the month alongside national content produced by the NGO for the event. This includes an overarching theme of 'Freedom to Speak Up is for Everyone', with sub-themes relating to speaking up for safety, civility and inclusion.

6. FREEDOM TO SPEAK UP DEVELOPMENTS

- 6.1 Getting feedback is important to ensure that we improve our FTSU processes, and a questionnaire is sent out to reporters when their concern is closed. Previous feedback has highlighted the importance to staff raising concerns of ongoing contact with the FTSU Guardian and updates on progress, particularly if the process of resolution is complex or lengthy. No new issues have been raised in feedback in this period.
- 6.2 The Trust has submitted information for the national ambulance sector FTSU review being conducted by the National Guardian's Office. The next phase of the review will involve direct interviews with Trust personnel at selected sites and at present it does not appear that YAS will be involved in this phase. The National Guardian's Office have however, asked if the Trust can facilitate an opportunity for some of their team to shadow YAS staff to support their contextual understanding as part of the review process.
- 6.3 The FTSU Guardian stepped down from the role in September 2022 to take up a similar post in an acute Trust. Recruitment of a new FTSU Guardian has been completed. The Trust will notify the National Guardian's Office of the new appointee, so they can access the formal training and Guardian registration process. An exit interview was conducted with the outgoing Guardian and this will be considered in detail to identify any learning for the future.
- 6.4 There will be a short period before the new FTSU Guardian comes into post. During this period staff will be reminded of the other routes available on the FTSU route map and arrangements will be made for the FTSU ambassadors to meet the Director Lead for FTSU on a regular basis for assurance and escalation of concerns where required.

7. NEXT STEPS

- 7.1 In line with previous quarters, FTSU concerns continue to be discussed at regular meetings involving the senior leadership team to allow all cases to be reviewed in an open forum and appropriate actions taken in response.
- 7.2 Cases presenting a direct risk or significant learning for patient safety will be raised via the Incident Review Group (IRG) for consideration of appropriate steps which may include inclusion on the Trust risk register. The FTSU team is continuing to support the wider Trust work to strengthen the triangulation of organisational feedback on cultural issues to inform future development priorities.
- 7.3 Additional Quality Committee time will be scheduled for assurance on learning and action arising from the targeted reviews and OD support initiated through the FTSU process.

8. RECOMMENDATIONS

8.1 It is recommended that the Board:

- Note the contents of this report; and
- Receive# assurance on the actions taken and supports proposals for further development.