

## Annual Report of the Freedom to Speak Up Guardian

### Public Board

30 July 2026

|                             |                                               |
|-----------------------------|-----------------------------------------------|
| <b>Presented for:</b>       | Information                                   |
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| <b>Previous Committees:</b> | People Committee<br>11/6/26                   |

|                                                    |                                                                                                                                                       |
|----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Freedom of Information Act (FOIA) Exemption</b> | <input type="checkbox"/> <b>YES</b> (restricted from the FOIA) <input checked="" type="checkbox"/> <b>NO</b> (available to the public under the FOIA) |
|----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                               |                                                                                                                                                       |
|-----------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Link to Strategic Objective</b>            | People – we make LTHT a brilliant place to work for everyone in order to deliver excellent, safe, and sustainable care for every patient, every time. |
| <b>Link to Provider Capability Assessment</b> | People and culture                                                                                                                                    |
| <b>Link to CQC Well-led Statement</b>         | Freedom to speak up                                                                                                                                   |
| <b>Regulatory Impact</b>                      | Regulation 17: Good governance                                                                                                                        |

| <b>Key points</b>                                                                                                                                                                                                                                                                        | <b>Purpose</b>                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|
| 1. This report provides the annual update regarding Freedom to Speak Up processes and activity.                                                                                                                                                                                          | Assurance<br>Discussion<br>Information |
| 2. Key points to note are, <ul style="list-style-type: none"> <li>I. The number and type of FTSU cases and associated themes</li> <li>II. The ongoing activity to promote Freedom to Speak Up</li> <li>III. The development of our champion network and community of practice</li> </ul> | Assurance<br>Discussion<br>Information |

| <b>Risk Appetite Framework</b> |                                                                                                                                                                                                                                                             |                              |                   |
|--------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-------------------|
| <b>Level 1 Risk</b>            | <b>Level 2 Risks</b>                                                                                                                                                                                                                                        | <b>(Risk Appetite Scale)</b> | <b>Impact</b>     |
| Workforce Risk                 | Workforce Retention Risk - We will deliver safe and effective patient care, through supporting the training, development and H&WB of our staff to retain the appropriate level of resource to continue to meet the patient demand for our clinical services | Cautious                     | Operating outside |
| Operational Risk               | Business Continuity Risk - We will develop and maintain stable and resilient services, operating to consistently high levels of performance.                                                                                                                | Cautious                     | Operating outside |
| Clinical Risk                  | Patient Experience Risk - We will comply with or exceed minimum patient experience targets.                                                                                                                                                                 | Minimal                      | Operating outside |
| Financial Risk                 | Financial Management & WRP - We will deliver sound financial management and reporting for the Trust whilst seeking to deliver against Waste Reduction targets but always with a focus on maintaining and enhancing patient safety.                          | Cautious                     | Operating outside |
| External Risk                  | Regulatory Risk - We will comply with or exceed all regulations, retain its CQC registration and always operate within the law.                                                                                                                             | Averse                       | Operating outside |

1. Introduction

Freedom to Speak Up (FTSU) underpins the Trust’s approach to creating a positive culture where colleagues feel safe and confident to raise concerns, knowing they will be heard and that appropriate action will follow.

A strong speaking-up culture is fundamental to delivering safe, high-quality care and supporting colleague wellbeing.

This report provides an overview of all FTSU cases opened or closed during the period 1 April 2025 to 31 March 2026. It also outlines progress and summarises relevant national developments, including updates relating to the closure of the National Guardian’s Office (NGO) and the transition arrangements now in place.

This update is intended to give assurance that the Trust continues to strengthen its speaking-up culture, respond appropriately to concerns raised, and align local practice with national expectations as they evolve.

2. Overview of Concerns Raised

There are several accessible and confidential routes for colleagues to contact a FTSU Guardian. They are via Teams, email, mobile or the portable web application.

There were 259 cases raised in 2025/26 compared to 260 in 2024/25. The number of cases raised each quarter is shown in table 1.

Table 1 Number of cases raised each quarter

| Quarter | Total |
|---------|-------|
| Q1      | 53    |
| Q2      | 71    |
| Q3      | 76    |
| Q4      | 59    |

Of the 221 cases closed in 2025/26, 32 were opened in 2024/25.

100% of cases came directly to the FTSU Guardian.

Across the reporting period, the majority of concerns raised related to inappropriate attitudes and behaviours, with 105 cases categorised under that theme, highlighting the importance of promoting behaviours and professional practice across the organisation.

Appendix 2 provides a breakdown of all concerns categorised by CSU during the reporting period 1 April 2025 to 31 March 2026

| Theme                                        | Numbers    | Percentage of cases | National Guardians Office Data <sup>\$</sup> |
|----------------------------------------------|------------|---------------------|----------------------------------------------|
| Patient safety/quality                       | 34         | 13%                 | 18%*                                         |
| Worker wellbeing                             | 69         | 27%                 | 41%                                          |
| Bullying and harassment                      | 40         | 15%                 | 17%                                          |
| Other inappropriate attitudes and behaviours | 105        | 40%                 | 41%                                          |
| Reported Negative Impact**                   | 4          | 2%                  | 3%                                           |
| Not sure***                                  | 8          | 3%                  | -                                            |
| <b>Total</b>                                 | <b>260</b> |                     |                                              |

<sup>\$</sup> One case can contain multiple elements, therefore, the sum of cases with an element of patient safety/quality, worker safety can be higher than the total number of cases brought to Guardians. This is why the percentage totals are above 100%.

\*Nationally, the number of cases reported was 3% lower than in 2024/25, continuing a longer-term downward trend.

\*\*Two of these cases were self-categorised and did not require the implementation of trust process. Two cases are currently under investigation.

\*\*\*On the FTSU system, staff can self-categorise *not sure* when they raise a concern

### 3. Anonymous and Confidential Cases

Colleagues can raise concerns anonymously where they choose not to reveal their identity to anyone. LTHT operate an online system to maintain communication with colleagues who wish to raise concerns anonymously.

18% of concerns were raised anonymously during the period 1 April 2025 to 31 March 2026. Nationally, the NGO report that 12% of all cases are reported anonymously.

Table 2 highlights the number of FTSU cases raised anonymously over the past three years.

Table 2 Anonymous Cases

| Number of cases     | 2023-24 | 2024-25 | 2025-26 |
|---------------------|---------|---------|---------|
| Total FTSU concerns | 129     | 261     | 259     |
| Anonymous concerns  | 2.3%    | 2.3%    | 18%     |

Given the number of concerns raised anonymously, activity is planned to understand why colleagues are not comfortable revealing their identity.

#### **4. Activity to foster a positive culture where colleagues feel confident to speak up and that their voice will be heard.**

During the last 12 months the FTSUG has attended internal sessions to promote the service and address the barriers to speaking up, including,

- Bespoke training with Chapel Allerton staff
- Bespoke training for Women's CSU
- Bespoke training for Urgent Care CSU
- Finance team time out session
- Leeds Dental Institute away day
- Pathology specialty Drs induction session
- Pathology senior leaders meeting
- Awareness sessions for endoscopy staff
- Awareness session for Clinical Site Managers
- Clinical and Health Psychology away day
- Joint session with GMC for FY1 doctors

#### **5. Staff Survey**

The 2025 Staff Survey results present a mixed picture for LTHT across the four raising-concerns indicators. This aligns with the national position, where the "Raising Concerns" sub-score has fallen to a five-year low.

Appendix 1 provides the last 3 years data and the 2025 benchmark comparison, which show that LTHT consistently scores above the national average across all four indicators, with the largest positive gap in Q20b (confidence the organisation would address concerns). Although local scores, have declined, LTHT continues to outperform the national benchmark.

In response, targeted promotion and communication activity will be delivered in areas where awareness and confidence appear lower, ensuring colleagues understand how to access the Freedom to Speak Up service and what support is available. During 2026/27, the FTSUG will strengthen visibility through attendance at key events, including CSU meetings, colleague engagement events and drop-in sessions, and through targeted training for priority employee groups such as leadership teams. These focused interventions aim to improve awareness, trust and confidence in speaking up.

#### **6. Forward Plans**

- Speak up, listen up, follow up communications and engagement campaign  
A revised plan, developed by the Communications team will be rolled out across 26/27 with specific actions each quarter.
- Promotion of the FTSU Policy  
Targeted development for supervisors, leaders, and managers, in respect of guidance that the FTSU Policy is widely understood and consistently applied, effectively managing concerns
- Review of the champion model  
The development of a network of champions remains a central part of the strategy to develop a culture of speaking up, listening up and following up across the organisation.

The introduction of the speaking up framework across the organisation has seen an increase in the numbers of champions and the majority of CSUs have identified lead champions. Next steps are to identify lead champions in non-clinical CSUs. Refresher training has now been developed as part of a rolling programme for champions, coupled with a dedicated Teams channel and face to face development sessions.

- Targeted work with CSUs with the lowest engagement scores and lowest key questions related to speaking up  
The FTSUG will work with the People Function to identify key actions for colleagues and those in managerial roles to support learning and development.
- Consider any learning from Thirlwall inquiry/report  
The FTSUG will await the outcome of the Thirlwall inquiry, and with the community of practice developed by the Leeds Guardians, identify best practice.
- Triangulation of FTSU data with patient safety and quality metrics  
The FTSUG now attends the monthly People Improvement Framework meetings. This provides a flag for areas where workforce metrics are of concern and highlights areas where focus on staffs' ability to speak up may be an issue.  
The FTSU data, including numbers of open cases, numbers of champions, and training completions are included within the wider metrics to provide triangulation.
- The FTSUG will monitor changes to national picture following integration of NGO with NHSE  
From 1 July 2026, NHS organisations will assume greater responsibility for embedding effective Freedom to Speak Up arrangements. NHS organisations will continue to be required to submit Freedom to Speak Up data through the national collection system, and the Freedom to Speak Up Guardian role remains a mandated requirement within the NHS Standard Contract. National funding for psychological support for Guardians will end on 31 December 2026. NHS Organisations are expected to ensure appropriate wellbeing and psychological support remains available for Guardians which has always been made available to our Guardian.

## **7. Assurance**

LTHT continues to maintain a robust and effective FTSU function. It is timely that the function will increase by 1 w.t.e. The service remains accessible and well-used, with concerns managed in line with Trust policy. Colleagues can raise concerns via multiple channels including directly with managers and union representatives. Staff survey results show that confidence in raising concerns remains above national benchmarks, and targeted actions are in place to understand why concern raisers do not wish to share their identity. The Trust is prepared for national changes following the transition of the National Guardian's Office. Overall, this report provides assurance that the Trust is committed to sustaining a positive speaking-up culture and responding appropriately to concerns raised.

## **8. Quality and Performance Implications**

All Freedom to Speak up Concerns have the potential to impact quality and performance.

## **9. Financial Implications**

The work required to deliver the actions identified in this paper are achieved within existing resources.

## **10. Risk**

The contents of this report do not significantly impact the risks identified on page 1 of this report.

## **11. Communication and Involvement**

There is a communication work stream as part of the FTSU Steering Group to continue to increase the profile of speaking up.

## **12. Impact on Equality & Health Inequalities**

No policy, activity, or way of working is being developed or changed. This report is intended to be for assurance purposes only and therefore no equality analysis is required.

## **13. Publication Under Freedom of Information Act**

This paper has been made available under the Freedom of Information Act 2000.

## **14. Recommendation**

The Board is asked to acknowledge that the policy and processes outlined by NHSE and the NGO are being adhered to in the Trust.

## Appendix 1

### Staff Survey 2025

The staff survey includes four questions related to speaking up, the results for LTHT are included below with comparators across the Picker average.

| Staff Survey Question                                                                 | Trust<br>2025 | Trust<br>2024 | Trust<br>2023 | Picker<br>Average<br>2025 |
|---------------------------------------------------------------------------------------|---------------|---------------|---------------|---------------------------|
| Secure raising concerns about unsafe clinical practice                                | 70.5%         | 74%           | 74.1%         | 69.6%                     |
| Confident that the organisation would address concerns about unsafe clinical practice | 60.7%         | 61.2%         | 59.7%         | 53.8%                     |
| Safe to speak up about anything that concerns me in this organisation                 | 60.8%         | 65.6%         | 67.6%         | 59.0%                     |
| The organisation would address any concerns that I raised                             | 46.8%         | 53.9%         | 55.4%         | 46.1%                     |

## Appendix 2

### Concerns by CSU/Corporate Area

| CSU                            | 25/26<br>Number of Concerns<br>Raised |
|--------------------------------|---------------------------------------|
| Abdominal Medicine and Surgery | 14                                    |
| Adult Critical Care            | 12                                    |
| Adult Therapies                | 17                                    |
| Cardiorespiratory              | 10                                    |

|                               |    |
|-------------------------------|----|
| Chapel Allerton               | 5  |
| CEO office                    | 1  |
| Chief Medical Officers office | 1  |
| Chief Nurse office            | 9  |
| Chief Operating Officer       | 4  |
| Children's                    | 12 |
| DIT                           | 6  |
| Estates and Facilities        | 8  |
| Finance                       | 1  |
| Head & Neck                   | 8  |
| People Function               | 5  |
| Oncology                      | 7  |
| Neurosciences                 | 8  |
| Leeds Dental Institute        | 2  |
| MMPS                          | 5  |
| Outpatients                   | 13 |
| Pathology                     | 13 |
| Research and Innovation       | 18 |
| Radiology                     | 12 |
| Specialty Integrated Medicine | 12 |
| Theatres and Anaesthetics     | 11 |

|                         |    |
|-------------------------|----|
| Trauma Related Services | 4  |
| Urgent Care             | 5  |
| Women's                 | 15 |
| Not declared            | 22 |