Health Committee Continues to Press Scot Health Minister over NHS Governance Failings – inc lack of WB hotline

On the 2nd October 2018, the Health Committee at the Scottish Parliament responded to the Health Minister, Jeane Freeman MSP, following on her response to their NHS Governance Report.

They have not disappointed. Health Committee Convener Lewis McDonald MSP's 6-page letter, can be seen here:

http://www.parliament.scot/S5_HealthandSportCommittee/Inquiries/20181002_Ltr_OUT_to_Cab_S ec_re_Report_response.pdf

Here's what he says to her, in relation to Whistleblowing for Scotland's 162,000 NHS staff.

Whistleblowing - paragraph 63

Your response to our report details that legislation will be introduced in the autumn to establish an Independent National Whistleblowing Officer (INWO) for NHS Scotland. The former Cabinet Secretary for Health and Sport indicated it was expected this would be introduced by secondary legislation.

Are you able to confirm if this is still the case and if so whether the secondary legislation will be subject to affirmative or negative procedure? It would be helpful if you were able to indicate when you expect the legislation to be introduced.

Whistleblowing -paragraph 117

You state in your response to our report that whistleblowing standards will be introduced and consulted upon. Are you able to provide further details on whether these standards will require any legislative changes?

You detail that it is expected the INWO role will include reviewing local processes, decision making and outcomes and assessing whether whistleblowing standards have been followed. Can you provide further insights into what will happen if the INWO determines that processes and standards have not been met? Will sanctions be imposed on the NHS board or individual employees as a result? Where the INWO's findings indicate failings, where will responsibility lie for ensuring improvements are made?

Whistleblowing -paragraph 118

Reference is made in your response to organisations now being required to publish annual reports on incidents that have activated the Duty of Candour procedure. How will the impact of these reports and the duty of candour process be monitored? What will be the INWO's role in this process?

Your response details that nine Health and Social Care Partnerships are not using iMatter. Which HSCPs are these? It would be useful to know the reasons for this and what alternative monitoring they have in place to assess staff experience. What steps are the Scottish Government taking to encourage these remaining HSCPs to use iMatter?

We note in your response to our report reference is made to the Dignity at Work Survey not running in 2018. As we detail in our report it is important to monitor and assess whether new approaches to supporting individuals to feel more confident to raise concerns are delivering changes. With no survey in operation for 2018 how will this assessment be made?

Whistleblowing -paragraph 119

We note your response does not offer support to our recommendation that the Scottish Government introduce an investigative line for whistleblowing. We believe the introduction of a reporting line for NHS whistleblowers would further enhance the external support services available to NHS staff. The Committee's interest is in ensuring appropriate support is available at the first stage of the process to encourage individuals to speak out. Will the INWO have a role in encouraging whistleblowers to speak out or will they only become involved in the later stages of the process?

Whistleblowing -paragraph 120

We recommend in our report that the Scottish Government allow NHS boards to appoint individuals other than non-executive board directors to the role of Whistleblowing Champion. Your response states the Scottish Government will ask NHS boards to consider the Committee's comments. Are you able to provide further detail on the reasons you do not consider this direction should come from the Scottish Government given the previous instruction in a Chief Executive Letter to appoint a non-executive director to the role?

Whistleblowing -paragraph 121

You state in your response that employment tribunals provide redress where someone has suffered detriment as a result of whistleblowing.

However, we are also interested to know the extent to which the individuals responsible for the maltreatment of whistleblowers are held to account. You state that the unfair treatment of staff is a disciplinary matter, but is the Scottish Government satisfied this happens to the extent to which it should? Will the INWO be able to recommend action against individual members of staff? Will the Scottish Government be taking any further steps to ensure those responsible for mistreating whistleblowers do not go unpunished?

I am pleased that the Health Committee have taken note of the objections we have all written to them. They will not let the Health Minister off the hook.

Watch this space!

... In case you don't know what's going on, the Health Committee wrote to the Scottish Government in July with recommendations on how the NHS in Scotland could improve its governance. Read their proposals (which included the hotline) here:

https://digitalpublications.parliament.scot/Committees/Report/HS/2018/7/2/The-Governance-of-the-NHS-in-Scotland---ensuring-delivery-of-the-best-healthcare-for-Scotland-1#Introduction

The Health Minister was given 2 months to digest it and say which bits the Government would implement. Sadly that proved to be very little; our new Health Minister thought everything was already in hand – see her letter here

http://www.parliament.scot/S5_HealthandSportCommittee/General%20Documents/20180903_Lett er_from_Jeane_Freeman_MSP.pdf