
THE YEAR OF THE PANDEMIC: A SUMMARY OF SPEAKING UP TO FREEDOM TO SPEAK UP GUARDIANS

1 April 2020 – 31 March 2021



**National
Guardian**

Freedom to Speak Up

July 2021

Foreword



The pandemic has made us all acutely aware of how much gratitude we owe to everyone who works in health, and how vital it is that they have the freedom to speak up safely about anything which has an impact on their ability to do their job.

This analysis of the data, shared with the National Guardian's Office by Freedom to Speak Up Guardians, gives an opportunity to reflect on the impact of this past year. Freedom to Speak Up Guardians have handled more cases than ever before – reporting on over 20,000 cases in the past year. This is a marked increase from just over 7,000 cases when we first started collecting data in 2017/18.

In part, this growth reflects the expansion of the network – there are now over 700 guardians in more than 400 organisations, in primary and secondary care, independent providers and national bodies. But it also reflects how trusted Freedom to Speak Up Guardians are as an additional channel for speaking up. In this time of crisis, Freedom to Speak Up Guardians made sure that workers knew they were still listening and still there to support them. Over 84 per cent of workers who gave feedback said that they would speak up again.

Freedom to Speak Up Guardians have shared how the pandemic has affected their work and the workers they support. In some cases, workers who feared for their safety were let down by leaders who were not listening. Guardians shared that workers were speaking up about adherence to social distancing and personal protective equipment policies, risk assessments for black and minority ethnic colleagues, support for isolating and shielding workers, and the increased stress and exhaustion from working through the pandemic.

Freedom to Speak Up Guardians are there for workers who feel that the usual channels for speaking up will not, or do not, work for them – whether that is a lack of trust, or a fear of reprisal, or a belief that nothing will be done as a result.

For Freedom to Speak Up to be effective, it needs the support of managers and leaders who foster a speak up, listen up, follow up culture. [The Freedom to Speak Up e-learning modules](#), developed in association with HEE on the e-learning for health platform, are free to access for all. These set out what speaking up is and its importance in creating an environment in which people are supported to deliver their best. The first module – Speak Up – is for everyone. The second module, Listen Up, for managers, builds upon the first and focuses on listening and understanding the barriers to speaking up. A final module, Follow Up, for senior leaders, will be launched later in the year to support the development of Freedom to Speak Up as part of the strategic vision for organisations and systems. I encourage senior leaders

and those who aspire to be senior leaders to complete all three modules when they are available so that they will be able to foster an environment where speaking up is welcomed as business as usual.

In the past five years, Freedom to Speak Up Guardians have handled over 50,000 cases. That is 50,000 opportunities for organisations to learn and improve. The impact of the work of guardians is outstanding and has moved the dial on the speaking up culture in the NHS.

There has been a six-percentage point decrease in the proportion of cases which are raised with guardians anonymously since 2017, which is encouraging. But workers speaking up anonymously may be an indicator of fear and mistrust in the system, and the rate at which the decrease is happening is slowing. Similarly, the rate at which the decrease in the percentage of cases where detriment is indicated has slowed. And with increased cases, that means the actual numbers have increased overall. The changing diversity of organisations within our network could also be a factor in these changes.

Yet, just as we see some improvement, the pandemic has also highlighted how much more needs to be done. We have seen that when leaders listen and act, great improvements can be made. Conversely, when leaders are defensive or victimise workers who speak up, it has a chilling effect on the system, putting patients and workers at risk of harm.

With the hope which the vaccination programme brings that the worst is over, we find a sector with workers who have been left overwhelmed and exhausted, suffering from burnout. In order to retain these highly skilled and dedicated workers, it is essential that we put their wellbeing at the forefront. Listening to them, their concerns, their fears and their ideas for improvement, must be at the heart of that.

Freedom to Speak Up empowers workers and assures them that their voice matters, that they will be listened to and positive actions taken for the benefit of patients and colleagues. They will feel cherished, engaged and supported to do the best job they can. Listening means that workers' ideas and experience can be used to create improvement.

This Annual Data Report can be used by leadership at all levels as one source of information to inform their examination of their speaking up culture. While the pandemic may have highlighted that there is still a way to go to make speaking up business as usual in the NHS, by listening up and following up, leaders can bring about real improvements and help make speaking up business as usual.



Dr Henrietta Hughes OBE FRCGP

National Guardian for the NHS

National Guardian's Office

The [National Guardian's Office](#) works to make speaking up become business as usual.

The office leads, trains and supports a network of Freedom to Speak Up Guardians in England and provides learning and challenge on speaking up matters to the healthcare system.

Acknowledgements

We would like to thank **Freedom to Speak Up Guardians** for supporting workers to speak up and working together to improve speaking up. Their work has made this report possible.

Thanks also go to **NHS England and Improvement** for working with us to develop and maintain the use of speaking up metrics on the [Model Health System](#).

Special thanks go to all the **healthcare and key workers** for their passion, resilience and commitment during this extraordinary time, and to those who have spoken up for the benefit of patients and colleagues.

Contents

Introduction	6
About this report.....	7
Freedom to Speak Up Guardians.....	7
Headlines 2020/21	8
Total cases.....	10
Types of issues	11
Cases by organisation.....	13
Other indicators of performance	15
Professional groups and seniority	16
Anonymous cases	18
Disadvantageous and/or demeaning treatment for speaking up	19
Feedback	20
Themes	21
Learning points.....	23
Next steps	25
Annex 1	26

Introduction

National Guardian's Office (NGO) guidance requires Freedom to Speak Up Guardians to report to the NGO information on the speaking up cases raised with them.

The information we receive from Freedom to Speak Up Guardians is essential in helping us understand the impact of the Freedom to Speak Up Guardian role. This year, more than ever before, this information has proven to be a crucial indicator of speaking up activity during extraordinary times.

COVID-19 affected workers across all parts of the healthcare system and, naturally, impacted on what they spoke up about.

The extraordinary circumstances of the pandemic have highlighted how vital Freedom to Speak Up Guardians are as an additional channel for speaking up and as a means of amplifying the voices of those who may not usually be heard. This is exemplified by the record number of cases that have been raised with them this year, in a range of organisations and across all professional groups. People have spoken up about the pandemic and its impact on their wellbeing, bullying and harassment at work, communication concerns, and organisational policies and procedures as well as more clinical issues around patient safety and quality of care.

At the national level, there has been a decrease in the proportion of cases that are reported as involving an element of patient safety/quality and those involving bullying and harassment. This appears to be the continuation of a trend identified last year. We welcome this. However, this means that we need to do more to understand the other matters workers are speaking up about. To help with this, we have introduced updated guidance on recording and reporting cases for Freedom to Speak Up Guardians. This will be applied as part of the 2021/22 data collection process.

The data we present in this report is also included in NHSE/I's the [Model Health System](#). This means that it is available to assist in learning and improvement. The Model Health System enables this data to be reviewed alongside other metrics to help understand an organisation's Freedom to Speak Up culture.

This national overview provides only part of the picture. Leaders will also need to look at data at the organisational level as a means of starting to understand their organisational culture and the barriers to speaking up that some workers may encounter.

Why do some workers speak up anonymously? Why are workers fearing or experiencing detriment? How is bullying and harassment being addressed? These are some of the questions that leaders need to ask.

Numbers provide only part of the picture which is why we are continuing to collect stories from across the sector from workers who have spoken up. We will continue to publish these stories as part of our [100 Voices](#) initiative.

About this report

This report summarises the cases raised with Freedom to Speak Up Guardians from 1 April 2020 to 31 March 2021.³

Freedom to Speak Up Guardians submit **non-identifiable** information to the National Guardian's Office (NGO) about the speaking up cases raised with them. The findings in this report are based on this information.

The majority (95.9 per cent or 19,560) of cases were raised with Freedom to Speak Up Guardians supporting NHS trusts. Therefore, some of the analysis in this report is focused on trusts only. Where this is the case, this is made clear.

Annex 1 sets out the data tables referenced in this report.

Freedom to Speak Up Guardians

Freedom to Speak Up Guardians support workers to speak up and work within their organisation to tackle barriers to speaking up.

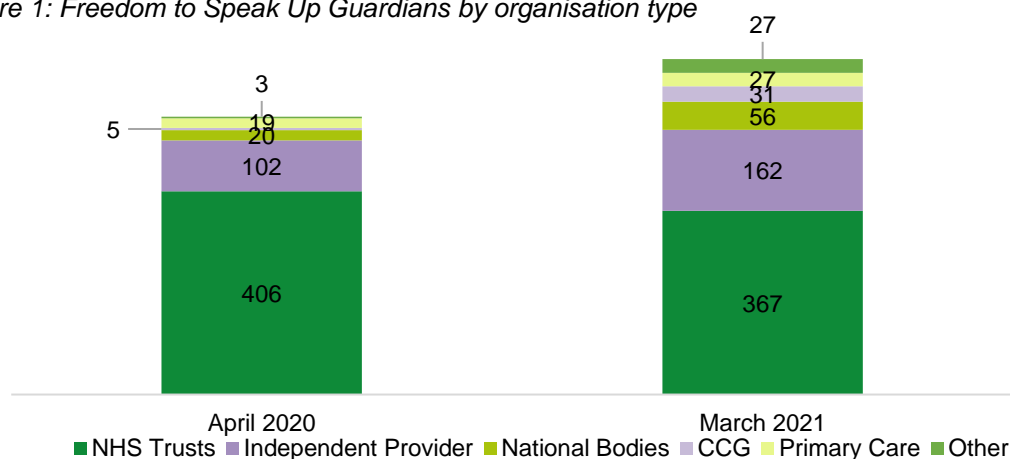
Line managers will often be the first point of call for workers who want to speak up.

Freedom to Speak Up Guardians are an important additional route through which workers may speak up.

There is now a network of over 700 Freedom to Speak Up Guardians supporting workers in organisations in primary and secondary care, independent health care providers, clinical commissioning groups, hospices and national bodies. In March 2021, there were 442 organisations supported by one or more Freedom to Speak Up Guardians.

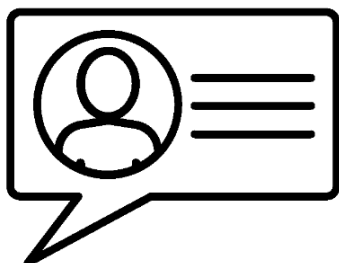
The Freedom to Speak Up Guardian network has continued to develop over the reporting period. In April 2020, there were 555 Freedom to Speak Up Guardians on the NGO's directory. Almost three quarters of them (73.2 per cent, or 406) were supporting NHS and Foundation Trusts (see figure 1, below). By March 2021, the number of Freedom to Speak Up Guardians had increased to 670, with a lower number (367, or 54.8 per cent) of them from NHS trusts.

Figure 1: Freedom to Speak Up Guardians by organisation type



Headlines 2020/21

TOTAL CASES

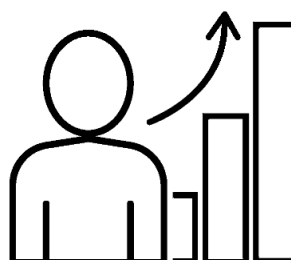


20,388 cases

were raised with
Freedom to Speak Up Guardians
In 2020/21

A 26-percentage point increase from 2019/20.

RECORD NUMBER OF CASES



Quarter 3

(October to December 2020)
had the highest number of cases
raised with Freedom to Speak Up
Guardians in a single quarter (5,334)
since Freedom to Speak Up
Guardians were established in 2016.

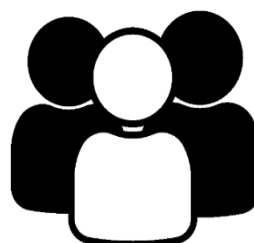
SOURCES OF CASES

Cases raised with Freedom to Speak Up
Guardians in NHS trusts (19,560)
accounted for
95.9% of cases in 2020/21.

There were a further 828 cases (4.1%)
raised in other organisation types.



PROFESSIONAL GROUPS



Workers from a range of professional
groups spoke up to Freedom to Speak
Up Guardians.

Nurses and midwives
accounted for the biggest portion
(29%) of cases raised.

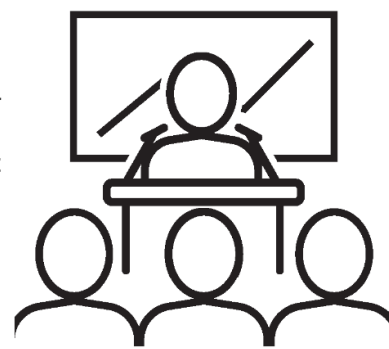
COVID-19 PANDEMIC



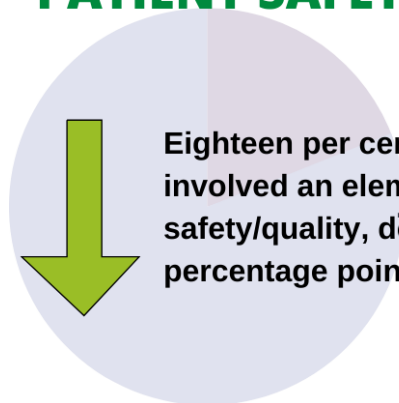
Workers spoke up about issues to
do with the pandemic, including
social distancing, personal
protective equipment, support for
workers isolating and shielding,
and increased stress and
exhaustion.

COMMUNICATION

Communication issues were a
key learning point, including
workers being informed about
changes, style of
communication and differing
local interpretations of
guidance.



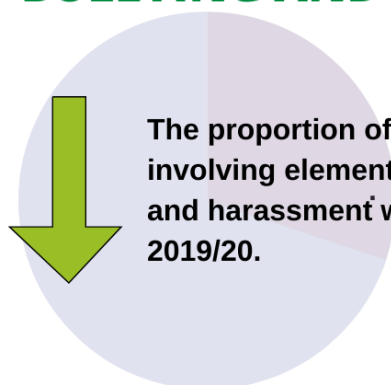
PATIENT SAFETY AND QUALITY



Eighteen per cent (18%) of cases involved an element of patient safety/quality, down five-percentage points from 2019/20.



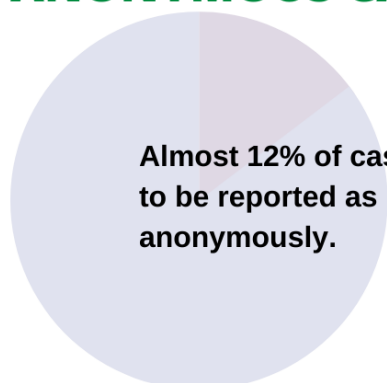
BULLYING AND HARRASSMENT



The proportion of cases (30.1%) involving elements of bullying and harassment was lower than 2019/20.



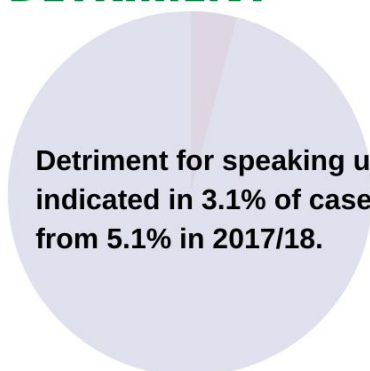
ANONYMOUS CASES



Almost 12% of cases continued to be reported as being raised anonymously.



DETRIMENT



Detriment for speaking up was indicated in 3.1% of cases, down from 5.1% in 2017/18.



FEEDBACK

Over four-fifths (84.3%) of those who gave feedback said they would speak up again



Total cases

From 1 April 2020 to 31 March 2021, 20,388 speaking up cases were raised with Freedom to Speak Up Guardians. This was an increase from 16,199 cases reported in 2019/2020.

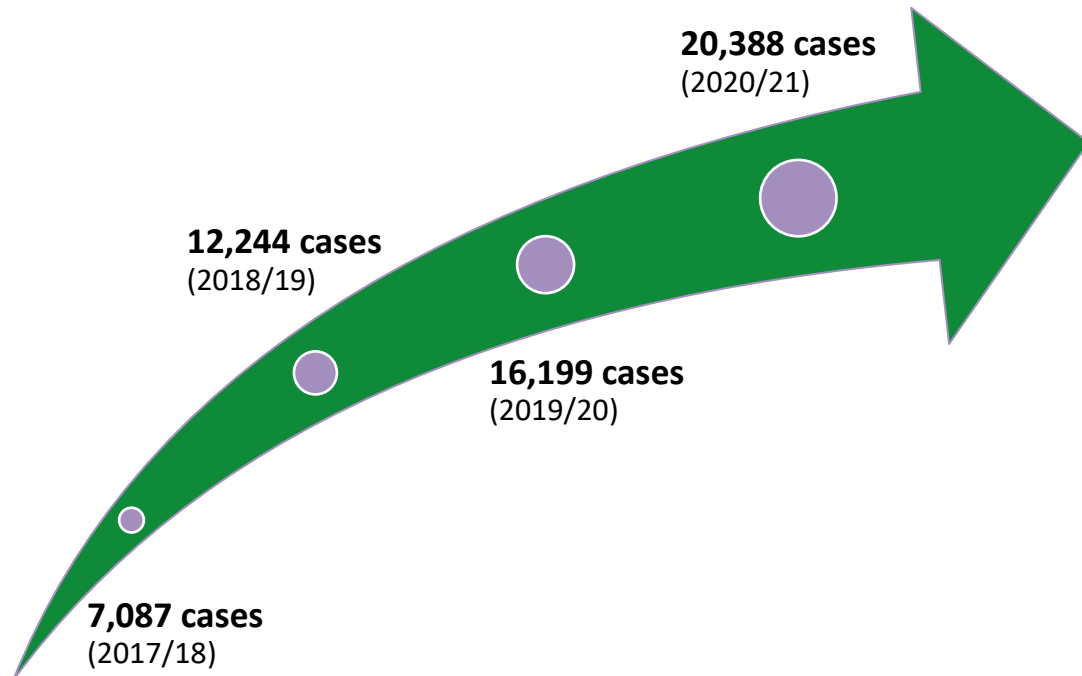


Figure 2: total cases raised with FTSU Guardians

Quarter 3 (October to November 2020) saw the highest number of cases reported to the NGO in a single quarter (5,334). This was a twenty-percentage point increase from the same quarter in 2019/20 (4,458).

Q3

Quarter 3 has had the highest number of cases each year since 2018/2019.

Speak Up month occurs during quarter 3 – in October. Speak Up month is a national campaign, led by the National Guardian's Office, aimed at raising awareness of speaking up.

Types of issues

Workers speak up to Freedom to Speak Up Guardians about a range of topics.

The COVID-19 pandemic and worker safety

Workers spoke up about the COVID-19 pandemic and the ways it had impacted them, including:

- staffing levels
- social distancing rules not being followed
- support from management for sufferers of long COVID
- support from management for staff isolating
- plans for 'getting back to normal'
- timings of the second vaccines.

This is in line with findings from [pulse surveys](#) completed by Freedom to Speak Up Guardians during the first wave of the COVID-19 pandemic. In the first pulse survey (April 2020), 76 per cent of respondents said worker safety and wellbeing was a matter being spoken up about. This increased to 83 per cent in May 2020.

Patient safety/quality

In 2020/21, 18 per cent of cases involved an element of patient safety/quality. This was a five-percentage point decrease from 2019/20.

Though the Freedom to Speak Up Guardian role was first established in NHS and Foundation Trusts, there are now different types of organisations supported by Freedom to Speak Up Guardians. These include non-patient-facing organisations, such as national bodies.

Those working in non-patient-facing organisations are less likely to encounter patient safety/quality issues. And so, the expansion of the Freedom to Speak Up Guardian into such organisations may affect the proportion and number of cases involving patient safety/quality at a national level.

However, most cases (95.9%) raised with Freedom to Speak Up Guardians last year - as reported to the NGO - were raised with guardians supporting NHS and Foundation Trusts. The cases raised with Freedom to Speak Up Guardians in non-patient-facing organisations do not account for the fall in the proportion of cases involving an element of patient safety/quality, which continues the downward trend seen since 2017/18.

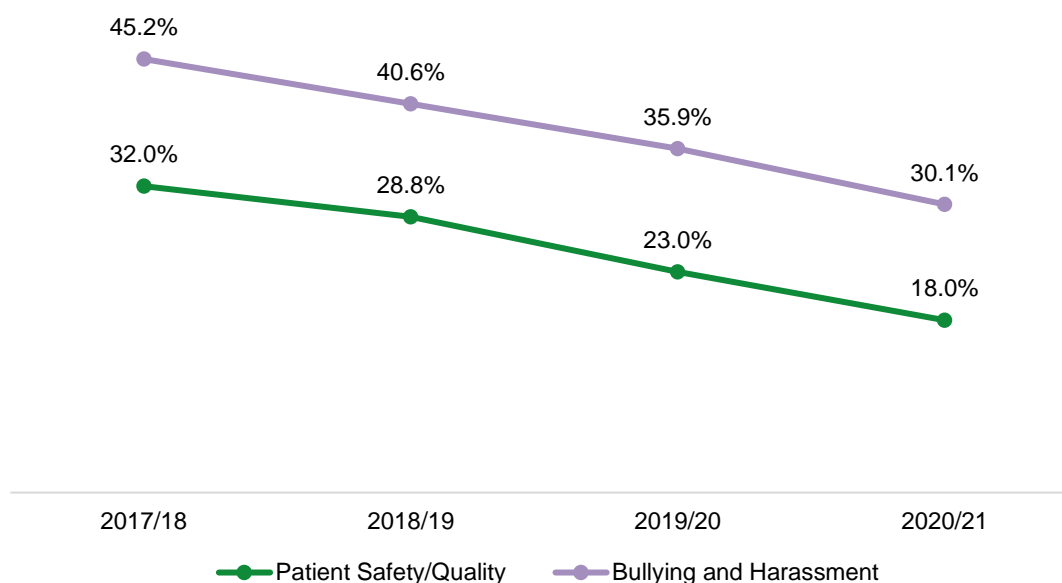


Figure 9: Percentage of cases with an element of patient safety/quality and/or an element of bullying and harassment

Bullying and harassment

There were 30.1 per cent of cases raised in 2020/21 involving an element of bullying and harassment (please see figure 9, above). This was a 5.8 percentage point decrease from 2019/20 and continued the downward trend seen since 2017/18.¹²

Guidance on recording cases and reporting data

In response to the results of the pulse surveys and feedback from Freedom to Speak Up Guardians, we updated the guidance for Freedom to Speak Up Guardians on recording cases and reporting data, adding a worker safety category. This updated guidance came into effect in April 2021.

We are continuing to review this guidance to broaden our understanding about cases raised with Freedom to Speak Up Guardians which are not related to bullying and harassment and/or patient safety/quality and ensuring the guidance is relevant, including to the ever-changing composition of the network.

¹ A case may include both an element of patient safety/quality and bullying and harassment. Therefore, there may be overlapping cases reported in each type of issue.

² FTSU Guardians may collect more information about types of issues at a local level.

Cases by organisation

There are increasing numbers of non-trust organisations with Freedom to Speak Up Guardians.

However, most cases reported to the NGO were still from NHS Trusts, with 95.9 per cent of cases in 2020/21 raised by workers in NHS Trusts (19,560). The Freedom to Speak Up Guardian role was first introduced into these organisations and it has become well embedded within them.

The number of Freedom to Speak Up Guardians at NHS Trusts on the NGO directory was lower at the end of 2020/21 than in April 2020. This suggests there were fewer Freedom to Speak Up Guardians dealing with an increased number of cases.

NHS Trusts

On average, more cases were raised with Freedom to Speak Up Guardians in Ambulance Trusts (see figure 4, below) compared to all other trust types. Acute specialist trusts and 'other'³ trust types saw the fewest cases across 2020/21, on average.

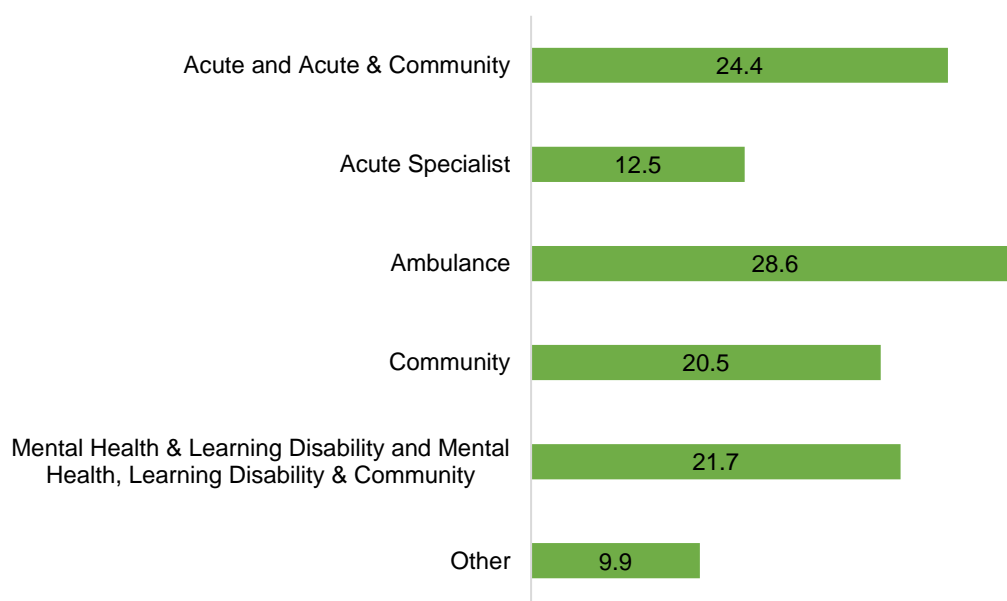


Figure 4: Average number of cases per submission⁴ by trust type (2020/21)

On average, a greater number of cases were raised with Freedom to Speak Up Guardians in larger organisations. This is in line with data from previous years.

³ Other trust types include Nightingale hospitals and Isle of Wight NHS trust

⁴ A submission is a quarterly submission by an organisation, this is not an average for the whole year. We have used this approach due to missing data points (organisations not submitting in every quarter).

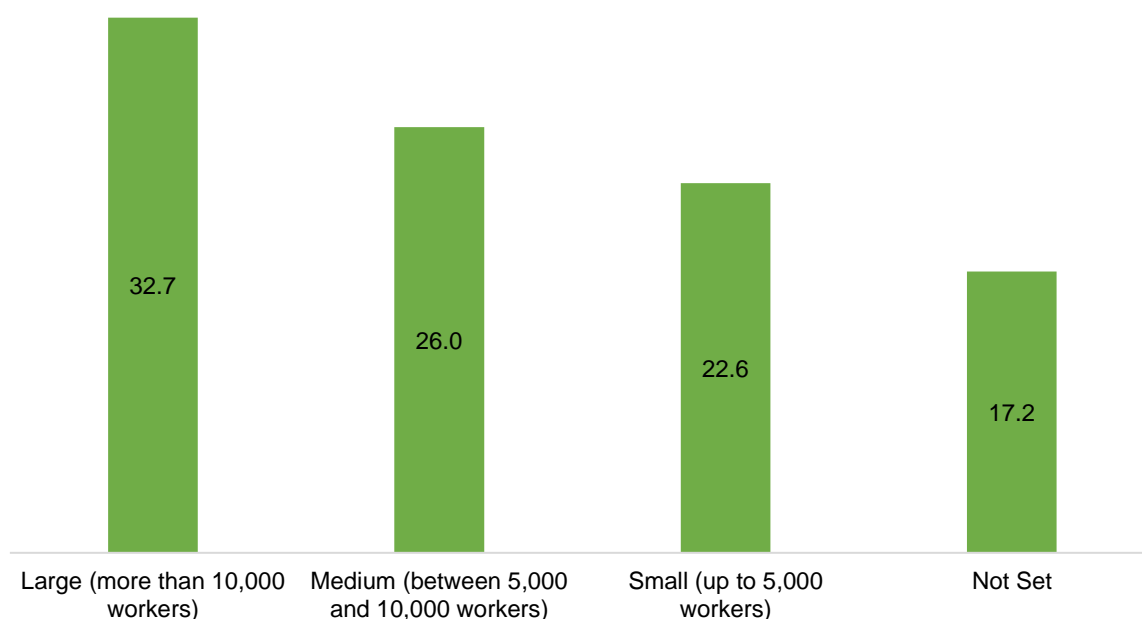


Figure 5: Average number of cases per submission⁵ by trust size (2020/21)

Non-trusts

There was an increase in cases reported by non-trusts this year. Just over four per cent (4.1%, or 828) of this year's cases were from non-trusts compared to 1.0 per cent in 2019/20.

The largest portion of cases were raised with Freedom to Speak Up Guardians in:

- National bodies (330, 1.6%)
- Independent healthcare providers (304, 1.5%).

The remaining cases were raised with Freedom to Speak Up Guardians in different organisation types, including primary care organisations, clinical commissioning groups and pharmacies.

In 2019/20, 35 non-trust organisations submitted data to the portal for at least one quarter (including zero case submissions). In 2020/21, this increased to 111 non-trust organisations submitting data for at least one quarter (including zero case submissions).

The Freedom to Speak Up Guardian network continued to evolve during the pandemic, with a greater proportion of guardians supporting non-trusts. Therefore, the increase in the number of cases raised with Freedom to Speak Up Guardians supporting non-trusts - as reported to the NGO - is unsurprising. However, unlike NHS and Foundation Trusts, non-trusts were less likely to report data to the NGO, despite national guidance.

⁵ A submission is a quarterly submission by an organisation, this is not an average for the whole year. We have used this approach due to missing data points (organisations not submitting in every quarter).

The NGO is working with Freedom to Speak Up Guardians in non-trusts to support them in reporting this information to ensure that the office can have oversight and report on cases raised with the guardian network as a whole.

Other indicators of performance

The Care Quality Commission (CQC) regulates and inspects many of the organisations with Freedom to Speak Up Guardians. The CQC gives one of four ratings to services they regulate: outstanding, good, requires improvement, and inadequate.

On average, Freedom to Speak Up Guardians in lower rated NHS trusts received more speaking up cases each quarter. This was also the case in 2019/20.

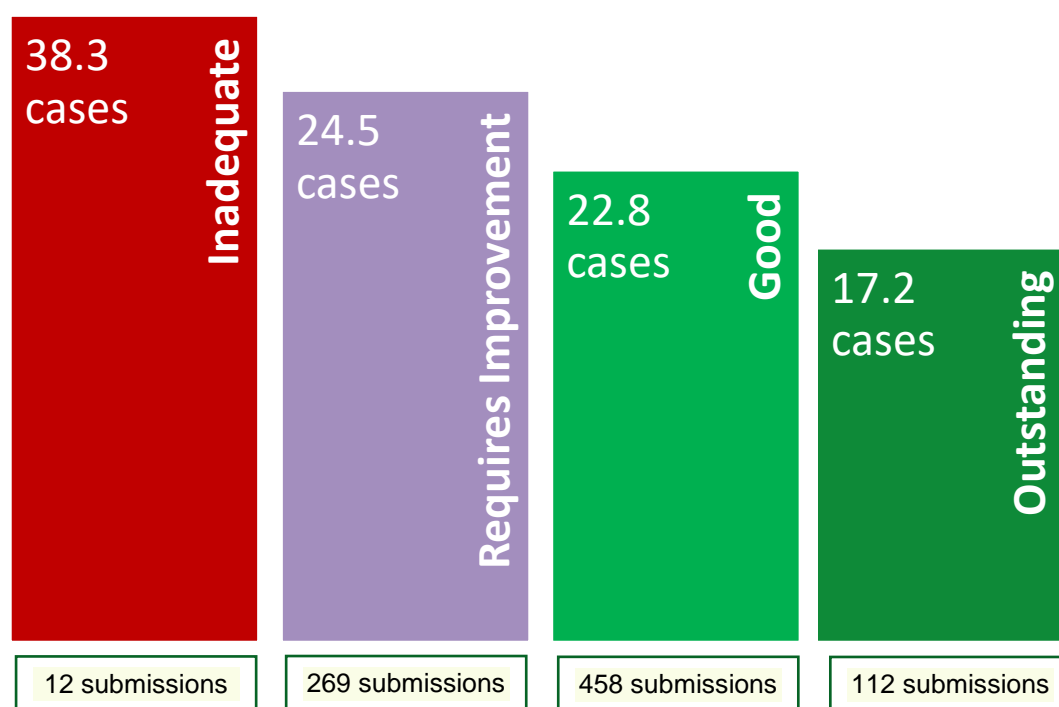


Figure 6: NHS Trusts: Average number of cases per submission by CQC rating⁶ (2020/21)⁷

⁶ CQC ratings correct as of 3 May 2021 – or last rating before trust was archived by CQC.

⁷ A submission is a quarterly submission by a trust. In total, there were 858 submissions by NHS trusts throughout 2020/21. Data has been separated in this way due to some organisations not submitting data for all four quarters.

Professional groups and seniority

Registered Nurses and Midwives accounted for the biggest portion of cases raised with Freedom to Speak Up Guardians (28.9%).⁸ Data from [NHS Digital](#) showed that in February 2021, 25.8 per cent of workers in NHS Trusts and Clinical Commissioning Groups were Nurses and Health Visitors. While these groups are not directly comparable, it indicates that the proportion of cases raised with Freedom to Speak Up Guardians by these groups is to be expected bearing in mind the share of the workforce they involve.

Administrative, clerical, maintenance and ancillary staff were the professional group that accounted for the second largest portion of cases, at 20.8 per cent (4,237). This was similar to 2019/20.

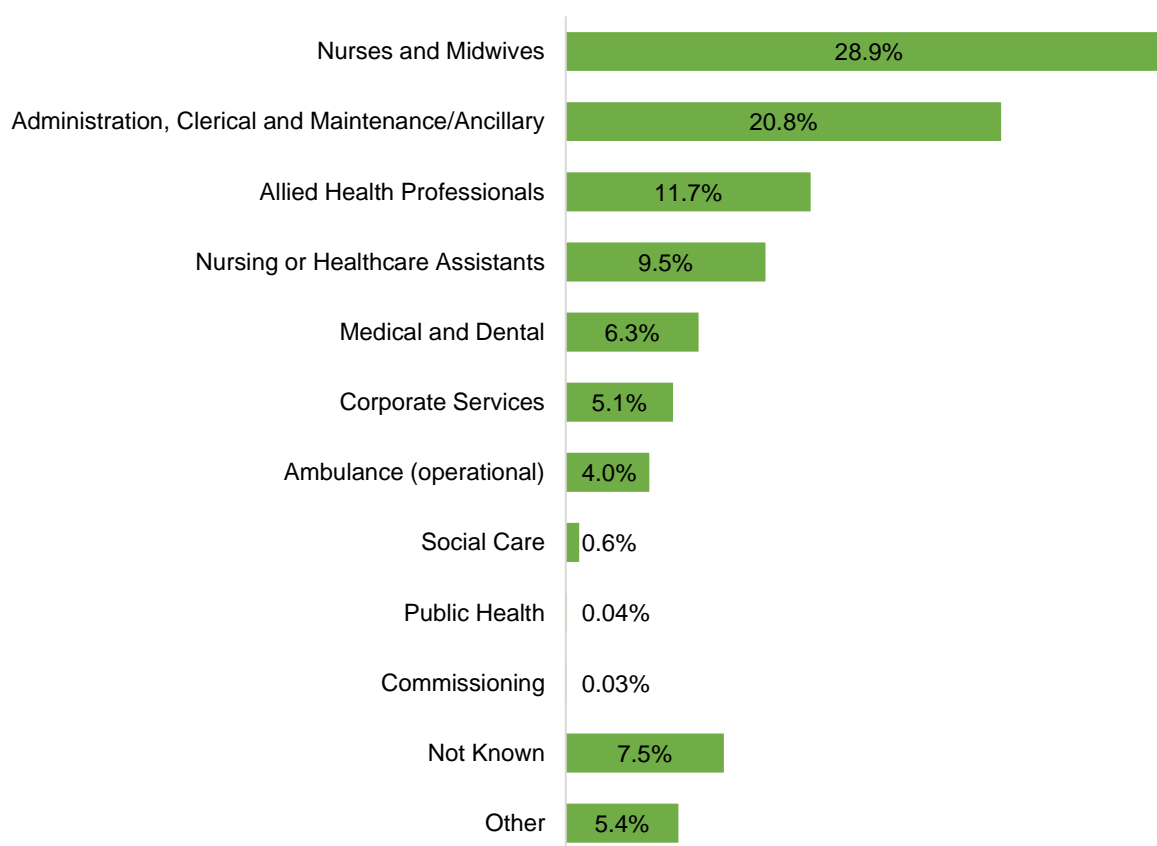


Figure 7: Percentage of cases raised by professional group (2020/21)

⁸ [Guidance on Professional Groups and Levels](#), National Guardian's Office

From April 2020 onwards, Freedom to Speak Up Guardians recorded the seniority of those speaking up to them.

Over three quarters (77.3%) of cases raised with Freedom to Speak Up Guardians in 2020/21 were raised by those categorised as 'workers' and 12.2 per cent were raised by managers. The smallest proportion of cases (2.1%) were raised by senior leaders.

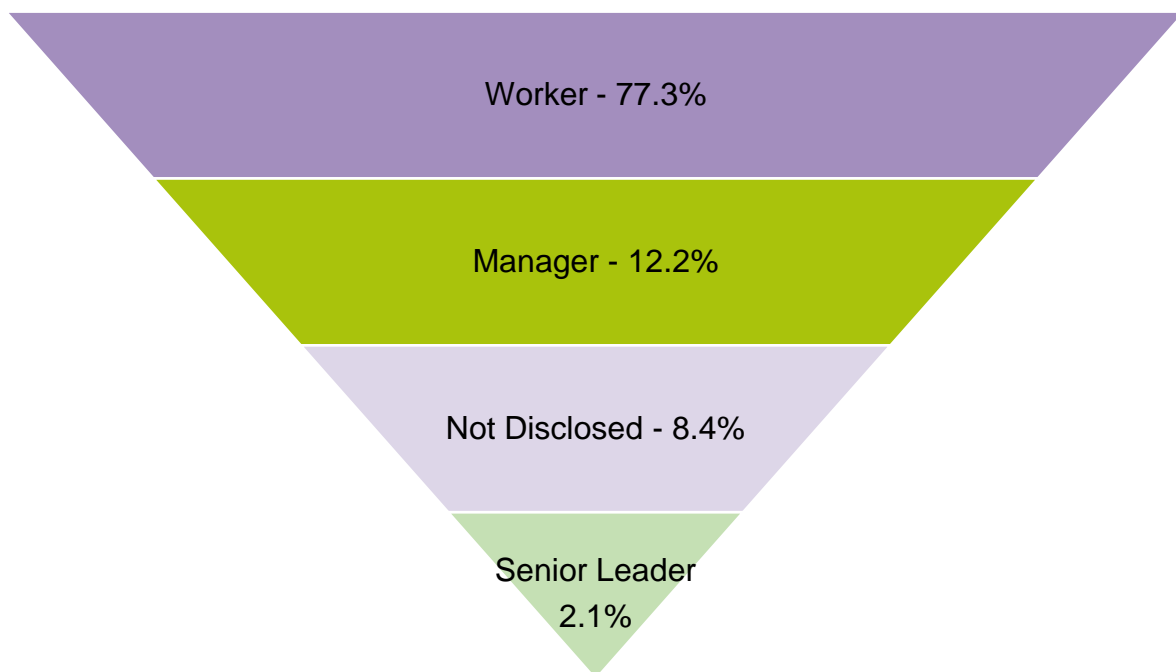


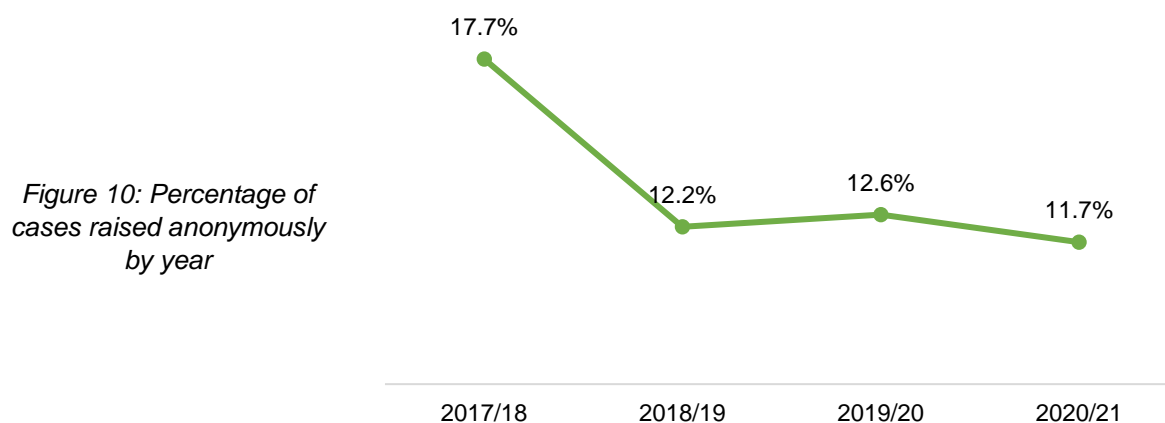
Figure 8: Percentage of cases raised by professional level (2020/21)

Anonymous cases

When someone speaks up anonymously, no one knows their identity. In comparison, speaking up confidentially is when the worker speaking up reveals their identity to someone on the condition that it will not be disclosed further without their consent (unless legally required to do so).

Workers speaking up anonymously may be an indicator that speaking up arrangements or culture need improvement. For instance, workers may choose to speak up anonymously because they are concerned about detriment for speaking up.

The proportion of cases being raised anonymously has dropped since 2017/18 when 17.7 per cent of cases were anonymous. There was a six-percentage point decrease from 2017/18 to 2020/21.



There were small changes over the year in the proportion of cases raised anonymously. The lowest quarter was quarter 3 with 10 per cent (532 cases).

Quarter 3 is also when Speak Up month (October) takes place. Freedom to Speak Up Guardians use this national campaign as an opportunity to raise awareness within their organisations.

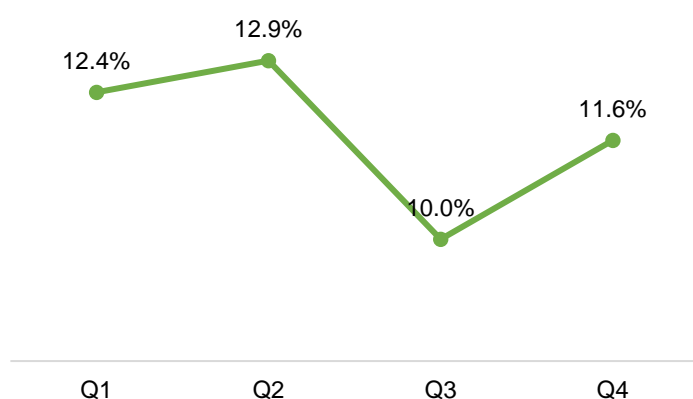


Figure 11: Percentage of cases raised anonymously by quarter (2020/21)

Disadvantageous and/or demeaning treatment for speaking up

Disadvantageous and/or demeaning treatment for speaking up (often referred to as 'detriment') may include being ostracised, given unfavourable shifts, being overlooked for promotion or moved from a team.

Detriment for speaking up was indicated in just over three per cent of cases (632). The proportion of cases involving detriment has gradually decreased from 2017/18 (5.1%) to 2020/21 (3.1%) as shown in figure 10, below.⁹

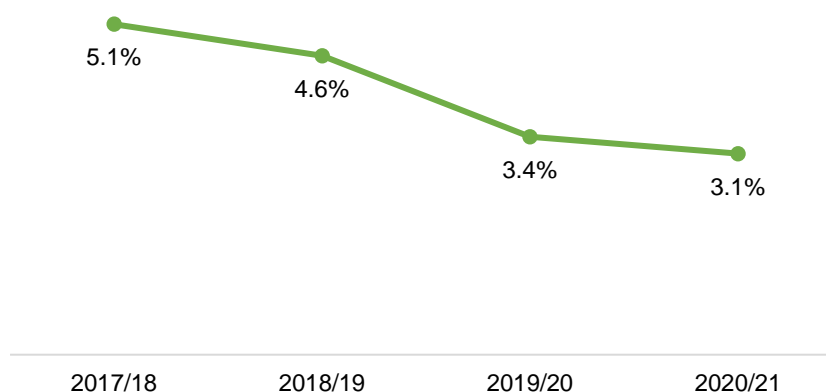


Figure 12: Percentage of cases where detriment is indicated by year

Over the course of 2020/21, the percentage of cases involving detriment increased from 2.7 per cent in Q1 (April to June 2020) to 3.5 per cent in Q4 (January to March 2021).

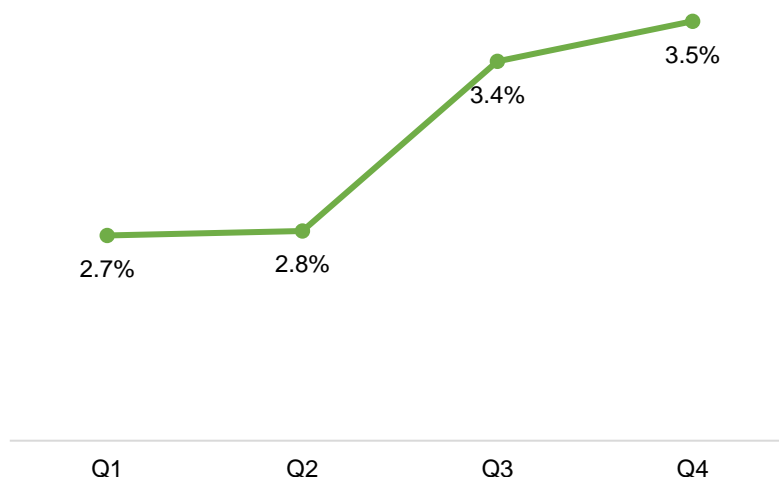


Figure 13: Percentage of cases where detriment is indicated by quarter (2020/21)

⁹ Whilst the proportion of cases involving detriment has decreased, the actual numbers have increased overall, in line with the increased number of cases reported to the NGO.

Feedback

Feedback is an important part of the speaking up process.

Feedback should be sought from workers about their speaking up experience. This feedback can then be used for learning and improvement within organisations.

Would you speak up again?

Freedom to Speak Up Guardians ask those they support whether, given their experience, they would speak up again. In most cases where feedback was provided, workers answered 'Yes' (84.3%). This was lower than previous years (85.2% in 2019/20 and 88.2% in 2018/19).

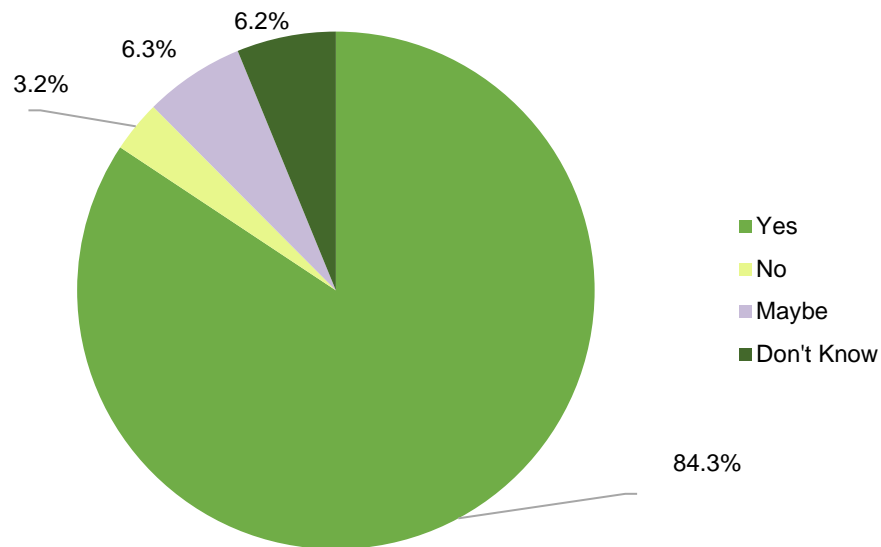


Figure 14: 'Given your experience, would you speak up again?'

Themes

Freedom to Speak Up Guardians provide brief details of the main themes from the feedback they received. The responses¹⁰ detailed some of the main themes spoken up about and themes of feedback from workers who have spoken up.

The following key themes were included in the data:

Freedom to Speak Up Guardian

- Workers who spoke up felt listened to and supported by the Freedom to Speak Up Guardian. They appreciated having an impartial person to speak to who had the time to listen to the matter that they were raising. Nearly a quarter of all learning theme comments from quarter four mentioned that workers felt listened to and nearly a fifth mentioned feeling supported. There were multiple mentions of speaking up being a positive experience and workers would speak up again.
- The Freedom to Speak Up Guardian was non-judgemental and unbiased which helped workers feel safe to speak up.
- Workers felt that their Freedom to Speak Up Guardian was empathetic, and it felt like they cared. This helped workers feel safe to speak up and gave them confidence to speak up. Workers were grateful for the service.

“Staff liked the fact that they can contact the guardian as often as they want and there is no time limit to the length of the call.”

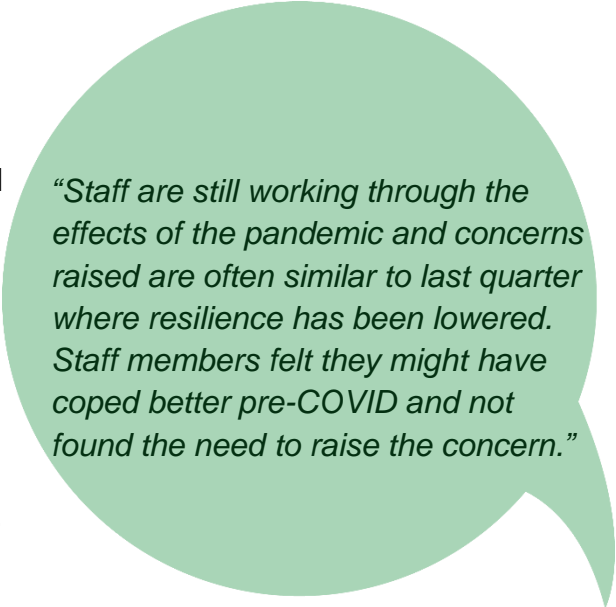
“I am very grateful that we have Freedom to Speak Up in the Trust, and I was very touched by the follow up emails to check in with me – a lovely caring touch, so thank you!”

COVID-19 pandemic

- Freedom to Speak Up Guardians also detailed that the pandemic has limited some opportunities to get out and speak to workers in person and raise awareness of the Freedom to Speak Up Guardians and the support they can offer workers.

¹⁰ There were 169 responses in quarter one, 180 in quarter two, 183 in quarter three and 185 in quarter four.

- There were also themes around the health and wellbeing of workers. This was in relation to COVID-19 and more generally.



“Staff are still working through the effects of the pandemic and concerns raised are often similar to last quarter where resilience has been lowered. Staff members felt they might have coped better pre-COVID and not found the need to raise the concern.”

Bullying and harassment

- Bullying and harassment remains a key topic spoken up about. There were some cases which noted that workers had tried to speak up about this before via other channels (e.g. line management) but nothing had changed.

Communication

- There were concerns raised about communication issues, including the style of communication, lack of clear communication around issues such as infection prevention controls and differing local interpretations of trust-wide guidance.
- A lack of support from managers and relationship issues with management were key themes. This was related to support for speak up and support following incidents at work. Workers also spoke up about management styles and behaviour of managers.

Characteristics

- There were comments about lack of support and less opportunities for Black and Minority Ethnic groups. Matters to do with equality, diversity and inclusion were raised with Freedom to Speak Up Guardians. According to Freedom to Speak Up Guardians, some of these cases were historical, and workers who raised them said they had felt able to do so on the back of the Black Lives Matter movement.

Policies and procedures

- Policies and procedures were mentioned frequently, with issues around these not being followed, training on specific procedures not being adequate, and COVID-19 policies and procedures not being followed.
- Feedback suggested that regular communication, early intervention and quick resolutions led to more positive experiences for individuals.

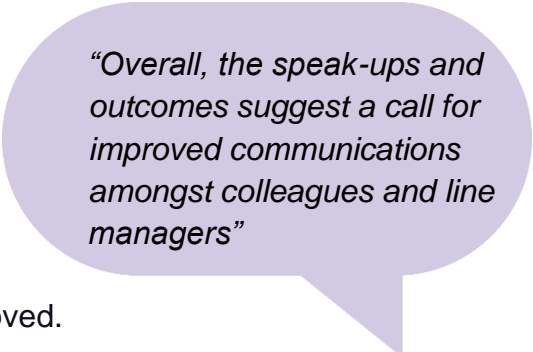
Learning points

Freedom to Speak Up Guardians are asked to record the learning points arising out of the cases raised with them to allow them to make suggestions for improvement. The learning points also allow the NGO to spot broader trends and themes.

The key learning points were the following:

Communication

- Communication was mentioned in over a fifth of the comments, indicating a potential need for improved communication between managers/leadership and workers. Workers noted that they sometimes felt unable to speak to their line managers and that there wasn't enough communication from managers and senior leaders when investigating concerns.
- Communication themes also arose about corporate communications, specifically, including the need to explain the rationale behind changes (e.g. to services and organisational changes), the need for communication through various channels and formats to reach all workers, and the need for communication of difficult messages being improved.



“Overall, the speak-ups and outcomes suggest a call for improved communications amongst colleagues and line managers”

Attitudes and behaviours

- Concerns about attitudes and behaviour particularly in relation to line managers were raised with Freedom to Speak Up Guardians.
- Attitude and behaviour issues were also raised in light of the COVID-19 pandemic in which workers have stated their resilience has been lowered and stress levels increased.

COVID-19 pandemic

- Topics relating to the pandemic included:
 - Social distancing policies and the continuous communication of the importance of following these policies.
 - Workers communicated that they felt a heightened anxiety during the pandemic. In particular, there were concerns raised about the availability, suitability and proper use of personal protective equipment (PPE).
 - Reduced ability of Freedom to Speak Up Guardians to do walkabouts within their respective organisations.
 - Communication with workers who were shielding or working from home was also referenced as an area for learning and improvement.
 - Freedom to Speak Up Guardians commented on the impact the pandemic was having on staff wellbeing, leading to stress and burnout.

More signposting was needed to mental health and wellbeing support in some organisations.

- Workers being redeployed due to the pandemic was also referenced as an issue.

Responding to workers speaking up

- Some Freedom to Speak Up Guardians shared that early intervention and quicker resolution of issues generally lead to more positive outcomes. Where this was not possible then timely communication about ongoing investigations was crucial.
- Freedom to Speak Up Guardians noted some cases where people speaking up needed a listening ear and reassurance, and not necessarily for action to be taken. The importance of listening to workers was referenced multiple times as a key learning point.

“Helping staff to clarify their concerns - often they are not clear about what exactly the concern is around. Patience and good listening skills are key to supporting staff as well as identifying options that enable staff to self-determine their course of action and as a guardian supporting them to speak up where they feel this is the best option”

Impact of the Black Lives Matter movement

- According to some Freedom to Speak Up Guardians, the increased focus on the Black Lives Matter movement had empowered black, Asian and minority ethnic workers to bring more cases to Freedom to Speak Up Guardians, including historic incidents.
- In some organisations, there has been targeted support for black, Asian and minority ethnic workers, including raising awareness of how to speak up, executive colleagues meeting black, Asian and minority ethnic colleagues who had spoken up, and black, Asian and minority ethnic networks being established.

Freedom to Speak Up arrangements

- There were positive comments about Freedom to Speak Up being a useful route for workers, helping them clarify concerns and enacting changes.
- Having Freedom to Speak Up champions/ambassadors was noted as a positive addition to local Freedom to Speak Up arrangements.
- Freedom to Speak Up Guardians noted that they need to continue raising the profile of Freedom to Speak Up across their organisations.
- Freedom to Speak Up Guardians were continuing to work with HR teams to review policies and procedures that were outdated or not followed.

“Publicising the guardian role is needed consistently and using induction for new staff is important.”

Next steps

New guidance on reporting and recording data took effect from April 2021. This enables Freedom to Speak Up Guardians to identify and report on cases related to worker safety for the first time.

We will work with non-trusts to support them to report data to the NGO, in accordance with our guidance.¹¹

We are undertaking a wholesale review of the guidance for Freedom to Speak Up Guardians on [Recording Cases and Reporting Data](#). This is taking place with a view to enable us to shed more light on the variety of the matters that workers speak up about. It will also help us reflect the ever-changing composition of organisations supported by Freedom to Speak Up Guardians. The updated guidance will come into effect in April 2022.

The speaking up data relating to NHS trusts will continue to be uploaded to the [Model Health System](#). The Model Health System is a data-driven improvement tool that supports health and care systems to improve patient outcomes and population health.

This report will be shared with NHS England and Improvement and other systems and professional regulators, and the NGO will promote the use of this data by other organisations.

¹¹ The dates for future data collection windows can be found on the NGO [website](#).

Annex 1

Overall figures (table 1)

Quarter	Number of cases
Q1 (Apr – Jun 2017)	1,447
Q2 (Jul – Sep 2017)	1,515
Q3 (Oct – Dec 2017)	1,939
Q4 (Jan – Mar 2018)	2,186
Total 2017/18	7,087
Q1 (Apr – Jun 2018)	2,500
Q2 (Jul – Sep 2018)	2,651
Q3 (Oct – Dec 2018)	3,634
Q4 (Jan – Mar 2019)	3,459
Total 2018/19	12,244
Q1 (Apr – Jun 2019)	3,531
Q2 (Jul – Sep 2019)	3,764
Q3 (Oct – Dec 2019)	4,486
Q4 (Jan – Mar 2020)	4,418
Total 2019/20	16,199

Q1 (Apr – Jun 2020)	5,212
Q2 (Jul – Sep 2020)	4,927
Q3 (Oct – Dec 2020)	5,334
Q4 (Jan – Mar 2021)	4,915
Total 2020/21	20,388

Comparison by size of organisation (table 2)

Size	2017/18	2018/19	2019/20	2020/21
Small (less than 5,000 staff)	3,088	5,450	7,003	7,097
Medium (5,000 to 10,000 staff)	2,960	5,100	7,004	9,860
Large (more than 10,000 staff)	1,039	1,648	2,117	3,147
Unknown/Not Set	-	46	75	234
Total	7,087	12,244	16,199	20,388

Comparison by type of organisation (table 3)

Size	2019/20	2020/21
NHS trusts	16,032	19,560
Other organisations	167	828

Total	16,199	20,388
--------------	---------------	---------------

Comparison by CQC ratings¹² (table 4)

Rating	2017/18	2018/19	2019/20	2020/21
Outstanding	626	1,331	1,511	2,390
Good	3,057	5,199	9,078	10,403
Requires Improvement	3,103	5,414	5,271	6,333
Inadequate	297	300	264	459
Unknown/Not regulated by CQC/No published rating	4	-	75	803
Total	7,087	12,244	16,199	20,388

Cases by professional group (table 5)

	2020/21	
Prof. group*	Cases	%
Administration, Clerical & Maintenance/Ancillary	4,237	20.8%
Allied Health Professionals	2,382	11.7%

¹² Ratings correct as of 3 May 2021 – or last rating before trust was archived by CQC.

Ambulance (operational)	812	4.0%
Commissioning	7	0.0%
Corporate Services	1,043	5.1%
Medical and Dental	1,291	6.3%
Nursing Assistants or Healthcare Assistants	1,943	9.5%
Other	1,094	5.4%
Public Health	9	0.0%
Registered Nurses and Midwives	5,900	28.9%
Social Care	132	0.6%
Not Known	1,538	7.5%

Anonymous cases (table 6)

Quarter	Numbers recorded	% of cases reported
Q1 (Apr – Jun 2017)	266	18%
Q2 (Jul – Sep 2017)	292	19%
Q3 (Oct – Dec 2017)	308	16%
Q4 (Jan – Mar 2018)	388	18%

Total 2017/18	1,254	18%
Q1 (Apr – Jun 2018)	285	11%
Q2 (Jul – Sep 2018)	254	10%
Q3 (Oct – Dec 2018)	436	12%
Q4 (Jan – Mar 2019)	516	15%
Total 2018/19	1,491	12%
Q1 (Apr – Jun 2019)	449	13%
Q2 (Jul – Sep 2019)	510	14%
Q3 (Oct – Dec 2019)	516	12%
Q4 (Jan – Mar 2020)	562	13%
Total 2019/20	2,037	13%
Q1 (Apr – Jun 2020)	644	12.4%
Q2 (Jul – Sep 2020)	634	12.9%
Q3 (Oct – Dec 2020)	532	10.0%
Q4 (Jan – Mar 2021)	569	11.6%
Total 2020/21	2,379	11.7%

Patient safety cases (table 7)

Quarter	Numbers recorded	% of cases reported
----------------	-------------------------	----------------------------

Q1 (Apr – Jun 2017)	464	32%
Q2 (Jul – Sept 2017)	529	35%
Q3 (Oct – Dec 2017)	614	32%
Q4 (Jan – Mar 2018)	659	30%
Total 2017/18	2,266	32%
Q1 (Apr – Jun 2018)	772	31%
Q2 (Jul – Sep 2018)	811	31%
Q3 (Oct – Dec 2018)	992	27%
Q4 (Jan – Mar 2019)	948	27%
Total 2018/19	3,523	29%
Q1 (Apr – Jun 2019)	860	24%
Q2 (Jul – Sep 2019)	985	26%
Q3 (Oct – Dec 2019)	996	22%
Q4 (Jan – Mar 2020)	891	20%
Total 2019/20	3,732	23%
Q1 (Apr – Jun 2020)	973	18.7%
Q2 (Jul – Sep 2020)	931	18.9%
Q3 (Oct – Dec 2020)	948	17.8%

Q4 (Jan – Mar 2021)	816	16.6%
Total 2020/21	3,668	18.0%

Bullying and harassment cases (table 8)

Quarter	Numbers recorded	% of cases reported
Q1 (Apr – Jun 2017)	566	39%
Q2 (Jul – Sep 2017)	630	42%
Q3 (Oct – Dec 2017)	929	48%
Q4 (Jan – Mar 2018)	1,081	49%
Total 2017/18	3,206	45%
Q1 (Apr – Jun 2018)	1,046	42%
Q2 (Jul – Sep 2018)	1,104	42%
Q3 (Oct – Dec 2018)	1,489	41%
Q4 (Jan – Mar 2019)	1,330	38%
Total 2018/19	4,969	41%
Q1 (Apr – Jun 2019)	1,373	39%
Q2 (Jul – Sep 2019)	1,364	36%
Q3 (Oct – Dec 2019)	1,631	36%

Q4 (Jan – Mar 2020)	1,445	33%
Total 2019/20	5,813	36%
Q1 (Apr – Jun 2020)	1,456	27.9%
Q2 (Jul – Sep 2020)	1,563	31.7%
Q3 (Oct – Dec 2020)	1,636	30.7%
Q4 (Jan – Mar 2021)	1,476	30.0%
Total 2020/21	6,131	30.1%

Cases involving perceived detriment (table 9)

Quarter	Numbers recorded	% of cases reported
Q1 (Apr – Jun 2017)	97	7%
Q2 (Jul – Sep 2017)	72	5%
Q3 (Oct – Dec 2017)	100	5%
Q4 (Jan – Mar 2018)	92	4%
Total 2017/18	361	5%
Q1 (Apr – Jun 2018)	117	5%
Q2 (Jul – Sep 2018)	133	5%
Q3 (Oct – Dec 2018)	177	5%
Q4 (Jan – Mar 2019)	137	4%

Total 2018/19	564	5%
Q1 (Apr – Jun 2019)	133	4%
Q2 (Jul – Sep 2019)	122	3%
Q3 (Oct – Dec 2019)	161	4%
Q4 (Jan – Mar 2020)	128	3%
Total 2019/20	544	3%
Q1 (Apr – Jun 2020)	143	2.7%
Q2 (Jul – Sep 2020)	136	2.8%
Q3 (Oct – Dec 2020)	180	3.4%
Q4 (Jan – Mar 2021)	173	3.5%
Total 2020/21	632	3.1%

Feedback received (table 10)

Quarter	Feedback received	Yes	No	Maybe	Don't Know
Q1 (Apr – Jun 2017)	404	343	8	18	27
Q2 (Jul – Sep 2017)	511	446	21	33	15
Q3 (Oct – Dec 2017)	729	634	31	26	34

Q4 (Jan – Mar 2018)	763	654	24	31	38
Total 2017/18	2,407	2,077	84	108	114
% of total	-	87%	4%	5%	5%
Q1 (Apr – Jun 2018)	800	703	20	36	41
Q2 (Jul – Sep 2018)	802	698	12	49	43
Q3 (Oct – Dec 2018)	1,089	982	19	43	45
Q4 (Jan – Mar 2019)	1,124	983	32	68	41
Total 2017/18	3,815	3,366	83	196	170
% of total	-	88%	2%	5%	4%
Q1 (Apr – Jun 2019)	1,151	928	28	52	92
Q2 (Jul – Sep 2019)	1,044	883	24	54	57
Q3 (Oct – Dec 2019)	1,343	1,164	38	60	81
Q4 (Jan – Mar 2020)	1,232	1,090	30	48	64

Total 2019/20	4,770	4,065	120	214	294
% of total	-	85%	3%	4%	6%
Q1 (Apr – Jun 2020)	1696	1458	44	84	110
Q2 (Jul – Sep 2020)	1521	1242	45	114	120
Q3 (Oct – Dec 2020)	1630	1405	44	104	77
Q4 (Jan – Mar 2021)	1644	1368	76	105	95
Total 2020/21	6491	5473	209	407	402
% of total	-	84.3%	3.2%	6.3%	6.2%