

## Board of Directors Meeting: 14 November 2024

<b>Agenda item</b>	163/24		
<b>Report Title</b>	Freedom to Speak Up (FTSU) Report Q2 2024-25		
<b>Executive Lead</b>	Anna Milanec, Director of Governance		
<b>Report Author</b>	Helen Turner, FTSU Lead Guardian		
<b>CQC Domain:</b>	<b>Link to Strategic Goal:</b>		<b>Link to BAF / risk:</b>
Safe		Our patients and community	
Effective		Our people	
Caring		Our service delivery	<b>Trust Risk Register id:</b>
Responsive		Our governance	
Well Led	√	Our partners	
<b>Consultation Communication</b>	N/A		
<b>Executive summary:</b>	<p>The following report provides the FTSU update for Quarter 2 2024/25</p> <p>48 contacts were made to FTSU in Q2, which is a 28% decrease on the previous quarter. However the number of actual concerns are consistent with Q1.</p> <p>As per NGO guidance, we continue as we started in Quarter 1, recording our data with themes as 'an element of', so one concern can have multiple elements of the recording categories.</p> <p>Recording themes in this way has highlighted worker safety and wellbeing as our most recorded category in both Quarter 1 and Quarter 2, followed by inappropriate attitudes and behaviour.</p> <p>For all professions, Worker, Safety and Wellbeing is the most recorded category.</p>		
<b>Recommendations for the Board:</b>	The Board is asked to note the report.		
<b>Appendices:</b>	Appendix 1: Feedback		

## 1. Assessment of issues including themes and trends

In Quarter 1 SaTH received 48 contacts through the FTSU mechanism. This has decreased by 28% from the previous quarter.

Contacts versus concerns is contained in the table below.

Qtr. 2 July – September 24	
Number of Contacts	48
Number of Concerns	44

The previous 5 year's contacts are contained in the table below to enable quarter and year on year comparison.

	Q1	Q2	Q3	Q4	Total	Increase/Decrease	National Increase
2024/25	67	48	NA	NA	<b>115</b> (Q1, Q2)	NA	NA
2023/24	47	52	68	50	<b>217</b>	↓23%	↑27.6%
2022/23	72	73	76	59	<b>282</b>	↓23%	↑25%
2021/22	100	113	90	66	<b>369</b>	↑18%	0%
2020/21	41	82	103	78	<b>302</b>	↑208%	26%

**Table 1: Contacts made to FTSU since reporting began**

The NGO requires all Trusts to submit their data to the national portal following the close of a quarter and is submitted in the following categories. At SaTH we also record an additional category of policies, procedures, and processes and is also included in the table below.

**Please note: In Quarter 1 we have also begun to record our data, as per NGO guidance, which asks us to record it as 'an element of', so one concern can have multiple elements of the categories below.**

Category	Q3	Q4	Q1	Q2
	23/24	23/24	24/25	24/25
Bullying and Harassment	5	4	6	10
Patient Safety	7	10	17	9
Worker Safety or Wellbeing	11	4	49	34
Attitudes and behaviours	27	13	36	30
Policies, Processes and Procedures	16	14	31	14
Unknown	2	5	3	1
Other	0	0	3	1
Anonymously	2	0	1	1
Detriment	0	4	1	3

**Table 2: NGO reporting category themes**

## Concerns raised by profession

Professional Group	Qtr3	Qtr4	Qtr1	Qtr2
	(23/24)	(23/24)	(24/25)	(24/25)
Nursing and midwifery registered	17	13	17	14
Administrative and clerical	26	12	12	10
Estates and ancillary	1	2	4	2
Additional Clinical Services	6	9	23	7
Medical and dental	6	1	2	7
Allied Health Professionals	5	7	6	2
Not known/Other	2	5	3	4
Healthcare scientists	3	1	0	2
Additional professional scientific and technical	2	0	0	0
<b>Total</b>	<b>68</b>	<b>50</b>	<b>67</b>	<b>48</b>

**Table 3: Shows professional groups of people raising concerns**

## Analysis of themes and professional groups

In Quarter 2 due to the new way of recording, the category, worker safety and wellbeing was the most recorded theme in all professions

At a more granular level the contacts were about:

- 6 x colleague relationships – disputes/managing difficult conversations/cliques/recurrent issues on a ward despite cultural review and actions following this.
- 4 x bullying by management
- 5 x inadequate support/training/equipment to carry out role
- 4 x poor management
- 3 x contacts from outside the organisation
- 2 x rota issues unresolved and impacting on HWB
- 3 x health safety issues for patient and staff
- 2 x using non-English on wards/areas when in a professional situation
- 2 x bank staff in acute areas targeted to blame when things go wrong.
- 17 x a mix of issue

## Discrimination

We have now begun to record 'does the concern contain elements of discrimination' under the nine protected characteristics. In Quarter 2, six were recorded, one under disability and five under race. Concerns recorded under this category are also taken and recorded for action at a weekly discrimination group meeting.

## Escalation and signposting

In Quarter 2 we have begun to record what happens to the concerns colleagues come to FTSU with. In general signposting is to HR or line manager and we have seen a theme in Quarter 2 of colleagues contacting us because they did not know where to go with their concern.

Escalated	24
Signposted	16
No action	8

5 signposted contacts are open, 14 escalated contacts are open

## Staff Contract

In 24/25 we began to record colleagues, contractual status when speaking up, to give a better idea of who was accessing FTSU. Quarter 2 figures are shown below

<b>Contract Type</b>	<b>Number</b>
Substantive	37
Not Known	6
Other	2
Bank	2
Locum	1

**Table 4: Contract Type**

## Detriment

In Quarter 2 there were three reports of detriment, all associated with colleagues raising concerns directly to line managers and then contacting FTSU to report the detriment.

## Triangulation of Data

Primarily, triangulation of FTSU data has been through informal meetings e.g. monthly 121s with HRBPs/senior leaders etc. In 24/25 progress has been made, making it a more formal process with data themes provided to Divisions for their monthly ER reports and the start of the PSIRF triangulation group using the SEIPS framework. This group is at an early stage, but the ambition is to formally report the findings through to Quality Assurance Committee.

## Contacts Per Division

<b>Divisions</b>	<b>Q3</b>	<b>Q4</b>	<b>Q1</b>	<b>Q2</b>
MEC	9 (13%)	19 (38%)	34 (51%)	19(40%)
SACC	18 (26%)	10 (20%)	11 (16%)	10 (21%)
Corporate	23 (34%)	8 (16%)	12 (18%)	5 (10%)
CSS	8 (12%)	5 (10%)	6 (9%)	7(15%)
W&C	8 (12%)	4 (8%)	2 (3%)	2 (4%)
Unknown/Other	2 (3%)	4 (8%)	2 (3%)	5 (10%)
<b>Total</b>	<b>68</b>	<b>50</b>	<b>67</b>	<b>48</b>

**Table 5: Contacts by Division shown by number and proportionality.**

We continue to see MEC having the highest percentage of concerns come to FTSU and a significant decrease from corporate colleagues.

## Open/Closed Contacts

Concerns in previous years remain open despite progress in each quarter to reduce and close those open. The Q1 report provided a comprehensive assessment of where the open concerns were from.

## 2021/2022

	<b>Qtr1</b>	<b>Qtr2</b>	<b>Qtr3</b>	<b>Qtr4</b>
<b>Contacts</b>	<b>21/22</b>	<b>21/22</b>	<b>21/22</b>	<b>21/22</b>
Open	0	0	4	0
Closed	101	112	86	66

## **2022/2023**

	<b>Qtr1</b>	<b>Qtr2</b>	<b>Qtr3</b>	<b>Qtr4</b>
<b><u>Contacts</u></b>	<b>22/23</b>	<b>22/23</b>	<b>22/23</b>	<b>22/23</b>
Open	1	12	12	0
Closed	70	61	67	59

At the last report there were 32 open contacts equating to 7 open cases in 21/22 and 22/23. As of writing at 30<sup>th</sup> October this has now decreased to 29 open contacts equating to 5 open cases.

## **2023/2024**

	<b>Qtr1</b>	<b>Qtr2</b>	<b>Qtr3</b>	<b>Qtr4</b>
<b><u>Contacts</u></b>	<b>23/24</b>	<b>23/24</b>	<b>23/24</b>	<b>23/24</b>
Open	0	2	9	5
Closed	47	50	59	45

At the last report in August there were 26 open contacts equating to 22 open concerns. Since the last report in May, open contacts have been reduced by 16, equating to 11 open concerns.

## **2024/2025**

	<b>Qtr1</b>	<b>Qtr2</b>	<b>Qtr3</b>	<b>Qtr4</b>
<b><u>Contacts</u></b>	<b>24/25</b>	<b>24/25</b>	<b>24/25</b>	<b>24/25</b>
Open	19	19	NA	NA
Closed	48	29	NA	NA

Of the 38 open contacts in 2024/25 these equate to 23 open cases.

## **Days taken to close the concerns in Q2**

The table below shows the breakdown in Quarter 2 of the length of time taken to close concerns. At the time of writing, only one concern is still open at 14 weeks in comparison to Quarter 1 which had 27 contacts open over 14 weeks.

<b>Length of time taken with contacts</b>		
<b>Number of weeks</b>	<b>Closed contacts</b>	<b>Open contacts</b>
0-2	17	4
2-4	6	2
4-6	2	0
6-8	2	3
8-10	2	3
10-12	0	6
>14	0	1

Of the 19 contacts open this equates to 16 separate cases

## **2.0 Action taken to improve FTSU Culture**

## 1. Mandatory Training

In June 2022, Shrewsbury and Telford Hospital were one of the first Trust's in the country to mandate FTSU online training. Compliance rates are encouraging and each quarter there is a steady increase. The FTSU team are working with the Education Team to increase compliance of all FTSU training modules to 90%.

At 10<sup>th</sup> October 2024 the compliance rate for all modules stands at:

<b>FTSU Online Training</b>	<b>% Completion Q2 2024</b>
FTSU – Core – Training for all Workers	92.21/% ↑ 0.23%
FTSU – Listen Up – Training for all Managers	79.87% ↓ 1.53%
FTSU – Follow Up – Training for Senior Leaders	65% → 65%

FTSU is now part, as custom and practice, of various forums; inductions; leadership programmes; therefore, the list which was routinely included will no longer appear in this report. Going forward the quarterly reports now include a comprehensive improvement action plan and all actions taken on improvement are recorded there.

## **3.0 National Picture**

In September 2024, the report 'Independent Investigation of the National Health Service in England' by Lord Darzi was published some of the findings were immediately recognisable particularly around waiting times, the state of A&E, staff disengagement. Consequently, a further 'Review of patient safety across the health and care landscape' has been commissioned into six bodies including the National Guardians Office

*"The primary task of this review is to assess whether the current range and combination of organisations delivers effective leadership, listening, learning (including investigations and their recommendations) and regulation to the health and care systems in relation to patient and user safety (and to what extent they focus on the other domains of quality). Based on this assessment, the review should make recommendations on whether greater value could be achieved through a different approach or delivery model."*

## **4.0 Recurrence of themes**

At the September 2024 Board, the Chair asked, 'are their themes that reoccur' the FTSU Lead concurred with this statement and committed to bringing back a commentary on the issue.

Since 2020 much work has been done to improve our Trust in all areas resulting in an improved CQC rating, much improved staff survey results and other indicators of improvement. However, through the FTSU we continue to see a reoccurrence of themes, which are listed below:

1. As a Trust we are good at asking people to speak up, but our responses can be inconsistent, and the success of resolution can depend on who the concern is escalated to and the timeliness of feedback.
2. The length of time to resolve issues can be lengthy as per the open cases in previous years and there can be good reason for this but too often it is because 'we run out of steam' whilst dealing with them or 'too hard to solve'.
3. We don't always tackle the root cause, for example, the persistent offender or tackle the issue robustly, instead we work around the edge, for example commissioning a cultural review

instead of managing individuals' performance or behaviours. Consequently, those areas/names reoccur again and again.

4. Cultural reviews/transformation programmes – a lot of work goes into these, however feedback from the ground tells us interventions aren't necessarily being felt or are taking too long.
5. Relationships in work are important and all too often we see intractable breakdowns in relationships which if dealt with promptly would not have got out of hand.
6. Managers reluctant 'to do' people management and the resulting poor culture in teams
7. Barriers to addressing the basics, such as breaks, resources, capacity, allowing people to do their job.
8. The perception that voices aren't heard even when they speak up.
9. The perception of being penalised when speaking up and the ripple effect on the entire team.

Staff, at all levels, feeling that they have a voice and are heard is a fundamental element of a great and safe organisation. It is also key to reengaging our colleagues who for the most part want to come to work to do a really good job.

### **Key Performance Indicators at Q2**

1. **Our Cultural Dashboard achieves a 3% increase year on year in all themes.**

In 23/24 the dashboard increased by 4.5% overall – individual scores underneath

2. **Sickness absence rate is below 4%**

Up to September 2024 – 4.9%

3. **People turnover is below threshold of 14.1%**

Up to September 2024 – 13.1%

4. **Staff Survey response rate surpasses 45%**

In 23/24 the staff survey response rate achieved 45%, a 4% decrease on the year before, current position of the staff survey responses suggests the Trust will surpass it this year.

5. **Staff Survey key questions for FTSU 19a, 19b, 23e and 23f increase.**

All staff survey results received for 22/23 showed an increase and SaTH was one of the Top 10 most improved Trusts in the country for the FTSU questions.

### **4.0 SaTH Feedback**

NGO guidance expects that all those who have raised concerns to the FTSUG and ambassadors are to be asked the following questions:

1. Given your experience would you speak up again to the FTSU Guardian?"  
Yes/No/Maybe/Don't know
2. Please explain your response

**Appendix 1**  
**Responses to Feedback Questions**

<b><u>QTR2 July – September 2024</u></b>	
Yes	You weren't able to resolve our problem but I was also seen to have taken note what the night shift were saying to me and tried to help because I was out of answers. It is also good to speak up because sometimes just talking a problem through with someone else helps
Yes	Talking to XXXX was reassuring because it felt as I was being heard, and that these issues mattered.
Yes	I would feel comfortable to contact the FTSU team and raise concerns in the future if needed.
No	<i>Nothing was done about the Senior Manager whose behaviour was against Trust values, who was a bully. It was reported (also by others) about the way that the Director was treating the staff, but nobody came to check on our wellbeing, and the individual remained with the Trust. The reported resolution was not appropriate, saying it had been discussed at a staff side meeting! There should have been support for the staff, nothing was done, the temporary Directors contract just ran out, that is the only reason he left, not because the issue was dealt with. I have lost all faith in the process of the FTSU, which is a shame as at the time I did feel listened to, but I fear that the Guardian's feedback to the senior managers wasn't.</i>
Yes	Thank you for all your help
Yes	XXXXXXXXX was very supportive when I approached her. XXXXX followed through with my concerns and reported back the outcome. Thank you for your support.
Yes	I would speak up again as this resolved my problem. Thank you again for your help.
Yes	<i>It made me realise the importance of my concern even if senior management were ignoring it. Made me realise there are other avenues to go down to raise a concern when you do not feel listened to</i>



Yes	<p>Having someone impartial to speak to is helpful, due to rather than going head-on into a situation, thinking how you are dealing with something is the correct way, it helps to get a bit of clarity with advice, that may help a situation being resolved in a better way.</p> <p>Also having someone there who is able to contact any relevant teams in an impartial way, before escalation is important.</p> <p>Sometimes the advice you get may not be what you are expecting, but that's the importance of impartiality and often results in better resolutions</p>
Yes	<p>FTSU officers were friendly and open to listening to my concerns. My concern was escalated appropriately and promptly. I was spoken to with respect and without judgement which eliminated my fears around speaking up, in fact I was actively encouraged. Thank you for your time!</p>
Yes	<p>The response took some time and when it arrived it was neither empathic or insightful it just read like corporate speak or something lifted from a well-rehearsed Press Release. The response showed a lack of insight into the problems HTP is causing both patients and staff which seems to have been grossly underestimated. Eg. Ophthalmologists are struggling to carry out delicate eye surgery where 1mm counts, due to the shaking of their building whilst major works are going on right in front of the Copthorne building!</p>