



Meeting:	Public Services Delivery Scotland Board
Meeting date:	Friday 26 June 2026
Title:	NHS Education for Scotland (NES) Annual Whistleblowing Performance Report 2025-2026
Paper No.	PSDB/26/26
Responsible Executive/Non-Executive:	Christina Bichan, Director of Planning, Performance and Transformation
Report Author:	Nancy El-Faragy, Planning and Corporate Governance

1. Purpose

- 1.1. On 01 April 2026, Public Services Delivery Scotland (PSD Scotland) was established, and brought together the services previously delivered by NHS Education for Scotland (NES) and National Services Scotland (NSS) into a single national organisation.
- 1.2. In line with the requirements of the National Whistleblowing Standards¹ (the Standards), the purpose of this report is to present the legacy NES 2025-2026 Annual Whistleblowing Report.

2. Recommendation

- 2.1. The PSD Scotland Board is invited to approve the attached annual report through scrutiny.
- 2.2. As the responsible executive I am satisfied that the requirements of the National Whistleblowing Standards have been met and commend this report to the PSD Scotland Board for approval.

¹ Independent National Whistleblowing Officer (2021) 'The National Whistleblowing Standards - April 2021'. Edinburgh: Scottish Public Services Ombudsman. Available at: <https://inwo.spso.org.uk/sites/inwo/files/Standards/NationalWhistleblowingStandards-AllParts.pdf> (Accessed: 24 January 2022).

3. Report Summary

Situation

- 3.1. Launched in April 2021, the Standards set out how the Independent National Whistleblowing Officer (INWO) expects all NHS Scotland service providers to handle any whistleblowing concerns. In line with these Standards, all NHS Scotland providers are required to publicly report on their whistleblowing performance. This report therefore covers NES's annual whistleblowing performance over 01 April 2025 to 31 March 2026 (inclusive).

Background

- 3.2. NES has concluded its fifth year of implementing the Standards, in which annual performance reports are tabled at the Staff Governance Committee, and thereafter to the Board, and once published, to the INWO.
- 3.3. Since the introduction of the Standards, we have continued to build on the knowledge and insights gained, while fostering a culture in which all individuals feel empowered to raise concerns in the public interest. Our ongoing efforts have focused on engaging with staff to cultivate a workplace environment that values openness and transparency, and on ensuring that all concerns raised are investigated thoroughly and impartially.

4. Assessment

4.1. Learning, changes or improvements (KP1)

- 4.1.1. There is ongoing engagement with the medical directorate regarding improvements to supervision arrangements, which stemmed from a whistleblowing concern received during quarter two of 2025-2026. Actionable learning is being progressed.

4.2. The experiences of all those involved in the whistleblowing procedure (KP2)

- 4.2.1. There is ongoing positive and respectful engagement with all staff involved in the whistleblowing process. Informal feedback to date has been positive.

4.3. Staff Engagement, Training and Awareness Raising (KPI 3)

- 4.3.1. Under legacy NES arrangements, line managers are required to complete the line manager-level training on TURAS Learn (this forms part of the suite of 'Essential Learning'). As of 31 March 2026, the compliance rate was 91% (338/373), with 35 line managers yet to complete the training. As of 31 March 2026, 74% of all staff (986/1333) completed the optional overview level training.

4.3.2. All staff can also optionally complete the three levels of training available, and engagement has been positive to date. As of 31 March 2026, 74% of all core staff² (986/1333) completed the overview level training (Table 1).

- The overview level training: for people who need an overview of the Standards.
- The line manager level training: for people who are line managers or work in a similar role, who are likely to receive concerns from colleagues in their day-to-day work.
- The senior manager level training: for senior managers who are involved with not only receiving concerns, but also investigating, responding to, and reporting on whistleblowing concerns to the board.

Table 1: Number of core staff employees who (in some cases optionally) completed whistleblowing training as of 31 March 2026.

Frequency (and percentage) of core staff (1333) who (in some cases optionally) completed whistleblowing training, as of 31 March 2026.		
1.	"Overview" level training completed.	986/1333 (74%)
2.	"Line manager" level training completed.	468/1333 (35%)
3.	"Senior manager" level training completed.	271/1333 (20%)
Frequency (and percentage) of line managers (373) who completed the mandatory line manager training, as of 31 March 2026.		
4.	Line managers who completed the mandatory "Line Manager" training.	338/373 (91%)
Frequency (and percentage) of senior managers (6) who optionally completed senior manager training, as of 31 March 2026.		
5.	Senior managers ³ who optionally completed the "Senior Manager" training.	5/6 (83%)

4.4. **Attached: NES 2025-2026 Annual Whistleblowing Report**

4.4.1. Further information on NES's whistleblowing performance and activities throughout 2025-2026 is attached to this cover paper.

4.5. **Quality, Value, Care and Technology**

4.5.1. All concerns received are treated as opportunities for learning and quality improvement, where appropriate. With time, there may be the opportunity to undertake trend analysis to support improved service delivery/more responsive services, where applicable.

² This excludes Doctors and Dentists in Training.

³ Senior managers in this context are defined as those one of the Executive Cohort Grade. They are also included in the line manager count.

4.6. **Workforce**

- 4.6.1. The implementation of the Standards aims to support all staff in speaking up or in raising concerns in the public interest. All staff have access to a range of resources and learning opportunities, which can help promote a culture of openness and transparency. The legacy NES arrangements include a pool of six Confidential Contacts who offer staff access to individuals with a diverse range of skills, experiences and backgrounds. The Confidential Contacts are not involved in investigating concerns; their role includes providing information and advice on the whistleblowing process, as well as in signposting to other relevant information and resources. Staff wellbeing is promoted by providing a supportive environment for speaking up.

4.7. **Financial**

- 4.7.1. This work is managed within existing budgets and governance structures, with dedicated staff resource in place to support delivery.

4.8. **Education and Training**

- 4.8.1. All staff are signposted to training available on [TURAS Learn](#)⁴, which includes learning opportunities for all staff groups, including line managers, senior managers and Confidential Contacts. The training is accessible to anyone providing services on behalf of the NHS in Scotland, including students, contractors and volunteers. As part of reporting against the 10 Key Performance Indicators, information on staff perceptions, awareness, and training is included in quarterly and annual whistleblowing performance reports.
- 4.8.2. Staff are routinely encouraged to complete their 'Essential Learning', which includes the mandatory line manager-level training, supported by regular communications.
- 4.8.3. Whistleblowing all-staff webinars, and other learning resources, are made available on our whistleblowing intranet page. During 2025-2026, the following resources were made available to all staff:
- The 'Learning at Work Week' whistleblowing webinar recording and presentation (13 May 2025).
 - The Line Managers' Network speaking up presentation (26 August 2026).
 - Speak up week 2025 promotional article "Ring in October – A big week ahead" (25 September 2026).
 - Launch of speak up week 29 September to 03 October 2026 article (29 September 2026).
 - The 2025 speak up week 'Valuing staff voices' all-staff webinar (01 October 2026) recording (16 October 2026), which included a recorded contribution by Chief Executive, Karen Reid.

⁴ SPSO (2021). 'National Whistleblowing Standards training, Turas Learn'. Available at: <https://learn.nes.nhs.scot/40284/national-whistleblowing-standards-training> (Accessed: 31 May 2021).

4.9. Information Governance

- 4.9.1. There are no specific information governance matters pertinent to this report and information on NES's whistleblowing performance is made appropriately available to the public through routine reporting arrangements.

4.10. Environmental and Climate Sustainability

- 4.10.1. In line with the requirements of [DL\(2021\) 38](#),⁵ and specifically paragraphs 14 and 44, a 'digital first' approach is adopted by default where possible:

- Business travel is minimised through the use of online learning opportunities, electronic correspondence and virtual meetings (e.g., Microsoft Teams), etc.
- In addition, paper use is minimised, with case management, documentation and communication almost always exclusively managed electronically, wherever possible.

4.11. Equality, Diversity, Human Rights and Health Inequalities

- 4.11.1. The general literature in this area acknowledges some perceived barriers and challenges that speaking up and whistleblowing may present, including concerns about organisational culture, hesitance, fear of retribution, lack of awareness of reporting routes, and variability in organisational response. The implementation of the Standards in April 2021 aimed to provide a 'Once for Scotland' procedure to speaking up in the public interest, throughout NHS Scotland. The NES approach over the past five years of implementing the Standards has included transparency and openness, with a focus on ongoing learning and improvement, supporting a culture of equity and inclusivity and supporting staff to feel safe to speak up.
- 4.11.2. Whilst we do not typically deliver any direct services to children, we influence this group through our development of the workforce who do. This is in line with our Corporate Parenting duties, as outlined in the Children and Young People (Scotland) Act 2014. Former employees, staff, contractors, students, and anyone who works with us, can raise a whistleblowing concern.

4.12. Other Impacts

- 4.12.1. It is acknowledged that staff (and public) confidence in the whistleblowing process is important. Work continues to support transparency and a positive speaking up culture through visible and supportive leadership, clear communication and ongoing engagement.

⁵ McCallum, R. (2021) 'A policy for NHS Scotland on the climate emergency and sustainable development - DL (2021) 38'. Edinburgh: Scottish Government. Available at: <https://www.publications.scot.nhs.uk/files/dl-2021-38.pdf>.

4.13. **Risk Assessment/Management**

- 4.13.1. It is recognised that any line manager could be expected to deal with a stage one whistleblowing concern, and indeed, any member of staff could receive a whistleblowing concern. Through ongoing training and awareness raising opportunities, the risk of relevant staff not being equipped to deal with such scenarios is reduced.

4.14. **Communication, Involvement, Engagement and Consultation**

- 4.14.1. Communication is ongoing with staff and external audiences (where appropriate), including through our online web presences and learning resources.

4.15. **Route to the Meeting**

- 4.15.1. This report was presented to the PSD Scotland Staff Governance Committee on Tuesday 16 June 2026.

5. **List of appendices**

- 5.1. Attached: NHS Education for Scotland 2025-2026 Annual Whistleblowing Report.

NHS Education for Scotland Annual Whistleblowing Report 2025-2026

**Public Services Delivery Scotland (PSD Scotland)
Board meeting June 2026**

Contents

<u>1.</u>	<u>NHS Education for Scotland whistleblowing 2025-2026 ‘at-a-glance’</u>	<u>3</u>
<u>2.</u>	<u>Introduction</u>	<u>4</u>
<u>3.</u>	<u>Context and legislative background</u>	<u>6</u>
<u>4.</u>	<u>Whistleblowing arrangements and governance</u>	<u>9</u>
<u>5.</u>	<u>Activities during 2025-2026</u>	<u>12</u>
<u>6.</u>	<u>Whistleblowing annual return and key performance indicators</u>	<u>25</u>
<u>7.</u>	<u>Conclusion</u>	<u>28</u>
<u>8.</u>	<u>Appendix A: Summary of key performance indicators</u>	<u>29</u>
<u>9.</u>	<u>Appendix B: Learning at Work Week learning session 13 May 2025</u>	<u>30</u>
<u>10.</u>	<u>Appendix C: Line Managers’ Network session 26 August 2025</u>	<u>33</u>

1. NHS Education for Scotland whistleblowing 2025-2026 'at-a-glance'

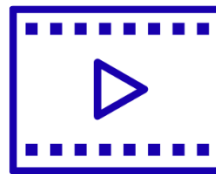


NHS Education for Scotland (NES) Whistleblowing 2025-2026 At-a-glance

91% of line managers completed the required training.

NES was awarded the 'Development' level accreditation on the 'Equally Safe at Work' initiative - an employer accreditation programme.

Activities during Speak up Week included a video introduction from Karen Reid and an all staff webinar, which was hosted by Gillian Mawdsley.



1

**CONCERN
RECEIVED**

3

**WEBINARS
DELIVERED**

Once again, NES achieved the achieved the **highest score** (in NHS Scotland) on the whistleblowing statements:

- Confident to safely raise concerns about issues in the workplace.
- Confident that concerns will be followed up and responded to.



Figure 1: Whistleblowing 2025-2026 'at a glance' summary.

2. Introduction

Brief context

- 1.1. The Public Services Reform (The Scottish Public Services Ombudsman) Healthcare Whistleblowing Order 2020¹ created the role of the Independent National Whistleblowing Officer (INWO) for the NHS in Scotland, which is based within the Scottish Public Services Ombudsman (SPSO). Launched in April 2021, the National Whistleblowing Standards² (the Standards) set a consistent and transparent approach to handling concerns, and supporting staff to speak up in the public interest.

Purpose and scope of the report

- 1.2. On 01 April 2026, Public Services Delivery Scotland (PSD Scotland) was established, bringing together the services previously delivered by NHS Education for Scotland (NES) and NHS National Services Scotland (NHS NSS) into a single national organisation.
- 1.3. This is the fifth annual whistleblowing report for NES, now a predecessor organisation of PSD Scotland, and covers the period 01 April 2025 to 31 March 2026.
- 1.4. Under the Standards, NHS Scotland boards must report whistleblowing concerns quarterly and publish an annual report. This report brings together the 2025-2026 quarterly reports presented to the following committees:
- NES Staff Governance Committee: 14 August 2025 (quarter one report), 06 November 2025 (quarter two report), and 19 February 2026 (quarter three report).
 - PSD Scotland Partnership Forum: 18 May 2026 (quarter four report).
 - PSD Scotland Staff Governance Committee: 12 June 2026 (quarter four report).
- 1.5. This annual report was tabled at the PSD Scotland Staff Governance Committee on 12 June 2026. It is now tabled at the PSD Scotland Board (26 June 2026) for assurance and scrutiny.

¹ Crown Copyright (2020) 'Scottish Statutory Instruments. 2020 No. 5. The Public Services Reform (The Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020'. Available at: <https://www.legislation.gov.uk/ssi/2020/5/made> (Accessed: 22 October 2020).

² Independent National Whistleblowing Officer (2021) 'The National Whistleblowing Standards - April 2021'. Edinburgh: Scottish Public Services Ombudsman. Available at: <https://inwo.spsso.org.uk/sites/inwo/files/Standards/NationalWhistleblowingStandards-AllParts.pdf> (Accessed: 24 January 2022).

Report structure

- 1.6. This report sets out performance against the whistleblowing Key Performance Indicators (KPIs) (Appendix A), the arrangements and governance in place, key training and awareness activity, and learning and improvement over the year.
- 1.7. The report is structured as follows:
 - The context and legislative background (p. 6).
 - Whistleblowing arrangements and governance (p. 9).
 - A summary of activities completed during 2025-2026 (p. 12).
 - The whistleblowing annual return and Key Performance Indicators (KPIs) (p. 25).
 - A concluding section (p. 28).
 - Appendices, including a summary of the KPIs for 2025-2026 (p. 29).

3. Context and legislative background

- 3.1. To understand the background to current whistleblowing arrangements across NHS Scotland's health boards, it is helpful to consider several key reports and legislative developments.

The Staff Governance Standard

- 3.2. The Staff Governance Standard³ provides a framework for NHS Scotland organisations and employees. It outlines the responsibility of employers to help ensure that staff feel safe to speak up about any wrongdoing in the public interest. It also places a responsibility on staff to raise concerns about issues that may cause concern or alarm, in line with the organisation's whistleblowing policy.

The Francis report

- 3.3. The report of the Mid-Staffordshire NHS Foundation Trust public inquiry⁴ highlighted the need for a common patient-centred culture, clear standards and measures of compliance, and openness, transparency and candour throughout 'the system'. The resulting 290 recommendations aimed to put patients and their safety first, with cultural change required at all levels. The recommendations included patient, public and local scrutiny, performance management and clear metrics on quality.

The Freedom to Speak Up review

- 3.4. The Freedom to Speak Up review⁵ highlighted the need for additional measures to ensure that all NHS staff can freely raise any patient safety concerns. The report was related to NHS England, however, the Scottish Government welcomed it and used its findings to further support, encourage and promote whistleblowing in NHS Scotland. The findings were also considered in relation to whistleblowing arrangements in place at the time and the potential change to NHS Scotland's whistleblowing approach.

³ Scottish Government (2012) 'Staff Governance Standard: A Framework for NHS Scotland Organisations and Employees'. 4th edition. Edinburgh: Scottish Government. Available at: <https://www.staffgovernance.scot.nhs.uk/media/1342/staff-governance-standard-edition-4.pdf> (Accessed: 28 June 2019).

⁴ Crown Copyright (2013) 'Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry, Chaired by Robert Francis QC: Executive Summary'. London: The Stationery Office. Available at: [http://webarchive.nationalarchives.gov.uk/20150407084003/http://www.midstaffspublicinquiry.com/sites/default/files/report/Executive summary.pdf](http://webarchive.nationalarchives.gov.uk/20150407084003/http://www.midstaffspublicinquiry.com/sites/default/files/report/Executive%20summary.pdf) (Accessed: 3 August 2015).

⁵ Francis, R. (2015) 'Freedom to speak up. An independent review into creating an open and honest reporting culture in the NHS.' Available at: https://webarchive.nationalarchives.gov.uk/20150218150953/https://freedomtospeakup.org.uk/wp-content/uploads/2014/07/F2SU_web.pdf (Accessed: 11 November 2019).

The Sturrock review

- 3.5. Commissioned by the Scottish Government, the Sturrock report⁶ investigated allegations of bullying, harassment and poor workplace culture within NHS Highland. Proposals for improvement included an independent whistleblowing process and the provision of an independent “guardian” for anyone wishing to report inappropriate behaviour, and for those whom such behaviour is alleged.

The Scottish Government’s response to the Sturrock review

- 3.6. The Scottish Government’s response⁷ to the 2019 Sturrock report highlighted the required learning and reflection for all NHS Scotland boards, and committed to building a more open, honest and inclusive culture. Several initiatives were subsequently put in place across NHS Scotland, and these included:
- The establishment of an Independent National Whistleblowing Officer (INWO) for NHS Scotland, to investigate the handling of any whistleblowing complaints (see next paragraph).
 - The appointment of dedicated Whistleblowing Champions (as Non-Executive Directors) to each NHS Scotland board.
 - A review of the ‘Once for Scotland’ workforce policies⁸.
 - A standardised ‘Once for Scotland’ procedure for handling any whistleblowing concerns.
- 3.7. The Public Services Reform (The Scottish Public Services Ombudsman (Healthcare Whistleblowing) Order 2020⁹ gave the SPSO the power to undertake the role of the INWO, providing whistleblowers the opportunity to seek an independent external review of how their concerns have been handled. The INWO also has a national leadership role in providing direction, support and guidance to NHS Scotland boards in relation to the Standards¹⁰. The Standards, which were launched in April 2021, set out a consistent NHS Scotland-wide procedure for the handling of whistleblowing concerns.

⁶ Sturrock, J. (2019) ‘Report to the Cabinet Secretary for Health and Sport into: Cultural issues related to allegations of bullying and harassment in NHS Highland’. Edinburgh: Scottish Government. Available at: <https://www.gov.scot/publications/report-cultural-issues-related-allegations-bullying-harassment-nhs-highland/> (Accessed: 30 June 2019).

⁷ Scottish Government (2019) ‘The Scottish Government Response to the Sturrock Review: into cultural issues related to allegations of bullying and harassment in NHS Highland’. Edinburgh: Scottish Government. Available at: <https://www.gov.scot/publications/scottish-government-response-report-bullying-harassment-nhs-highland/> (Accessed: 30 June 2019).

⁸ Crown copyright (NHS Scotland) (2024) ‘Workforce policies’. Available at: <https://workforce.nhs.scot/policies/> (Accessed: 11 April 2024).

⁹ Crown Copyright (2020) ‘Scottish Statutory Instruments. 2020 No. 5. The Public Services Reform (The Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020’. Available at: <https://www.legislation.gov.uk/ssi/2020/5/made> (Accessed: 22 October 2020).

¹⁰ Independent National Whistleblowing Officer (2021) ‘The National Whistleblowing Standards - April 2021’. Edinburgh: Scottish Public Services Ombudsman. Available at: <https://inwo.spsso.org.uk/sites/inwo/files/Standards/NationalWhistleblowingStandards-AllParts.pdf> (Accessed: 24 January 2022).

The Public Interest Disclosure Act 1998

3.8. The Public Interest Disclosure Act 1998¹¹ aims to protect employees who make disclosures in the public interest and allows them to bring action with respect to victimisation. The qualifying disclosures for protection are:

- A criminal offence.
- Failing to comply with a legal obligation.
- A miscarriage of justice.
- A risk to health and safety.
- A risk to the environment.
- Concealment of any of the above.

¹¹ Crown Copyright (1998) 'Public Interest Disclosure Act 1998. Chapter 23'. Available at: <http://www.legislation.gov.uk/ukpga/1998/23/data.pdf> (Accessed: 29 October 2019).

4. Whistleblowing arrangements and governance

The National Whistleblowing Standards

- 4.1. The Standards comprise of:
- The whistleblowing principles, which underpin the approach to handling any whistleblowing concerns.
 - The definitions of “whistleblowing” and “whistleblower”.
 - An overview of the procedure, including who can raise a concern and a summary of how such concerns are handled.
 - The required governance arrangements.
 - Arrangements for Health and Social Care Partnerships, organisations providing student and trainee placements, and volunteers.

Whistleblowing arrangements

- 4.2. Concerns may be best addressed initially through routine operational processes. Staff are encouraged to raise issues locally, with the reassurance that concerns will be addressed professionally, promptly, and constructively. Early resolution at this stage can be instrumental in preventing issues from escalating. While not typically part of the formal whistleblowing process, these early steps can serve as important precursors and may help demonstrate that reasonable efforts have been made to resolve matters.
- 4.3. Where business-as-usual processes have been exhausted, or are not considered appropriate – for example, where concerns are serious or high risk – a formal whistleblowing concern may be the most appropriate course of action. Although whistleblowing should not be viewed as a barrier to raising concerns, it is particularly relevant where other routes have been exhausted, are inappropriate, or where the nature of the concern warrants formal escalation.

The definition of whistleblowing

- 4.4. “Whistleblowing” is defined as¹²:
- *“...when a person who delivers services or used to deliver services on behalf of a health service body, family health service provider or independent provider (as defined in section 23 of the Scottish Public Services Ombudsman Act 2002) raises a concern that relates to speaking up, in the public interest, about an NHS service, where an act or omission has created, or may create, a risk of harm or wrongdoing.”*

¹² Crown Copyright (2020) ‘Scottish Statutory Instruments: 2020 No. 5. Public Services Reform: Scottish Public Services Ombudsman. Public Health. National Health Service. The Public Services Reform (The Scottish Public Services Ombudsman) (Healthcare Whistleblowing) Order 2020’. The Stationery Office. Available at: https://www.legislation.gov.uk/ssi/2020/5/pdfs/ssi_20200005_en.pdf (Accessed: 21 April 2022).

Distinguishing whistleblowing from other processes

- 4.5. Each concern is assessed on its own merits and in accordance with the Standards. Under the Standards, all whistleblowers are entitled to support, legal protection, and confidentiality. A concern may be considered under the formal whistleblowing process where:
- The issue is not solely related to a personal employment or Human Resources matter. For example, some concerns may be better raised under grievances, or bullying and harassment policies.
 - The concern is in the public interest (for example, patient safety, quality of care, or wrongdoing).
 - The concern is normally raised within six months of the matter occurring or coming to light.
 - Business-as-usual processes have been exhausted or are not considered appropriate in the circumstances. In such cases, whistleblowing may be the most suitable route for raising the concern.

The three-stage procedure

- 4.6. The Standards outline a three stage procedure for the handling of whistleblowing concerns in NHS Scotland.
- **Stage one** involves local review, and where required, a limited investigation of the concerns raised. A response, including an explanation of the outcome, is normally issued within five working days. Any actions taken in response to the concern raised are outlined. Following the conclusion of stage one, whistleblowers are signposted to the stage two review process (should they remain dissatisfied with the outcome).
 - **Stage two** is used for concerns that are complex and require a more detailed investigation. This stage may also be used where a concern can be escalated from stage one. The concern is acknowledged within three working days and a detailed response is normally issued within 20 working days, where possible.
 - **Stage three** offers whistleblowers the opportunity to seek an independent external review by the INWO.

The Non-Executive Whistleblowing Champion and the role of the Board

- 4.7. To support implementation of the Standards, all NHS Scotland boards are required to appoint a dedicated Whistleblowing Champion as a Non-Executive Director. The role provides independent oversight of the whistleblowing agenda and helps assure the board of the organisation's compliance with the Standards.
- 4.8. The Whistleblowing Champion has no operational responsibility for the application of the whistleblowing policy or the investigation of concerns. This dedicated role replaced the previous arrangement whereby a nominated Non-Executive Director held additional whistleblowing responsibilities¹³.
- 4.9. Boards are required to monitor whistleblowing activity and performance on a quarterly basis through updates presented at public board meetings. In addition, an annual report on whistleblowing performance must be produced and published.

The Confidential Contacts

- 4.10. Confidential Contacts are appointed in each NHS Scotland board to provide support and advice to whistleblowers (or potential whistleblowers). They offer a confidential and informal source of guidance, helping individuals understand the options available to them, including whether and how to raise a concern, and the alternative support routes and processes that may be available.
- 4.11. Confidential Contacts are not involved in the operational investigation or management of concerns. By encouraging individuals to speak up, Confidential Contacts play an important role in promoting a positive speak up culture and trust in the whistleblowing process.

National workforce policies

- 4.12. The Standards are part of the 'Once for Scotland' Workforce Policies programme¹⁴. These are single, standardised policies that apply to all NHS Scotland employees. There are currently 35 policies under this banner, and include adverse weather, career break, flexible work pattern and new parent support.

¹³ Gray, P. (2015) 'Non-Executive Whistleblowing Champion. Letter to NHS Scotland Health Board Chairs (29 September 2015)'. Edinburgh: Scottish Government.

¹⁴ Crown copyright (NHS Scotland) (2024) 'Workforce policies'. Available at: <https://workforce.nhs.scot/policies/>.

5. Activities during 2025-2026

- 5.1. This section of the report provides a summary of activities completed as part of the whistleblowing agenda. During 2025-2026, NES continued to encourage and foster a positive speak up culture through a range of initiatives and ongoing learning and awareness raising opportunities.

Whistleblowing governance and assurance

- 5.2. During 2025-2026, the NES Staff Governance Committee and the NES Board received the following whistleblowing updates:
- Staff Governance Committee:
 - The quarter four 2024-2025 whistleblowing report (01 May 2025).
 - The 2024-2025 annual whistleblowing report (01 May 2025).
 - The quarter one 2025-2026 whistleblowing report (11 August 2025).
 - The quarter two 2025-2026 whistleblowing report (06 November 2025).
 - The quarter three 2025-2025 whistleblowing report (19 February 2026).
 - Board:
 - The NES 2024-2025 annual whistleblowing performance report (22 May 2026).
 - Updates were also noted in the Chief Executive's reports.
- 5.3. The quarterly reports and the annual report were shared with the INWO (as per the agreed processes in place). The 2024-2025 annual report was published on the NES corporate website (as per the requirements of the Standards) in June 2025.

Responding to concerns

- 5.4. During quarter two of 2025-2026, NES received one whistleblowing concern under the Standards. It related to supervision arrangements for resident doctors in training and the balance between service provision and learning. The concern was acknowledged on the day of receipt and progressed through a stage 2 investigation. An authorised extension was applied because key internal and external contributors were not all available within the standard timescale. At the time of reporting, the investigation report was in final sign off. While the case remains open, learning and improvement actions have continued in parallel. On the information currently available, there is no evidence of a wider systemic weakness in whistleblowing arrangements; however, the case reinforces the importance of timely handling, clear oversight and ongoing learning as PSD Scotland embeds future arrangements.

Whistleblowing training

- 5.5. Whistleblowing training for line managers forms part of our suite of 'essential learning'. Improvements were made to the reminder system for completing essential learning. Previously, staff received a single reminder 90 days before expiry. Under the new system, reminders are now automatically issued at three intervals: three months, one month, and one week before expiry. These changes were communicated to all staff in April 2025. An additional communication in June 2025 highlighted the corporate objectives for all staff:
- "Identify and undertake a learning activity to increase understanding and self-reflection on anti-racism, equality, diversity and inclusion."
 - "Complete all Essential Learning aligned to my role".
- 5.6. In order to improve NES's whistleblowing line manager training compliance, the Staff Governance Committee requested an analysis of managers who completed the required training versus those who had yet to complete. Table 1 (overleaf) summarises key findings from this analysis, comparing completers and non-completers across several dimensions. This information will be used to shape further activity focussed on increasing training compliance.
- 5.7. Key insights from this analysis include:
- Leadership gap: Senior managers feature prominently in the non-completer group, which has a 'knock-on' effect on their teams.
 - Cultural signal: Completion of learning aligns with the overall compliance culture. In addition, where managers do not complete modules, their teams are also non-compliant.
 - Targeted action: Focused interventions may yield the quickest and most substantial impact.
- 5.8. As of 31 March 2026, the compliance rate was 91% (338/373), with 35 line managers yet to complete the training. Further information on whistleblowing training and awareness raising activities is noted in the next section (KPIs).

Table 1: Comparison of line managers who completed the mandatory line manager whistleblowing training against those who had not completed it (as of 03 October 2025¹⁵).

Analysis category	Non-completers	Completers
Headline figures	38 managers	342 managers
Tenure profile	Both groups are dominated by longer-serving staff, but the non-completer group has proportionally more senior managers compared to completers.	
Working pattern	Permanent staff make up the bulk in both groups. However, non-completers have a relatively higher proportion of part time staff (37% versus 21%) than the completer group.	
Grade distribution	Spread across senior and mid-level roles, including consultants.	Concentrated in Band 8A (71), Band 8B (61), Band 7 (51), Band 5 (46), Band 8C (42), and Band 6 (33).
	Non-completers are weighted towards senior management roles, whereas completers are concentrated at Bands 5-8.	
Compliance with other essential learning	Completers show near-universal compliance across all modules, while non-completers show under-compliance, in other modules such as Safe Information Handling, Child Protection, Adult Support and Protection, and Equality, Diversity and Human Rights.	
Impact on teams	Non-completers' teams are marked as 100% non-compliant.	Completers' teams: 288 compliant and 54 non-compliant (approximately 84% compliance).
	There is a link between manager compliance and team compliance – where managers do not complete modules, their teams are also non-compliant.	

¹⁵ Data suppressed for confidentiality.

Learning at Work Week 12-18 May 2025

- 5.9. As part of 'Learning at Work Week' (12-18 May 2025), NES delivered a speaking up session on 13 May 2025 involving executive, non-executive and operational leadership. Around 50 staff attended. The session supported awareness of whistleblowing arrangements, reinforced leadership commitment to a positive speak up culture, and provided an opportunity for staff reflection and discussion. A summary of the interactive material is included in Appendix B (p. 30).
- Session outline: Speaking up: In NES, we are dedicated to quality – and hearing about concerns, ideas or potential improvements, is a cornerstone of our commitment to excellence in all aspects of our work. Since the launch of the National Whistleblowing Standards in April 2021, we have continued to promote a culture of speaking up, 'listening up', and psychological safety. We want everyone to feel comfortable raising any issues of concern and to feel confident that those issues will be investigated fully and impartially. In this participative session, you will find out more about NES's 'speaking up' journey to date. We welcome your stories, contributions and insights.
- 5.10. As a four-month follow-up, attendees, and all those interested in the session, were further signposted to the meeting recording and presentation, with an opportunity to provide any further feedback on their learning.
- 5.11. NES was highly commended in the national Learning at Work Week (LAWW) Impact Awards¹⁶ in October 2025. This provided external recognition of NES's wider work to support a culture of learning, wellbeing and openness, within which speaking up activity sits.
- Build digital confidence and capability across the organisation.
 - Foster a culture of kindness, compassion and lifelong learning.
 - Encourage colleagues to take ownership of their development.
 - Enhance wellbeing and connection across teams.

¹⁶ Campaign for Learning (2025) 'Learning at Work Week Impact Awards 2025'. Available at: <https://www.learningatworkweek.com/LAWW/LAWW/Impact-Awards/Impact-Awards-2025.aspx>.

Line Managers' Network 26 August 2025

- 5.12. A speaking up session was delivered to the Line Managers' Network on 26 August 2025, with approximately 49 attendees. The session focused on managers' responsibilities in responding to concerns, the overall whistleblowing process, and the support available. Appendix C (p. 33) provides a summary of the interactive questions and feedback themes.
- Session outline: As a line manager, you may receive concerns from colleagues in their day-to-day work. In this participative session, you will find out more about the National Whistleblowing Standards and what is required of you (and others in similar roles) in responding to any stage one or business as usual concerns. You will also learn more about the overall process involved, including the stage two process, and the support available to help you. There will also be an opportunity to learn more about NES's 'speaking up' journey to date. We look forward to discussing with you then and to hearing your stories and insights.

Speak Up Week 29 September 2025 to 03 October 2025

- 5.13. Hosted by the INWO, the 2025 'Speak Up Week' took place between 29 September and 03 October. This was the fourth annual campaign designed to promote a culture where staff feel safe, supported and empowered to raise concerns within the NHS in Scotland. The theme was "Listen, Act, Build Trust".
- 5.14. Christina Bichan, Director of Planning, Performance and Transformation launched the week via an intranet news-feed article (29 September 2025). She reflected on the importance of building trust and in shaping a workplace where everyone feels safe to share their ideas, concerns or suggestions. She underscored how NES continues to support a culture where speaking up is encouraged and our role in continuing the live the NES values, which positively guide cultures and behaviours. She also highlighted:
- How Speak Up Week is another opportunity for staff to have open conversations about speaking up and to ensure that arrangements are well known and familiar.
 - The NES all-staff webinar on Wednesday 01 October 2025.
 - A series of planned activities and discussions hosted by the INWO.
 - Links to further information and the whistleblowing training on TURAS Learn.

- 5.15. As part of Speak Up Week, an all-staff webinar was held on 01 October 2025, chaired by the Whistleblowing Champion and supported by senior leaders and subject matter experts. The session reinforced leadership visibility, promoted awareness of available routes for raising concerns, and encouraged staff reflection on barriers to speaking up.
- 5.16. Following Gillian Mawdsley's introduction, Karen Reid, Chief Executive, highlighted in a pre-recorded video contribution how Speak Up Week provides an opportunity to reflect on, and reinforce our commitment to creating an open and supportive culture – one in which every voice in NES is valued and where people can thrive. Creating that culture – one where people feel safe – is something that the panel and senior management are committed to achieving. Karen Reid highlighted that all staff have a vital role to play in shaping a workforce where everyone feels safe to share ideas, concerns and suggestions.
- 5.17. During the webinar discussions included:
- The organisation's commitment to building and maintaining an open and transparent workplace culture.
 - The need to actively listen – without judgement or interruption – to show respect and demonstrate the value and experiences of staff.
 - The role of the Confidential Contacts in supporting staff and listening to concerns, for example, to help determine the most appropriate process (which could include HR or other routes). (The Confidential Contacts are usually separate from a whistleblower's line management structure, helping to ensure impartiality and trust.)
 - How the organisation will act (where appropriate) on what has been shared, serving as a crucial bridge from listening to building trust.
 - How the Speak Up Week campaign helps further raise awareness amongst staff of the whistleblowing process, including the availability of a dedicated confidential email address.
 - Resources and training available to all staff, including upcoming routes for feedback.

- 5.18. As part of the webinar, attendees were also invited to share their reflections or experiences of barriers staff may face in speaking up. There were 122 responses to this question, and results were displayed in the form of a 'word cloud' (Figure 2). The size of each word reflects the frequency of its appearance in participants' responses.

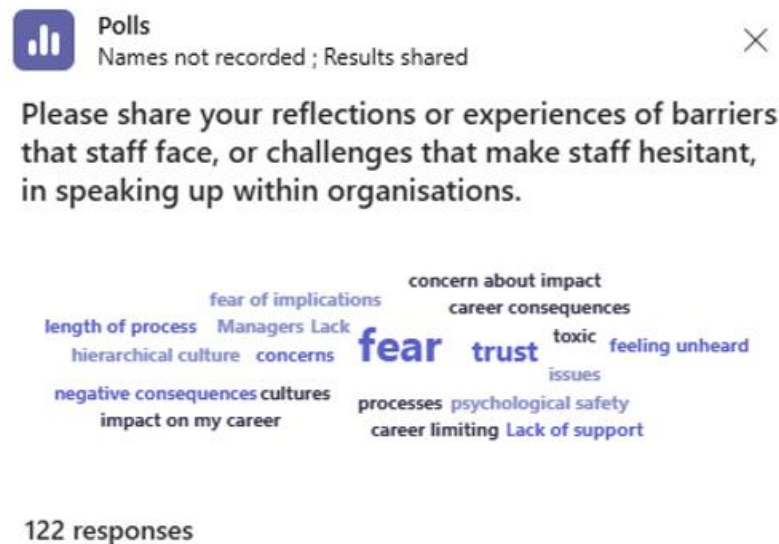


Figure 2: Staff responses to the question "Please share your reflections or experiences of barriers that staff face, or challenges that make staff hesitant, in speaking up within organisations (122 responses).

- 5.19. Feedback gathered during the webinar highlighted that fear and trust remain important factors influencing whether staff feel able to speak up. Other themes included concern about consequences, psychological safety, organisational hierarchy and the perceived length of processes. These insights are consistent with wider evidence on barriers to speaking up and help inform future awareness, leadership and learning activity.
- 5.20. Approximately 118 staff attended the live webinar, with the recording subsequently made available on the intranet to support wider reach and ongoing awareness raising.

The Whistleblowing Steering Group

- 5.21. During 2025-2026 the NES Whistleblowing Group met on three occasions, providing a forum for oversight of awareness raising activity, Confidential Contact arrangements, training compliance and wider improvement work.
- 5.22. At the May 2025 meeting, Christina Bichan led discussions on:
- Preparations for a Line Managers' Network learning session.
 - Preparations for Speak Up Week (29 September to 03 October 2025).
 - Expressions of interest for additional Confidential Contacts.
 - Potential delivery of another CPD session for the Confidential Contacts.
- 5.23. At the September 2025 meeting, Nancy El-Farargy led discussions on:
- Introduction to the newly appointed Confidential Contact.
 - A request from the 'Equally Safe at Work' working group to expand the role of the Confidential Contacts.
 - Discussion in preparation for the Speak Up Week webinar (01 October 2025).
 - A debriefing on the Line Managers' Network session held on 26 August 2025.
- 5.24. At the January 2026 meeting, Christina Bichan led discussions on:
- Introduction to the newly appointed Confidential Contact.
 - An upcoming CPD session for confidential contacts.
 - The Equally Safe at Work agenda and the expanded role of the confidential contacts.
 - Whistleblowing training compliance.
 - A commitment to explore staff "listening forums", as noted at the NES Board meeting on 20 November 2025.
 - A planned communication on the role of the confidential contacts, in the context of the new organisation. This information was subsequently included in a director pack for PSD Scotland staff and shared at a directorate 'townhall' meeting. The focus was on supporting staff during transition into PSD Scotland.

The Confidential Contacts

- 5.25. During 2025-2026, two additional Confidential Contacts were appointed, bringing the total number to six. This increased the range of support available to staff and strengthened accessibility across the organisation.
- Karen Wilson, Director of NMAHP and Deputy Chief Executive.
 - Graham Paxton, Principal Lead, People and Culture Directorate.
 - Lindsay Donaldson, Deputy Medical Director, Medical Directorate.
 - Pamela Renwick, General Manager, People and Culture Directorate.
 - Kerrie Walters, Principal Lead, Social Care and Communities Directorate (appointed 22 August 2025).
 - Keaton Fletcher, Analyst Business Partner, Planning, Performance and Transformation Directorate (appointed 11 November 2025)
- 5.26. The expansion of the Confidential Contact network was intended to strengthen staff choice, trust and accessibility, including through a broader mix of backgrounds and perspectives. Most Confidential Contacts were approached at least once during the year, indicating that the network is active and visible.
- 5.27. As with previous appointments, the INWO was updated of these two new appointments. Corresponding updates were made to our intranet and corporate external web presence to support transparency and accessibility.
- 5.28. As well as engaging in other Continuing Professional Development (CPD) opportunities where applicable, the Confidential Contacts are part of a national Speak Up Network (currently hosted by NHS Lothian). They have also been upskilled to support the 'Equally Safe at Work' agenda (see the next paragraph).

The 'Equally Safe at Work' accreditation programme

- 5.29. Chaired by Christina Bichan, Director of Planning, Performance and Transformation, a working group took forward actions to promote equality, safety and respect in the workplace. NES participated in the 'Equally Safe at Work' accreditation programme by 'Close the Gap' and was awarded the 'Development' level accreditation (20 February 2026). The work involves taking action to tackle any gender inequality in the workplace and to ensure that employees are safe and protected at work, and free from any gender-based violence harassment and discrimination. As an organisation, participation in this programme has improved our understanding of any gender inequality in the labour market and strengthened the support available to our staff. The accreditation period last for two years, until 21 February 2028. Staff from Close the Gap have confirmed the criteria and milestones that will need to be evidenced over the coming year, which will allow the accreditation status to be transferred and held by PSD Scotland.
- 5.30. As a result of the ESAW programme, the NES Confidential Contacts agreed to expand their role to further offer colleagues the opportunity to discuss any issues of concern in relation to this agenda. Their role has therefore been included in a "Gender-based violence: staff support, guidance and policy" communication, which further outlines how the Confidential Contacts can support staff with any concerns, including how a disclosure of gender-based violence can be dealt with.

The 2025 'iMatter' Staff Experience Survey

- 5.31. The annual 'iMatter' staff experience survey is issued to all staff across NHS Scotland health boards, and gives everyone the opportunity to feed-back on their experiences within their team and at organisational level each. Since 2023, two optional whistleblowing questions were added to the survey, and these provide further insights into how our employees feel about raising concerns.
- 5.32. NHS Education for Scotland scored the highest from across all NHS Scotland boards for the whistleblowing statement questions¹⁷. To aid comparison, a collated overview of our results, from the three yearly surveys, is outlined in the below table.

Table 2: NES staff responses to the two optional whistleblowing statements from three of the most recent annual iMatter staff experience surveys.

These statements on raising concerns were optional.	2023		2024		2025	
	Number of respondents/ all staff (and percentage)	Average score	Number of respondents/ all staff (and percentage)	Average score	Number of respondents/ all staff (and percentage)	Average score
I am confident that I can safely raise concerns about issues in my workplace.	1048/1075 (97%)	86	1054/1079 (98%)	85	1077/1105 (97%)	85
I am confident that my concerns will be followed up and responded to.		83		81		81

¹⁷ Crown copyright (2025) 'iMatter Health & Social Care Staff Experience Survey 2025'. Edinburgh: Scottish Government. Available at: <https://www.gov.scot/publications/imatter-health-social-care-staff-experience-survey-2025/documents/>.

Chief Executive Letter to the Cabinet Secretary for Health and Social Care

- 5.33. Neil Gray MSP, the then Cabinet Secretary for Health and Social Care, wrote out to all NHS Scotland Chief Executives on 05 March 2026, to solicit their views on whistleblowing in their organisations:
- 5.34. Chief Executive, Karen Reid, welcomed the opportunity to provide assurance on the approach being taken within NES and highlighted the ongoing commitment to fostering a positive speak up culture. Reference was also made to:
- Her visibility and accessibility as Chief Executive through regular staff briefings, open question sessions, and participation in staff forums.
 - The NES arrangements and channels for speaking up.
 - How NES monitored and evaluated effectiveness through quarterly and annual reporting to the Board, review of case outcomes, and staff feedback.
 - The oversight provided by the Whistleblowing Executive Lead and Whistleblowing Champion, with regular updates to the INWO.
 - Quality assurance, review of outcomes and feedback from those involved in the whistleblowing process.
 - Protection from detriment and fairness, ongoing learning and improvement, and a success story.

INWO developments and engagements

- 5.35. At the June 2025 meeting of the national Whistleblowing Practitioners Forum, representatives from the INWO team highlighted that the April 2021 Standards document had been recently updated. This update included the removal of references to the possibility of Non-Executive Directors raising concerns under the Standards. A subsequent June 2025 bulletin highlighted that Non-Executive Directors are not employees of health boards and thus are not eligible to raise whistleblowing concerns under the Standards. A review of our published information took place to align with this update.
- 5.36. In August 2025, the INWO requested overall year-end (31 March 2025) whistleblowing training data, and this information was provided via a copy of the quarter two 2025-2026 whistleblowing performance report.

Other activities

- 5.37. A Freedom of Information (FOI) request was received regarding the number of concerns received before and after implementation of the Standards. The response was issued in August 2025 and included links to the Annual Whistleblowing Reports on our corporate website.
- 5.38. The 2024-2025 Staff Governance Monitoring return was concluded during quarter two, 2025-2026, which also included information on NES's whistleblowing activities.
- 5.39. As noted in the NES February 2026 public board meeting papers, a set of resources on raising and escalating concerns has been developed for pre-registration students in Nursing, Midwifery or Allied Health Professions in Scotland. Students who have a concern during their practice learning placement have guidance to help them speak up:
- Allied Health Profession (AHP) students – raising concerns and whistleblowing: <https://learn.nes.nhs.scot/61311>
 - Nursing and Midwifery students – speaking up or raising concerns guidance for NHS and non-NHS placements: <https://learn.nes.nhs.scot/51462>

6. Whistleblowing annual return and key performance indicators

Learning, changes or improvements (KPI 1)

- 6.1. Learning arising from the stage 2 concern has informed ongoing engagement with the Medical Directorate on supervision arrangements. As the case remains open, this learning is necessarily provisional at this stage; however, improvement action has continued in parallel rather than waiting for formal closure.

The experiences of all those involved in the whistleblowing procedure (KPI 2)

- 6.2. Engagement with those involved in the whistleblowing process has remained constructive and respectful. Given the small number of cases and the need to protect confidentiality, formal feedback evidence is limited. However, no issues have been identified through the case handling process that would indicate concern about the fairness or integrity of arrangements.

Staff engagement, training and awareness raising (KPI 3)

- 6.3. Under legacy NES arrangements, line managers were required to complete the line manager-level training on TURAS Learn (which forms part of the suite of 'Essential Learning'). As of 31 March 2026, the compliance rate was 91% (338/373), with 35 line managers yet to complete the training. This reflects a positive position in respect of training uptake, having sustained performance over 90% for the two preceding quarters.
- 6.4. All staff can also optionally complete the three levels of training available, and engagement has been positive to date. As of 31 March 2026, 74% of all core staff¹⁸ (986/1333) completed the overview level training (Table 3).
- The overview level training: for people who need an overview of the Standards.
 - The line manager level training: for people who are line managers or work in a similar role, who are likely to receive concerns from colleagues in their day-to-day work.
 - The senior manager level training: for senior managers who are involved with not only receiving concerns, but also investigating, responding to, and reporting on whistleblowing concerns to the board.

¹⁸ This excludes Doctors and Dentists in Training.

Table 3: Number of core staff employees who completed whistleblowing training as of 31 March 2026.

Frequency (and percentage) of core staff (1333) who (in some cases optionally) completed whistleblowing training, as of 31 March 2026.		
1.	"Overview" level training completed.	986/1333 (74%)
2.	"Line manager" level training completed.	468/1333 (35%) of which 25% were line managers
3.	"Senior manager" level training completed.	271/1333 (20%)
Frequency (and percentage) of line managers (373) who completed the mandatory line manager training (part of essential learning), as of 31 March 2026.		
4.	Line managers who completed the mandatory "Line Manager" training.	338/373 (91%)
Frequency (and percentage) of senior managers (6) who optionally completed senior manager training, as of 31 March 2026.		
5.	Senior managers ¹⁹ who optionally completed the "Senior Manager" training.	5/6 (83%)

- 6.5. Whilst the overview level training was not mandatory for legacy NES staff, 986/1333 staff members (74%) completed the module. Likewise, 130 staff members optionally completed the line manager level training, and 271 members of staff optionally completed the senior manager level training. Five out of six senior managers (83%) optionally completed the senior manager level training. The mandatory line manager training compliance rate was 91% (338/373) (as of 31 March 2026).

Whistleblowing annual return (KPIs 4-10)

- 6.6. During quarter two of 2025-2026, one whistleblowing concern was received and acknowledged on the same day. It related to supervision arrangements for resident doctors in training and the balance between learning and service provision. At the time of writing, the stage 2 investigation remained open and subject to an authorised extension. Although the case has not concluded within the standard timescale, the extension was formally approved and there is no evidence from this case of a broader weakness in organisational arrangements. It does, however, underline the importance of timely investigation, oversight and learning as PSD Scotland moves to a single approach. A quantitative summary of KPIs 4-10 is set out in Table 4. Since the Standards were introduced in April 2021, NES has recorded one stage 1 concern and four stage 2 concerns.

¹⁹ Senior managers in this context are defined as those one of the Executive Cohort Grade. They are also included in the line manager count.

Table 4: KPIs 4-10.

KPI	Description	Total	Percentage
4	The total number of concerns received.	1	100%
5	The total number of concerns closed.	0	-
	Number of concerns closed at stage one.	0	-
	Number of concerns closed at stage two.	0	-
6	Number of concerns upheld at stage one.	0	-
	Number of concerns partially upheld at stage one.	0	
	Number of concerns not upheld at stage one.	0	-
	Number of concerns upheld at stage two.	0	
	Number of concerns partially upheld at stage two.	0	-
	Number of concerns not upheld at stage two.	0	-
7	Average working days for concerns at stage one.	-	-
	Average working days for concerns at stage two.	-	-
8	Number of concerns at stage one closed within five working days.	0	-
	Number of concerns at stage two closed within 20 working days.	0	-
9	Number of concerns at stage one with authorised extension.	0	-
10	Number of concerns at stage two with authorised extension.	1	100%

7. Conclusion

- 7.1. NES continued to build on the foundations established since the introduction of the Standards, maintaining reporting and oversight arrangements, supporting staff awareness and sustaining a positive training position. Overall, the report provides assurance that legacy NES whistleblowing arrangements operated effectively and continued to strengthen during 2025-2026.
- 7.2. The organisation broadened its network of Confidential Contacts, maintained line-manager training compliance above 90%, and continued to use staff engagement activity to understand barriers to speaking up. One live stage 2 case remained open at year end and required an authorised extension. While this does not in itself indicate a material governance concern, it highlights the need for continued focus on timeliness, oversight and translating learning into improvement action.
- 7.3. Looking ahead to 2026-2027, PSD Scotland will establish and embed a single whistleblowing approach that draws on the strengths of the legacy organisations, supporting a culture in which people feel safe and confident to speak up in the public interest, and where concerns are handled fairly, promptly and respectfully. Effective arrangements will be enabled by visible leadership, clear governance and reporting, accessible routes for raising concerns, and continued learning, training and communication, to ensure whistleblowing remains an important part of our wider approach to people, culture, safety and accountability.

Nancy El-Faragy
Public Services Delivery Scotland (PSD Scotland)
June 2026

8. Appendix A: Summary of key performance indicators

Table 5: Overview of the 2025-2026 Key Performance Indicators (KPIs) reported.

Key Performance Indicators (KPIs)		Report location
KPI 1	A statement outlining learning, changes or improvements to services or procedures as a result of consideration of whistleblowing concerns.	Paragraph 6.1.
KPI 2	A statement to report the experiences of all those involved in the whistleblowing procedure (where this can be provided without compromising confidentiality).	Paragraph 6.2.
KPI 3	A statement to report on levels of staff perception, awareness and training.	Paragraphs 6.3, 6.4, 6.5, and Table 3.
KPI 4	The total number of concerns received.	Paragraph 6.6, and Table 4.
KPI 5	Concerns closed at stage one and stage two of the whistleblowing procedure as a percentage of all concerns closed.	Paragraph 6.6, and Table 4.
KPI 6	Concerns upheld, partially upheld, and not upheld at each stage of the whistleblowing procedure as a percentage of all concerns closed in full at each stage.	Paragraph 6.6, and Table 4.
KPI 7	The average time in working days for a full response to concerns at each stage of the whistleblowing procedure.	Paragraph 6.6, and Table 4.
KPI 8	The number and percentage of concerns at each stage which were closed in full within the set timescales of five and 20 working days.	Paragraph 6.6, and Table 4.
KPI 9	The number of concerns at stage one where an extension was authorised as a percentage of all concerns at stage one.	Paragraph 6.6, and Table 4.
KPI 10	The number of concerns at stage two where an extension was authorised as a percentage of all concerns at stage two.	Paragraph 6.6, and Table 4.

9. Appendix B: Learning at Work Week learning session 13 May 2025

- 9.1. During the session, participants were invited to engage with a series of interactive questions:
- How would you rate your knowledge of the National Whistleblowing Standards? (See Figure 3.)
 - Have you ever felt the need to raise a whistleblowing concern? If so, how would you describe your experience? In the 'word cloud' diagram, the size of each word reflects the frequency of its appearance in participants' responses. (See Figure 4.)
 - If you had a whistleblowing concern, who would you be most comfortable raising it with in the first instance? (This can be anyone of your choosing.) (See Figure 5.)

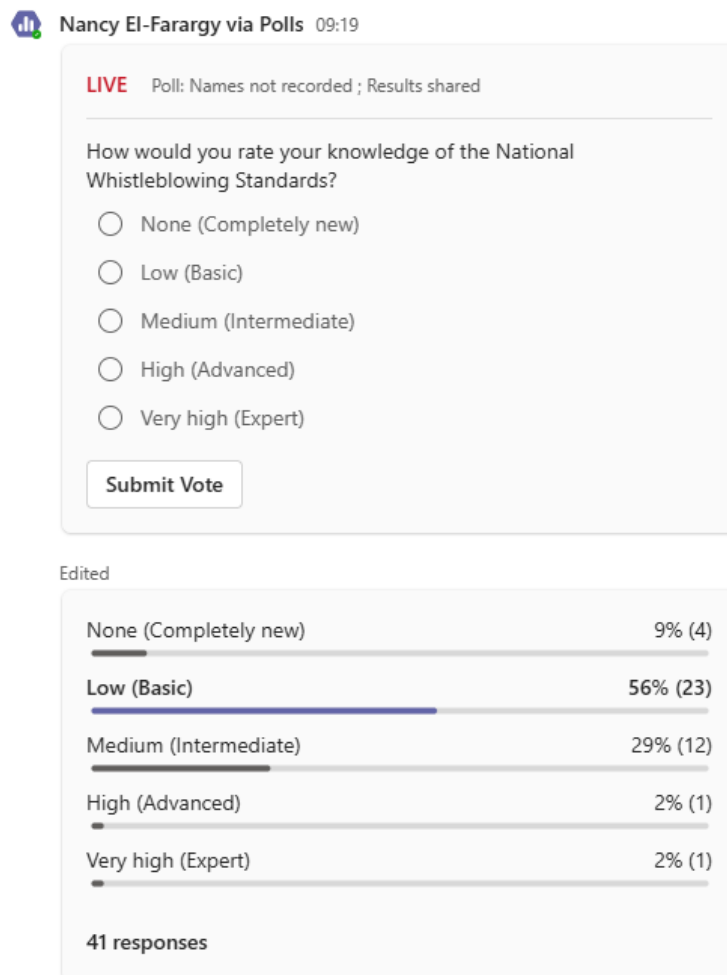


Figure 3: Participants' self-rated knowledge of the National Whistleblowing Standards (n = 41).

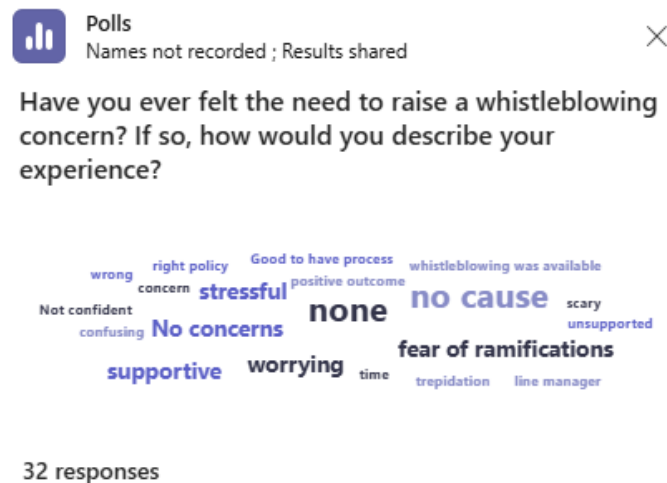


Figure 4: Word cloud of participants' responses to the question: "Have you ever felt the need to raise a whistleblowing concern? If so, how would you describe your experience?" (32 responses).

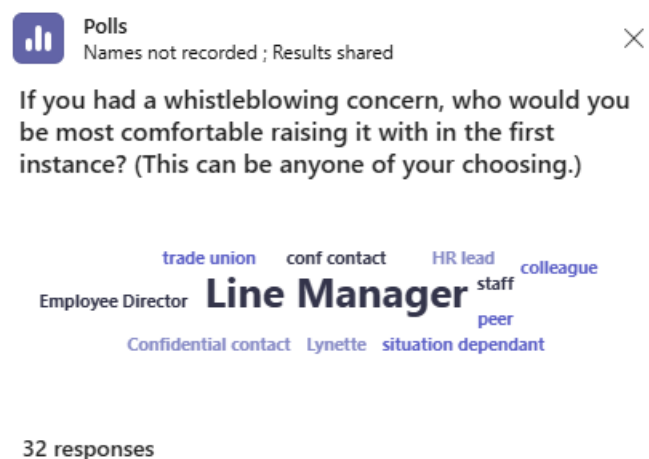


Figure 5: Word cloud of participants' responses to the question: "If you had a whistleblowing concern, who would you be most comfortable raising it with in the first instance? (This can be anyone of your choosing.)" (32 responses).

- 9.2. Shortly after the session, participants were invited to indicate their reason for attending the session (Figure 6).

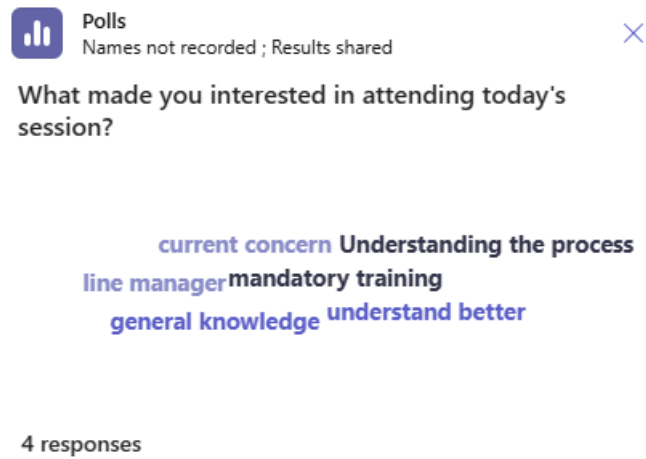


Figure 6: Word cloud of participants' responses to the question: "What made you interested in attending today's session?" (4 responses).

10. Appendix C: Line Managers' Network session 26 August 2025

10.1. During the session, participants were invited to engage with a series of interactive questions:

- “How would you rate your knowledge of the National Whistleblowing Standards?” Most respondents highlighted low and basic knowledge of the Standards. No participants rated themselves as having advanced or expert knowledge of the Standards (see Figure 7).
- “How would you describe your experience of raising or handling a concern with your team?” In the ‘word cloud’ diagram (see Figure 8), the size of each word reflects the frequency of its appearance in participants’ responses. The most prominent response was “none”, indicating no experience of raising or handling a concern with their team. Other responses were mostly negatively framed – such as “time consuming”, “frustrating”, “worrying”, “disappointing”, “challenging”, “complicated” and “difficult”. More positively framed responses included “engaging”, “supportive” and “reassuring”.
- “What has/have been your key learning point/s from today’s session?” Most respondents highlighted the section on the Confidential Contacts as being their key learning point. Other learning points included the Turas e-Learning opportunities, emotional aspects and that the session acted as a reminder (see Figure 9.)

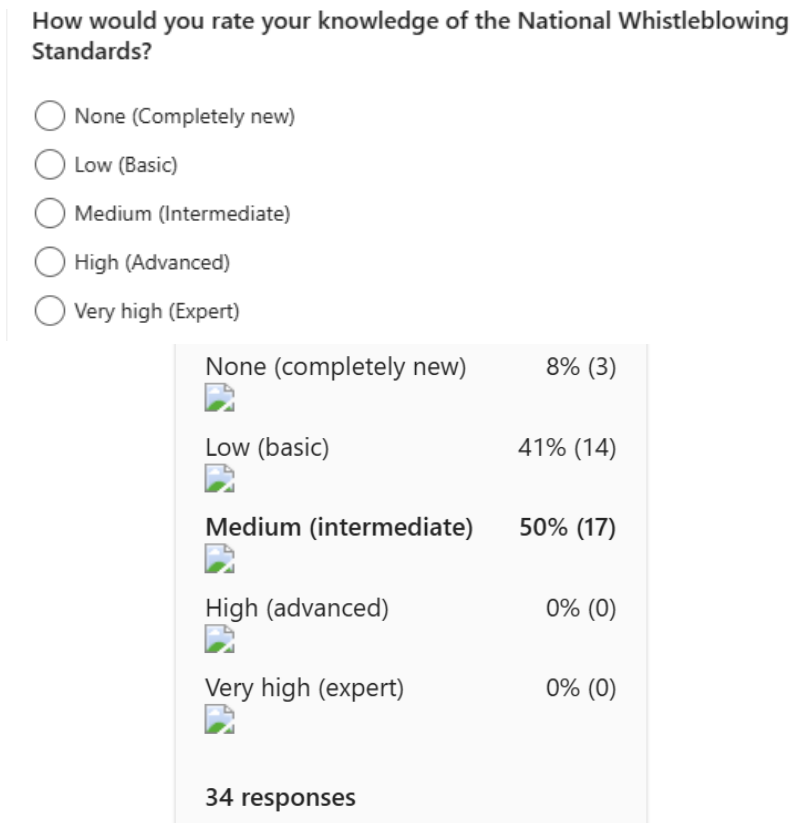


Figure 7: Participants' self-rated knowledge of the knowledge of the National Whistleblowing Standards (n=34).



Figure 8: Word cloud of participants' responses to the question: "How would you describe your experience of raising or handling a concern with your team?" (35 responses).

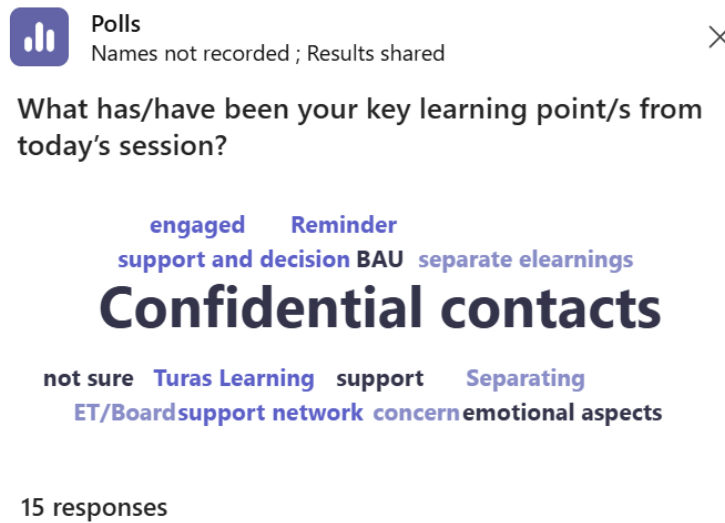


Figure 9: Word cloud of participants' responses to the question: "What has/have been your key learning point/s from today's session?" (15 responses).

- 10.2. Participants were also invited to provide further feedback via a short survey. Two respondents highlighted their views, which included:
- Overall rating of neutral and very satisfied with the workshop experience.
 - Skills, key 'take home message' or knowledge gained from the workshop as "good to see the level of ET/board commitment to the system" and "updated list of confidential contacts".
 - A neutral and useful rating of the interactive elements and exercises.
 - A confident rating in sharing any learning gained from the workshop with their team.
 - A confident rating in dealing with any stage one concern.
- 10.3. Other comments included the number of people speaking and the need for more relevant examples to the type of work in NES.

Nancy El-Farargy
Public Services Delivery Scotland (PSD Scotland)
June 2026
