




Freedom to Speak Up policy

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Ratifying committee or executive director	Transforming Culture and Staff Experience Sub Committee	
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Executive director	Executive Director of Quality and Safety (Chief Nurse)	
Policy lead	Lead Freedom to Speak Up Guardian	
Policy author (if different from above)		
Exec Sign off Signature (electronic)		
Disclosable under Freedom of Information Act 2000	Yes	

Policy context

The following policy outlines the commitment to speaking up and following up and explains the Freedom to Speak Up Guardian (FTSUG) role. It also lists useful internal and external contacts. Speaking up and raising concerns can take many forms and we encourage you to approach your local manager in the first instance. If there are barriers via these routes, the Guardians and FTSU Champions are a safe alternative. You can contact the FTSUG in confidence at any stage of raising your concern and we will provide you with support, guidance and escalation if required. Our contact details are: bsmhft.speakup@nhs.net or secure voicemail: **0121 301 3940**

Policy requirement

To ensure that any concerns raised at work are handled sensitively and appropriately.

To outline a clear procedure for reporting any concern within the workplace where other avenues have failed, are inappropriate or where barriers exist.

To confirm the responsibilities of Freedom to Speak Up Guardians, Freedom to Speak Up Champions, managers, colleagues and Trades Unions Representatives.

Change Record

Date	Version	Author (Name & Role)	Reasons for review / Changes incorporated	Ratifying Committee
28/01/2026	8	Emma Randle, Lead Guardian	Final version incorporated further consultation changes	TCSE
27/11/2025	8	Emma, Randle, Lead Guardian	Simplify, more accessible, sharper message and incorporated consultation changes	TCSE

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1: Introduction

1.1. Rationale (why):

We (the Trust) welcome speaking up and we will listen. By speaking up at work you will be playing a vital role in helping us to keep improving our services for all patients and the working environment for our colleagues. We ask all our colleagues to complete the online training [Log in to the site | BSMHFT Learning Zone](#) on speaking up. The online module on listening up is specifically for managers to complete and the module on following up is for senior leaders to complete.

1.2. Scope (when, where and who):

You can find out more about what Freedom to Speak Up (FTSU) is in these videos [Bing Videos](#)

1.3. Principles (beliefs):

We foster a positive culture where people feel that they can speak up and that their voice will be heard. Staff and leaders act with openness, honesty and transparency and actively empower staff to drive improvement by encouraging them to raise concerns and emphasising the value when they do.

We are confident that all voices will be heard and that our people feel supported and are free from retaliation, victimisation or demeaning treatment (detriment). When concerns are raised, we expect our leaders to investigate sensitively and confidentially, share lessons learned and act on them leading to meaningful change.

When something goes wrong, people receive a sincere and timely apology and are told about any actions being taken to prevent the same happening again.

2: This policy

NHS organisations like us and others such as commissioned services providing NHS healthcare services in primary and secondary care in England, are required to adopt this national policy as a minimum standard to help normalise speaking up for the benefit of patients and workers. Its aim is to ensure all matters raised are captured and considered appropriately.

Professional Codes of Practice

Professional codes of practice require you to protect patients and clients and to take appropriate steps if you suspect a colleague may not be fit for practice. We will support you in line with these codes of practice. In BSMHFT, these are the General Medical Council (GMC), Nursing Medical Council (NMC) and Health and Care Professions Council (HCPC).

3: Procedure:

Speak up -we will listen:

This policy is for all our colleagues. The NHS People Promise [NHS England » The Promise](#) commits to ensuring that “we each have a voice that counts, that we all feel safe and confident to speak up, and take the time to really listen to understand the hopes and fears that lie behind the words”.

We want to hear about any concerns you have, whatever role and whichever part of the organisation you work in. We know some groups in our workforce feel they are seldom heard or are reluctant to speak up for example, bank workers, locum staff, students, and international nurses.

We also know that workers with disabilities, those from a global majority background or the LGBTQ+ community do not always feel able to speak up.

This policy is for all colleagues, and we want to hear all our colleagues’ concerns.

What can I speak up about?

You can speak up about anything that gets in the way of patient care or affects your working life. That could be something which doesn’t feel right to you: for example, a way of working or a process that isn’t being followed; you feel you are being discriminated against; or you feel the behaviours of others is affecting your wellbeing, or that of your colleagues or patients. Speaking up is about all these things

Speaking up, therefore, captures a range of issues, some of which may be appropriate for other existing processes (for example, HR, safeguarding or patient safety/quality) [Policies - Home](#)

As an organisation, we will listen and work with you to identify the most appropriate way of responding to the issues you raise.

We want you to feel safe to speak up

Your speaking up to us is a gift because it helps us identify opportunities for learning and improvement that we might not otherwise know about.

We will not tolerate anyone being prevented or deterred from speaking up or being mistreated because they have spoken up. If this does occur, you must tell us about it.

As individuals we share a responsibility to:

- Create a psychologically safe environment where speaking, listening and following up is business as usual
- Treat our colleagues well when they speak up
- Speak up and be an ally when we witness disadvantageous and/or demeaning treatment (detriment)

- Take action, listen, follow up and learn from speaking up.

Our organisation has a responsibility to:

- Protect workers who speak up from disadvantageous or demeaning treatment
- Ensure the working environment is a safe one
- Respond to concerns of disadvantageous or demeaning treatment by examining the facts, reviewing outcomes, providing feedback, and reflecting and learning
- Act – and be seen to act - when disadvantageous or demeaning treatment does occur
- Communicate that it will not be tolerated
- Include any reports of detriment following speaking up in regular reporting and review as a whole and not just on an individual basis.
- These principles are transferable across different organisations and responsibilities for each of these should be agreed

Appendix 4 contains more information about disadvantageous or demeaning treatment (detriment).

Who can speak up?

Anyone who works in or on behalf of BSMHFT. This encompasses any healthcare professionals, non-clinical workers, SSL workers, receptionists, pharmacy, directors, managers, contractors, volunteers, students, trainees, resident doctors, locum, bank and agency workers, and former workers.

Who can I speak up to?

Speaking up internally

Most speaking up happens through conversations with supervisors and line managers where challenges are raised and resolved quickly. We strive for a culture where that is normal, everyday practice and encourage you to explore this option- it may be the easiest and simplest way of resolving matters.

- However, you have other options in terms of who you can speak up to, depending on what feels most appropriate to you. Some of the options are set out below.
- Senior manager, partner or director with responsibility for the subject matter you are speaking up about.
- The patient safety team or clinical governance team (where concerns relate to patient safety or wider quality) bsmhft.patientsafety@nhs.net
- Local counter fraud team (where concerns relate to fraud) emily.wood10@nhs.net
- Our Freedom to Speak Up Guardians, Emma Randle, Lucy Thomas and Kerry Harkin bsmhft.speakup@nhs.net who can support you to speak up if you feel unable to do so by other routes.

- The guardians will ensure that people who speak up are thanked for doing so, that the issues they raise are responded to, and that the person speaking up receives feedback on the actions taken. You can find out more about the guardian role here [Raising a concern - Raising a concern](#)
- Our safeguarding team bsmhft.safeguarding@nhs.net
- Our FTSU Champions who are based in local teams and offer signposting, guidance and a listening ear [Freedom to Speak Up Champions Network](#)
- Our HR team bsmhftsupport@nhs.net
- Our EDI team which includes Organisational Development (OD), mediation and staff engagement bsmhftediqueries@nhs.net
- Our senior lead responsible for Freedom to Speak Up is lisa.stalley-green@nhs.net who provides senior support for our Guardians and is responsible for reviewing the effectiveness of our FTSU arrangements
- Our Guardian of Safe Working h.shanmugaratnam1@nhs.net
- Our non-executive director responsible for Freedom to Speak Up is monica.shafaq2@nhs.net - this role is specific to organisations like ours with boards and provides more independent support for the guardian; provides a fresh pair of eyes to ensure that investigations are conducted with rigor; and helps escalate issues, where needed.

Speaking up externally

If you do not want to speak up to someone within BSMHFT you can speak up externally to:

[Care Quality Commission](#) (CQC) for quality and safety concerns about the service it regulates- you can find out more about how the CQC handles concerns [here](#).

[NHS England](#) for concerns about:

- GP surgeries
- dental practices
- optometrists
- pharmacies
- how NHS trusts and foundation trusts are being run (this includes ambulance trusts and community and mental health trusts)
- NHS procurement and patient choice
- The national tariff

NHS England may decide to investigate your concern themselves, ask your employer or another appropriate organisation to investigate (usually with their oversight) and/or use the information you provide to inform their oversight of the relevant organisation. The precise action they take will depend on the nature of your concern and how it relates to their various roles.

Please note that neither the Care Quality Commission nor NHS England can get involved in individual employment matters, such as concerns from an individual about feeling bullied

[NHS Counter Fraud Agency](#) for concerns about fraud and corruption, using their [online reporting form](#) or calling their freephone line **0800 028 4060**.

If you would like to speak up about the conduct of a member of staff, you can do this by contacting the relevant professional body such as the General Medical Council, Nursing and Midwifery Council, Health & Care Professions Council, General Dental Council, General Optical Council or General Pharmaceutical Council.

For allegations concerning people in a position of trust [Safeguarding Allegations Concerning People In a Position of Trust Final](#)

Appendix 3 contains information about making a 'protected disclosure'.

How should I speak up?

You can speak to any of the people or organisations listed above in person, by phone or in writing (including email).

Confidentiality

The most important aspect of your speaking up is the information you can provide, not your identity.

You have a choice about how you speak up:

Openly: you are happy that the person you speak up to knows your identity and that they can share this with anyone else involved in responding.

Confidentially: you are happy to reveal your identity to the person you choose to speak up to on the condition that they will not share this without your consent.

Anonymously: you do not want to reveal your identity to anyone. This can make it difficult for others to ask you for further information about the matter and may make it more complicated to act to resolve the issue. It also means that you might not be able to access any extra support you need and receive any feedback on the outcome.

In all circumstances, please be ready to explain as fully as you can the information and circumstances that prompted you to speak up.

Advice and Support

You can find out about the local support available to you at [Health and Wellbeing - Health and Wellbeing](#) Your local staff networks [Staff Networks - Staff Networks](#) can be a valuable source of support.

You can access a range of health and wellbeing support via NHS England:

- [Support available for our NHS people.](#)

- [Looking after you: confidential coaching and support for the primary care workforce.](#)

NHS England has a [Speak Up Support Scheme](#) that you can apply to for support. You can also contact the following organisations:

- [Speak Up Direct](#) provides free, independent, confidential advice on the speaking up process.
- The charity [Protect](#) provides confidential and legal advice on speaking up.
- The [Trades Union Congress](#) provides information on how to join a trade union.
- [The Law Society](#) may be able to point you to other sources of advice and support.
- [The Advisory, Conciliation and Arbitration Service](#) gives advice and assistance, including on early conciliation regarding employment disputes.

4. Responsibilities

Resolution and investigation

We support our managers/supervisors to listen to the issue you raise and take action to resolve it wherever possible. In most cases, it's important that this opportunity is fully explored, which may be with facilitated conversations and/or mediation.

Where an investigation is needed, this will be objective and conducted by someone who is suitably independent (this might be someone outside your organisation or from a different part of the organisation) and trained in investigations. It will reach a conclusion within a reasonable timescale (which we will notify you of), and a report will be produced that identifies any issues to prevent problems from recurring.

To ensure independence and impartiality:

Freedom to Speak Up Guardians are not involved in investigations, and they are unable to represent and or accompany you in meetings. If an investigation takes place, managers/supervisors are responsible for feeding back outcomes.

Communication with you

We will treat you with respect at all times and will thank you for speaking up. We will discuss the issues with you to ensure we understand exactly what you are worried about. If we decide to investigate, we will tell you how long we expect the investigation to take and agree with you how to keep you up to date with its progress. Wherever possible, we will share the full investigation report with you (while respecting the confidentiality of others and recognising that some matters may be strictly confidential; as such it may be that we cannot even share the outcome with you).

How we learn from your speaking up

We want speaking up to improve the services we provide for patients and the environment our staff work in. Where it identifies improvements that can be made, we will ensure necessary changes are made and are working effectively. Lessons will be shared with teams across the organisation, or more widely, as appropriate.

Post(s)	Responsibilities	Ref
All Staff	<p>All health care professionals have a duty to report any concerns they may have about patient care or safety.</p> <p>Raise concerns in good faith with a reasonable belief that a malpractice has occurred and:</p> <p>Accept professional accountability maintaining the standards of professional practice as set by the appropriate regulatory body</p> <p>Where appropriate, ensure concerns are reported through the Incident reporting system (Eclipse)</p> <p>Where possible report all incidents and concerns immediately</p> <p>Be honest and truthful</p> <p>Protect the confidentiality of personal information</p> <p>Ensure that any potential investigation is not jeopardised by discussing concerns with others</p> <p>Take reasonable care of health and safety at work for themselves, team, patients and others</p> <p>Act in accordance with the express and implied terms of their contract</p>	
Service, Clinical and Corporate Directors	<p>Seek guidance and support from the Guardians as necessary</p> <p>Be approachable and accessible</p> <p>Set the tone of a positive speak up listen up and follow up culture</p> <p>Work to identify and reduce barriers to speaking up for groups of staff that are less likely to speak up</p>	

	<p>Encourage colleagues to raise concerns at the earliest opportunity,</p> <p>Take any complaints/concerns made by colleagues seriously</p> <p>Take prompt action to resolve the concern or refer it to an appropriate senior manager</p> <p>Undertake an investigation if appropriate; this may require seeking further advice</p> <p>Securely retain any evidence or documentation passed to you to be given to any investigation team. Some circumstances may require that evidence is left in situ.</p> <p>Recognise that speaking up can be difficult for some staff members and provide appropriate support</p> <p>Maintain confidentiality</p> <p>Act consistently, fairly and reasonably</p> <p>Ensure that colleagues who genuinely report concerns are not victimised or treated detrimentally in any way due to their actions under this policy</p> <p>When the concern is raised through FTSU, managers will provide timely and regular feedback on timescales and the status of any investigation as requested by the Guardians.</p>	
Policy Lead	Ensure that the policy is in line with current legislation, good practice guidelines, The FTSU policy for the NHS and relevant reviews	
Executive Director	<p>The Trust Board are responsible for the following under this policy:</p> <p>ensure that any concern is taken seriously and given due diligence to resolve.</p> <p>Receive the three times a year report on Speaking Up</p> <p>Ensure that recommended actions following investigations are prioritised and actioned</p>	

	Set the tone of a positive speak up listen up and follow up culture	
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Review

We will seek feedback from workers about their experience of speaking up. We will review the effectiveness of this policy and our local processes annually, with the outcome published and changes made as appropriate.

Senior leaders oversight

Our most senior leaders will receive a report three times a year providing a thematic overview of speaking up by our staff to our FTSU Guardians.

5. Development and Consultation process

Consultation summary		
Date policy issued for consultation	December 2025	
Number of versions produced for consultation	V9	
Committees / meetings where policy formally discussed	Date(s)	
Where received	Summary of feedback	Actions / Response
FTSU Guardians 10/12/2025	Comments received and absorbed	New version created V8
Sam Malone	Corrected template	V8
Consultation process	Scope of policy, inclusion of other support, PIPOT details	V9

6. Reference documents:

This policy links to the following policies:

- Dignity at Work Policy
- Disciplinary Policy
- Equality Inclusion and Human Rights policy
- Duty of Candour Policy
- Local Counter Fraud, Bribery and Corruption Policy
- Health and Safety Policy
- Security Management Policy
- Sexual Safety Policy

The above policies can be found on the policy page [here](#).

- [PAR1245i-NHS-freedom-to-speak-up-national-Policy-eBook.pdf](#)
- [Freedom to speak up - Care Quality Commission](#)

7. Bibliography:

- NHS Employers Guidance on Whistleblowing
- Frances Review Report “Freedom to Speak Up” February 2015
- West Suffolk Review, NHSE/1- Published 9 December 2021
- Public Interest Disclosure Act 1996
- Enterprise & Regulatory Reform Act 2023 (changes to PDA Act 1998)
- Department for Business, Energy & Industrial Strategy (BEIS)- Guidance on Whistleblowing- List of Prescribed People and Bodies” Dated 1 October 2017
- Employment Rights Act 1996
- NHS National Whistleblowing Policy- Published 1 April 2016
- National Guardians Office, Detriment Guidance for Guardians January 2025

8. Glossary

There is no terminology to list

9. Audit and assurance

Element to be monitored	Lead	Tool	Frequency	Reporting Committee
Feedback from managers and worker	Lead Exec/NED Lead Guardian	Quarterly Guardians Report	As appropriate	Board of Directors People Committee QPES Committee
Number of Freedom to Speak Up Champions available in services	Lead Guardian	Quarterly Guardians Report	Annually	Board of Directors People Committee QPES Committee
Timeliness of investigations and whether they are completed in accordance with policy	AD of People, Learning and Development Lead Guardian	Case log	As appropriate	Board of Directors People Committee QPES Committee
Volume and nature of cases being raised.	Lead Guardian	Quarterly Guardians Report	Quarterly	Board of Directors People Committee QPES Committee
Case conversion rates of Guardian contacts	Lead Guardian	Early Warning Dashboard	Monthly	Board of Directors People Committee QPES Committee

10. Appendices:

Appendix 1- Equality Impact Assessment

Appendix 2- What will happen when I speak up?

Appendix 3- Making a protected disclosure

Appendix 4- Feeling safe to speak up

Appendix 1

Equality Analysis Screening Form

Title of Policy	Freedom to Speak up		
Person Completing this policy	Lead Guardian	Role or title	Lead FTSU Guardian
Division	Director of Nursing	Service Area	Quality
Date Started	11 December 2025	Date completed	11 December 2025
Main purpose and aims of the policy and how it fits in with the wider strategic aims and objectives of the organisation.			
<p>The NHS Standard contract requires all providers to appoint and maintain one or more Freedom to Speak Up (FTSU) Guardians in line with the National Guardian's Office. Speaking up improves patient safety by creating an environment where risks and errors are identified and addressed early and unsafe working practices are flagged before they harm patients. Open reporting allows leadership to act quickly—whether by adjusting protocols, reallocating resources, or investigating systemic problems—reducing the chance of repeated errors. Lessons learned from concerns raised lead to better training, safer processes, and continuous improvement</p> <p>Freedom to Speak Up is also embedded in the People Promise and the NHS 10-year plan reinforcing values like respect, compassion and fairness. It's not just a policy- it's a cultural lever for embedding these principles.</p> <p>FTSU highlights inequalities in voice—such as lower confidence among global majority staff or those in lower bands—and drives leadership to address these gaps, fostering inclusivity. It encourages staff at all levels to raise concerns without fear of retaliation. This shifts the NHS from a historically hierarchical, blame-oriented environment toward one where transparency is valued. Visible action on concerns builds trust between frontline staff and leadership. It signals that voices matter, which improves morale and retention. This policy also supports the trust's key objective of becoming an anti-racist and anti-discriminatory organisation.</p>			
Who will benefit from the policy?			
All staff			
Does the policy affect service users, employees or the wider community?			
<i>Add any data you have on the groups affected split by Protected characteristic in the boxes below. Highlight how you have used the data to reduce any noted inequalities going forward</i>			

As highlighted in the above content				
Does the policy significantly affect service delivery, business processes or policy? <i>How will these reduce inequality?</i>				
Not applicable				
Does it involve a significant commitment of resources? <i>How will these reduce inequality?</i>				
Not applicable				
Does the policy relate to an area where there are known inequalities? (e.g. seclusion, accessibility, recruitment & progression)				
Information on colleagues who may find it harder to raise concerns is detailed within the policy				
Impacts on different Personal Protected Characteristics – Helpful Questions:				
<i>Does this policy promote equality of opportunity?</i> <i>Eliminate discrimination?</i> <i>Eliminate harassment?</i> <i>Eliminate victimisation?</i>			<i>Promote good community relations?</i> <i>Promote positive attitudes towards disabled people?</i> <i>Consider more favourable treatment of disabled people?</i> <i>Promote involvement and consultation?</i> <i>Protect and promote human rights?</i>	
Please click in the relevant impact box and include relevant data				
Personal Protected Characteristic	No/Minimum Impact	Negative Impact	Positive Impact	Please list details or evidence of why there might be a positive, negative or no impact on protected characteristics.
Age			X	Promotes active monitoring of groups with protected characteristics who may face additional barriers when speaking up. Ongoing commitment to identify and remove barriers and to adapting underpinning processes. Information around protected characteristics of those speaking up is recorded and triangulated

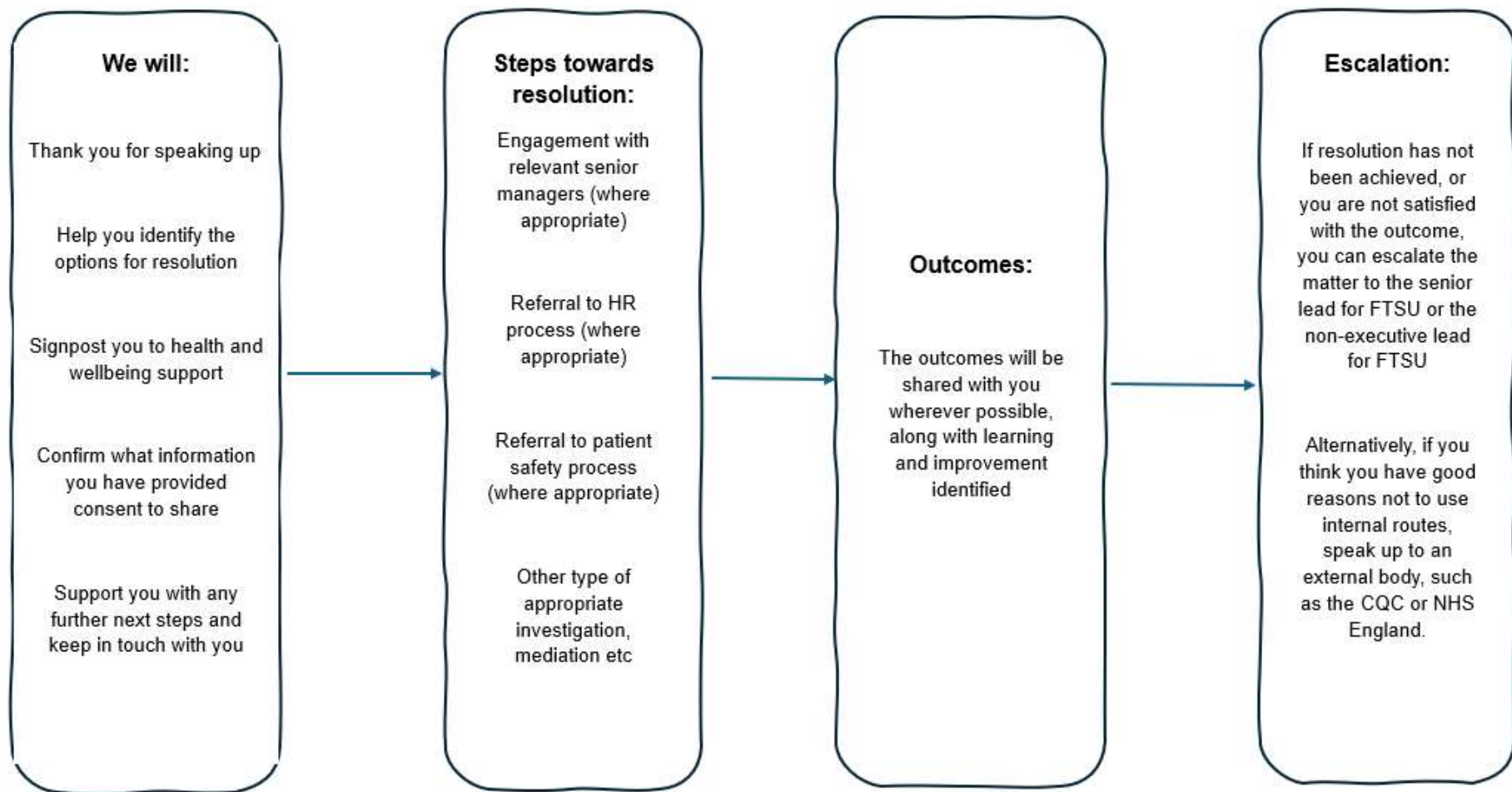
				with other data enabling managers to remove barriers to speaking up. Data is reported to the People Committee for assurance. This is relevant to all protected characteristics
<p>Including children and people over 65</p> <p>Is it easy for someone of any age to find out about your service or access your policy?</p> <p>Are you able to justify the legal or lawful reasons when your service excludes certain age groups</p>				
Disability			X	Guardians will employ reasonable adjustments for those speaking up and will challenge the Trust if this is lacking. Related themes and any learning and improvement will be reported to the Board and its sub committees.
<p>Including those with physical or sensory impairments, those with learning disabilities and those with mental health issues</p> <p>Do you currently monitor who has a disability so that you know how well your service is being used by people with a disability?</p> <p>Are you making reasonable adjustment to meet the needs of the staff, service users, carers and families?</p>				
Gender			X	Guardians will strive to be as assessable as possible enabling those with flexible working arrangements to access the service.
<p>This can include male and female or someone who has completed the gender reassignment process from one sex to another</p> <p>Do you have flexible working arrangements for either sex?</p> <p>Is it easier for either men or women to access your policy?</p>				
Marriage or Civil Partnerships			X	Guardians are expected to possess knowledge of employment law especially with regard to the Equality Act (2010)
<p>People who are in a Civil Partnerships must be treated equally to married couples on a wide range of legal matters</p> <p>Are the documents and information provided for your service reflecting the appropriate terminology for marriage and civil partnerships?</p>				
Pregnancy or Maternity			X	The Guardians will ensure that colleagues who are taking maternity/paternity/adoption leave have access to the Guardians.
<p>This includes women having a baby and women just after they have had a baby</p> <p>Does your service accommodate the needs of expectant and post natal mothers both as staff and service users?</p> <p>Can your service treat staff and patients with dignity and respect relation in to pregnancy and maternity?</p>				

Race or Ethnicity			X	Guardians will share themes and learning with the Race Equity network and signpost speakers to them for support and guidance.
Including Gypsy or Roma people, Irish people, those of mixed heritage, asylum seekers and refugees What training does staff have to respond to the cultural needs of different ethnic groups? What arrangements are in place to communicate with people who do not have English as a first language?				
Religion or Belief			X	As above
Including humanists and non-believers Is there easy access to a prayer or quiet room to your service delivery area? When organising events – Do you take necessary steps to make sure that spiritual requirements are met?				
Sexual Orientation			X	Guardians will share themes and learning with the LGBTQ + Staff network and signpost speakers to them for support and guidance.
Including gay men, lesbians and bisexual people Does your service use visual images that could be people from any background or are the images mainly heterosexual couples? Does staff in your workplace feel comfortable about being 'out' or would office culture make them feel this might not be a good idea?				
Transgender or Gender Reassignment			X	As above
This will include people who are in the process of or in a care pathway changing from one gender to another Have you considered the possible needs of transgender staff and service users in the development of your policy or service?				
Human Rights			X	Speaking up is integral to protecting patient care and preventing harm
Affecting someone's right to Life, Dignity and Respect? Caring for other people or protecting them from danger? The detention of an individual inadvertently or placing someone in a humiliating situation or position?				
If a negative or disproportionate impact has been identified in any of the key areas would this difference be illegal / unlawful? I.e. Would it be discriminatory under anti-discrimination legislation. (The Equality Act 2010, Human Rights Act 1998)				
	Yes	No X		

What do you consider the level of negative impact to be?	High Impact	Medium Impact	Low Impact	No Impact
				X
<p>If the impact could be discriminatory in law, please contact the Equality and Diversity Lead immediately to determine the next course of action. If the negative impact is high a Full Equality Analysis will be required.</p> <p>If you are unsure how to answer the above questions, or if you have assessed the impact as medium, please seek further guidance from the Equality and Diversity Lead before proceeding.</p> <p>If the policy does not have a negative impact or the impact is considered low, reasonable or justifiable, then please complete the rest of the form below with any required redial actions, and forward to the Equality and Diversity Lead.</p>				
Action Planning:				
How could you minimise or remove any negative impact identified even if this is of low significance?				
Continuous reporting and monitoring of staff with protected characteristics to ensure they are not disproportionately affected				
How will any impact or planned actions be monitored and reviewed?				
In trust Board and its sub committees				
How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic.				
Good practice is shared in the regional Guardian's network as well as the National Guardians Office via the 100 voices initiative				
Please save and keep one copy and then send a copy with a copy of the policy to the Senior Equality and Diversity Lead at bsmhft.edi.queries@nhs.net . The results will then be published on the Trust's website. Please ensure that any resulting actions are incorporated into Divisional or Service planning and monitored on a regular basis				

APPENDIX 2:

What will happen when I speak up?



APPENDIX 3:

Making a protected disclosure

A protected disclosure is defined in the Public Interest Disclosure Act 1998. This legislation allows certain categories of worker to lodge a claim for compensation with an employment tribunal if they suffer as a result of speaking up. The legislation is complex and to qualify for protection under it, very specific criteria must be met in relation to who is speaking up, about what and to whom. To help you consider whether you might meet these criteria, please seek independent advice from the [Protect Whistleblowing Homepage](#) or a legal representative

APPENDIX 4:

Feeling safe to speak up

Making speaking up business as usual requires Guardians and leaders to ensure that those who have spoken up are supported and the fear of retaliation or negative consequences (detriment) which may prevent speaking up, is removed wherever possible. We accept that speaking up can, at times, feel challenging, particularly when colleagues are involved in the issues being raised. However, we rely on each other to do the right thing, and we all share a responsibility to speak up when we see something that doesn't feel right. By working together and supporting everyone affected by speaking up, we can prevent colleagues experiencing poor treatment:

- We will not tolerate anyone being prevented or deterred from speaking up or being mistreated because they have spoken up. If this does occur, you must tell us about it.
- In all cases the Lead Executive for Freedom to Speak Up should be informed and a "Decision Making Group" (DMG) of all appropriate staff managing the case should be held to form agreement on how to move forward. At the time of writing we are in the process of embedding good practice guidelines into our existing People processes [Detriment-guidance.docx](#).
- Upheld cases will be subject to the Trust's Disciplinary Policy