



University Hospitals of Leicester
NHS Trust

University Hospitals of Leicester

Quarterly Report (1st Quarter)
1st April to 30th June 2024

Circulation: Becky Cassidy



**The Guardian
Service**
Here to listen

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UHL FTSU Data Dashboard - Quarter 1 2024 – Section 1

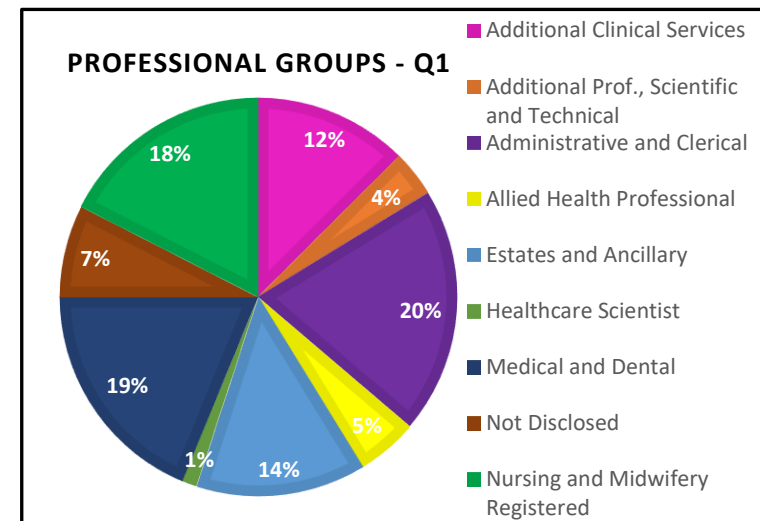
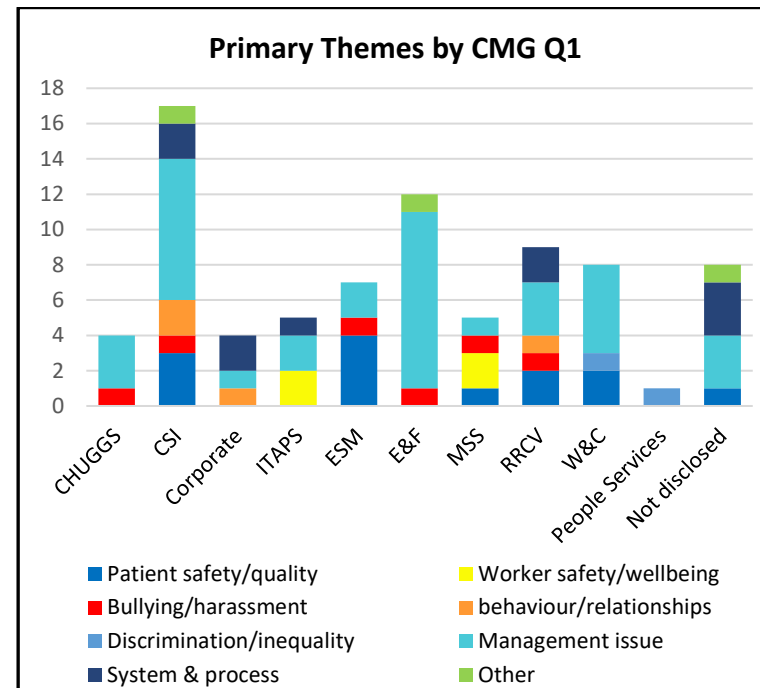
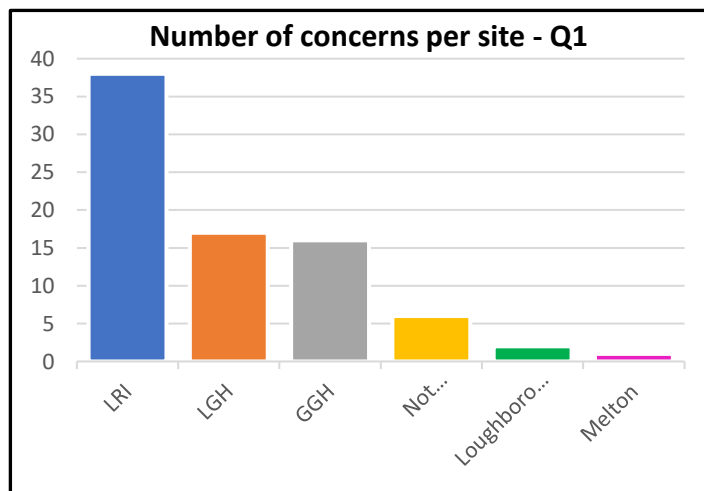
Cases		
	Q4	Q1
New Cases this quarter	80	80
Cases closed this quarter	68	48
Cases remaining open this quarter	12	32
Total cases since October 2023	155	236

RAG Status		
	Q4	Q1
Red	7	4
Amber	50	46
Green	23	26
White	0	4
Total	80	80

Outcomes		
	This Quarter	This year
Chose not to pursue	4	4
No further contact	2	2

Reported Detriment		
	This Quarter	This year
Detriment	0	0

Themes				
	Primary Only		All themes inc. primary	
	Quarter	Year	Quarter	Year
Patient safety/quality	13	13	16	16
Worker Safety or wellbeing	4	4	15	15
Bullying or harassment	6	6	14	14
Other inappropriate behaviour or attitudes				
Behaviour / relationship	4	4	21	21
Discrimination & inequality	2	2	7	7
Management issue	38	38	48	48
Additional Themes				
System and process	10	10	24	27
Other	3	3	3	3
Totals	80	80	151	151



Section 2 – Additional Data

Breakdown of themes by Quarter

	Q3 October 23 – December 23	Q4 January 24 – March 24	Q1 April 24 – June 24	Total
A Patient Safety / Quality	6	14	13	33
B Management Issue	8	26	38	73
C System / Process	27	16	10	53
D Bullying and Harassment	7	4	6	17
E Discrimination / Inequality	5	5	2	12
F Behavioural/Relationship	13	9	4	26
G Other (Describe)	6	4	3	13
H Worker Safety	3	2	4	9
Grand Total	75	80	80	236

Demographic

	Q1			Total (Since Feb 2024)		
Gender	Male 19%	Female 81%		Male 24%	Female 76%	
Religion	Christian 14%	Hindu 5%	Islam 14%	Christian 14%	Hindu 2.3%	Islam 21%
	Other 5%	None 62%		Sikh 2.3%	Other 2.3%	None 57%
Ethnicity	White British 62%	Black African 5%	Black Caribbean 5%	White British 52%	Black African 2.3%	Black Caribbean 2.3%
	Indian 14%	Other 14%		British Indian 10%	Indian 14%	Other 14%
				Asian 5%		
Disability	Yes 5%	No 95%		Yes 5%	No 95%	

Section 3 - What is the data telling us?

- Concern rates across quarters have been fairly consistent which shows staff members want to speak up.
- Management issues have seen a rapid increase across Q4 and Q1. This may be due to an increased understanding by UHL staff about what FTSU Guardians are here for. There has also been several members of staff that have shared contact details of GSL with colleagues.
- Discrimination has seen an decrease in reporting in Q1 as a primary theme but continues to be sighted as part of wider concerns.
- The LRI continues to have the most reported concerns as the biggest site.
- Community hospitals have started to report concerns but numbers remain low. Most of the concerns from community hospitals have happened as a result of going into the hospitals and speaking to staff members.
- CSI have the most reported concerns, followed by E & F. Both of these CMG's are sharing FTSU information widely.

- Administration and clerical staff have the largest percentage of concerns in Q 1, closely followed by medical and nursing and midwifery staff. This has changed as Medical were previously the highest group. There are no identifiable reasons for this change in trend.
- Detriment is still not being reported. There is a lack of understanding locally and nationally about the term detriment, this needs unpicking and staff across UHL need to be made aware of what it is and what to do if they believe they have suffered it.
- The reason there will always be a number of cases open is because FTSU Guardians continue to support emotionally where staff members need it. Where time is spent on a concern it remains open.

Management issues deep dive?

- The CMG with the largest amount of management issue concerns is E and F, followed by CSI. In both CMG's this has been increased by several individuals coming forward separately about the same incident, manager or situation.
- Although most management issue concerns link back to how managers are treating team members, as well as managerial and people skills, the reasons reported that are most common are: poor manager behaviours and attitudes, lack of support for staff including making time for them and staff members feeling that managers don't listen to their concerns or take them seriously.
- When working with staff members reporting a management issue we ask questions that help them reflect on circumstances, work load, their actions and a managers role to support the conversation moving forward. This has on several occasions encouraged the staff member to think about their part in the relationship.
- The HR and Learning and Development teams are looking at leadership training moving forward. We have suggested that listening to and managing concerns be part of this training.

Red concerns breakdown:

Concern	Actions taken	Learning/outcome
A staff member's behaviour towards colleagues and patients. Executive Lead – Julie Hogg	- Investigated by senior managers - Action to mitigate risk taken.	- Management took immediate action to resolve the concern.
Process around stickering on notes not followed. Executive lead – Julie Hogg	- Head of nursing investigated and did random sampling, working with the service manager. - Tried to support the improvement of the process	- Background administration processes that could mitigate risk to a patient are as important to health care as front line processes and need to be regularly checked. - The process was going to become digital to help prevent human error.
Worried about a vulnerable patient been in ED for too long x 2 Executive lead – Julie Hogg	- Managed as urgent - Relevant risk assessments considered and implemented.	- Patient moved. - Process reviewed. Chief nurse monitoring patient outcomes.

Positive outcomes and learning:

- The Learning and Development team are now looking at the support and training across all apprenticeships not just the UHL generated ones. This includes the learning and health needs of these trainees.
- Department manager asked for support for them and their department in moving concerns and the culture forward. The manager reflected on the support they believed they had given others and how this could be different in the future.
- As a result of 3 concerns within the same department, managers looked at the department as a whole and organised an away day to build culture, morale and help with a reset of expectations.

- Staff can now access 1:1 pension conversations within UHL and will have an FAQ sheet for support. External companies are to be vetted by Head of Pensions to ensure the correct and up to date information is shared.
- As a result of a concern, a Director asked for support with encouraging staff to speak up. All managers were then briefed about the FTSU service so the information could be cascaded to teams.
- E and F have started sharing concerns as greater exposure of FTSU Guardians within the teams. There are plans in the near future to do more promotions within this team.
- Senior Manager looking at equipment being fit for purpose in wards that have both children and young adults.
- Staff survey data for small cost centres needs to be looked at carefully by managers as incorrect assumptions can easily be made. People Promise Partner to send out support information to managers so they know what to look out for before the data in the future.
- As a service we can't guarantee outcomes, but the majority of outcomes from individual cases have had positive outcomes and would speak up again.
- As a service that provides anonymity we are unable to delve into individual outcomes.

Section 4 - FTSU Guardian Activity

- The Guardians contribute to the Sexual Safety Group meetings, Patient Safety, Great Place to work group, UHL Leadership Huddle, monthly meetings with Director of Corporate and Legal Affairs, HR and People Services sharing information/intelligence, and numerous other departments including Staffside and EDI.
- We attend in-person monthly corporate Inductions with HCSW and Junior Doctors corporate induction.
- We do weekly in person corporate inductions briefings for new starters.
- Briefings for Enhanced Patient Observation teams and Pathways to Excellence.
- Led a 1 hour Wellness Webinar about the background and importance of speaking up.
- LLR FTSU group meeting sharing best practice.
- Ward walks, briefings and visits to community hospitals.
- 2 minute FTSU Video created with the comms team (Now on Connect) to reach more staff across the organisation.

What next?

- Support the work on detriment with UHL
- As another step into our reporting a new questionnaire will be going to staff 4/6 months after speaking up. This is to ensure a full 360 degrees approach to speaking up and following up. From a speaking up perspective this will give insight into if the organisation is learning and moving forward. We will also be asking staff if they have suffered detriment as a result of speaking up.
- Breakdown some of the CMG's within reporting
- October is Speak up month with a focus of 'Listen Up'. FTSU Guardians will be supporting wellbeing hubs and Black History Month.
- We will be meeting with CMG Senior Leadership teams looking at themes across
- Greater focus on key groups i.e. those that are not speaking up.

Appendices

Background to Freedom to Speak Up

Following the Francis Inquiry¹ 2013 and 2015, the NHS launched 'Freedom to Speak Up' (FTSU). The aim of this initiative was to foster an open and responsive environment and culture throughout the NHS enabling staff to feel confident to speak up when things go or may go wrong; a key element to ensure a safe and effective working environment.

The Guardian Service

The Guardian Service Limited (GSL) is an independent and confidential staff liaison service. It was established in 2013 by the National NHS Patient Champion in response to The Francis Report. The Guardian Service provides staff with an independent, confidential 24/7 service to raise concerns, worries or risks in their workplace. It covers patient care and safety, whistleblowing, bullying, harassment, and work grievances. We work closely with the National Guardian Office (NGO) and attend the FTSU workshops, regional network meetings and FTSU conferences. The Guardian Service is advertised throughout the Trust as an independent organisation. This encourages staff to speak up freely and without fear of reprisal. Freedom to Speak Up is part of the well led agenda of the CQC inspection regime. The Guardian Service supports the Trust's Board to promote and comply with the NGO national reporting requirements.

The Guardian Service Ltd (GSL) was implemented in UHL September 2023 and officially launched on 9th October 2023.

Communication and marketing have been achieved by meeting with senior staff members, joining team meetings, site visits, the Intranet and the distribution of flyers and posters across the organisation. All new staff will become aware of the Guardian Service when undertaking the organisational induction programme.

Access and Independence

Being available and responsive to staff are key factors in the operation of the service. Many staff members, when speaking to a Guardian, have emphasised that a deciding factor in their decision to speak up and contacting GSL was that the Guardians are not NHS employees and are external to the Trust.

Categorisation of Calls and Agreed Escalation Timescales

The following timescales have been agreed and form part of the Service Level Agreement.

Call Type	Description	Agreed Escalation Timescales
Red	Includes patient and staff safety, safeguarding, danger to an individual including self-harm.	Response required within 12 hours
Amber	Includes bullying, harassment, and staff safety.	Response required within 48 hours
Green	General grievances e.g. a change in work conditions.	Response required within 72 hours
White	No discernible risk to organisation.	No organisational response required

Open cases are continually monitored, and regular contact is maintained by the Guardian with members of staff who have raised a concern to establish where ongoing support continues to be required. This can be via follow up phone calls and/or face to face meetings with staff who are in a situation where they feel they cannot escalate an issue for fear of reprisal. Guardians will also maintain contact until the situation is resolved or the staff member is satisfied that no further action is required. Where there is a particular complex case, setbacks, or avoidable delays in the progress of cases that have been escalated, these would be raised with the organisational lead for the Guardian Service at regular monthly meetings.

Escalated cases are cases which are referred to an appropriate manager, at the request of the employee, to ensure that appropriate action can be taken. As not all employees want their manager to know they have contacted the GSL, they either progress the matter themselves or take no further action. There are circumstances where cases are escalated later by the Guardian. A staff member may take time to consider options and decide a course of action that is right for them. A Guardian will keep a case open and continue to support staff in such cases. In a few situations contact with the Guardian is not maintained by the staff member.