
"I felt heard for the first time"

**A SUMMARY OF SPEAKING
UP TO FREEDOM TO
SPEAK UP GUARDIANS**

1 April 2022 – 31 March 2023



**National
Guardian**

Freedom to Speak Up

July 2023

Contents

Foreword	2
Introduction	5
Headlines 2022/23	7
Who is Speaking Up to Freedom to Speak Up guardians?	9
NHS trusts.....	10
Other organisations.....	11
Ratings.....	12
Professional groups	13
How are workers speaking up to Freedom to Speak Up guardians?	13
Anonymous reporting	14
What are workers speaking up about?	15
Worker safety or wellbeing.....	16
Patient safety and quality.....	17
Inappropriate attitudes or behaviours.....	17
Bullying or harassment	18
Other themes	19
Detriment.....	20
Feedback	22
Next steps	25
Annex	26

About the National Guardian's Office

The National Guardian's Office works to make speaking up become business as usual to effect cultural change in the NHS.

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 sector.

The role of Freedom to Speak Up guardians and the National Guardian were established in 2016 following the events at Mid-Staffordshire NHS Foundation Trust and recommendations from Sir Robert Francis' Freedom to Speak Up Inquiry.

There are now over 1,000 Freedom to Speak Up guardians in NHS primary and secondary care and independent sector organisations, national bodies and elsewhere that ensure workers can speak up about any issues impacting on their ability to do their job.

www.nationalguardian.org.uk

Foreword



This year, a record number of cases were raised to Freedom to Speak Up guardians – a 25 per cent increase on the large numbers recorded during the pandemic. Freedom to Speak Up guardians supported over 25,000 cases – that is 25,000 opportunities for learning and improvement which otherwise may not have been heard.

This report analyses the themes of the cases which are being raised to Freedom to Speak Up guardians, and looks at what this data can tell us about the speaking up culture in healthcare.

I am proud of the work which guardians do, and that they provide a trusted channel for healthcare workers to speak up to. But I am also thoughtful regarding this increase, which while showing trust in the Freedom to Speak Up Guardian role, can be seen as an indication that workers do not always have confidence in other routes to speaking up.

What is the ‘right’ number?

When I visit organisations, I am often asked: “What is the ‘right’ number of cases a Freedom to Speak Up Guardian should be handling?” My response is always – that depends. What is important is that leaders – whether they are executives, board members, HR directors or leaders of primary medical services – must remain curious about these numbers and look at them in conjunction with other information, such as staff survey responses, retention figures, incident reporting and exit interviews.

Low numbers could be a sign of a culture where concerns are dealt with swiftly by line managers and team leaders; where learning, not blaming, is the norm. But low numbers could also indicate a culture of fear, where no routes for speaking up are trusted; or one where the Freedom to Speak Up Guardian is spread too thinly, whether that is geographically or without the time and resources needed to be available to workers and to raise awareness. Our joint guidance with NHS England gives suggestions for considering what Freedom to Speak Up resource is needed.¹

High numbers of cases does not necessarily indicate that the organisation has a problem. It could mean that they have invested more in their Freedom to Speak Up Guardian route – with more guardians, greater visibility, and increased trust. This is similar to the discussions around what is the right level of patient safety reporting. It could also mean that an organisation is going through a time of uncertainty for workers, a change which can precipitate people going to their Freedom to Speak Up Guardian as they are unclear who to go to for clarity or reassurance.

It can also indicate the missing part of the Speak Up, Listen Up, Follow Up paradigm – following up. Workers speak up through various routes, but they are sometimes not

¹ https://nationalguardian.org.uk/wp-content/uploads/2022/06/B1245_ii_NHS-FTSU-Guide-eBook.pdf

given feedback on the action taken, so they reach out to their Freedom to Speak Up Guardian as they think that nothing is being done. This echoes what the NHS Staff Survey tells us, that speaking up is increasingly feeling futile for workers.²

Greater support is needed to improve the speaking up culture as a whole in healthcare. Do managers respond appropriately? Are HR processes fair? Do people feel listened to – including trainees, internationally educated recruits, bank workers, volunteers, and people who experience racism?

Leaders must assure themselves that their Freedom to Speak Up Guardian is supported, and that they are not overwhelmed emotionally or unable to carry out all aspects of the role.

Fear of detriment

Levels of anonymity are to me an indicator of confidence in the guardian route for speaking up. The proportion of cases raised anonymously continues to fall – down to 9.3% from 17.7% when we first started collecting data in 2017. People do not reveal their identity – even to a guardian - when they are too fearful of the potential consequences of speaking up. The continued high-profile cases reported in the media continue this chilling effect that speaking up is not safe. Add that to feelings that speaking up is futile, and this will silence workers who may feel that speaking up is not worth the risk if nothing will be done if they do.

While the proportion of cases which indicate detriment for speaking up has gone down to 3.9%, because of the increase in the number of cases, this equates to 144 more than last year – a thousand cases where detriment is indicated.

I am encouraged that Freedom to Speak Up guardians are available to support those people, and are felt to be an increasingly trusted route, but I am disappointed that detriment continues. No one should be punished for doing the right thing. When people speak up it is because they want things to improve – whether that is for the safety and quality of care for patients and their families or the working environment for colleagues.

For people to have confidence that speaking up is safe and indeed, celebrated, they need to see proof in practice. This means all leaders – from team leaders to chief executives and chairs – role modelling listening and following up in their day-to-day interactions, with every conversation.

Feedback

Over four-fifths (82.8%) of those who gave feedback to their guardian about their experience said they would speak up again. It is their comments which highlight why Freedom to Speak Up is so important and the benefits it can bring for worker wellbeing, staff retention and patient care.

“[They] felt heard for the first time and have retracted their intention to resign because workplace changes have been implemented with Freedom to Speak Up Guardian intervention.”

² [Fear-and-Futility-NHS-Staff-Survey-1.pdf \(nationalguardian.org.uk\)](https://www.nationalguardian.org.uk/fear-and-futility-nhs-staff-survey-1.pdf)

“[The Guardian] made me feel listened to and respected...I have now built on my confidence a little more and even though it has affected my mental health. [They] made me feel like a valued person.”

Until such time when speaking up is truly business as usual, we are grateful to the Freedom to Speak Up guardians who are helping to build that trust. They do this by thanking people, by listening without judgement and by helping people amplify their voices for change.



Dr Jayne Chidgey-Clark
National Guardian for the NHS

Acknowledgements

Thank you to 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 for maintaining 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 and to those who have spoken up for the benefit of patients and colleagues.

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.

The extraordinary circumstances of the pandemic 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.

In 2022/23, a record number of cases have been raised highlighting the incredible pressures on the healthcare system. People have spoken up about system pressures, in particular staffing levels and the impact this is having on wellbeing as well as other issues including incivility between colleagues, and patient safety concerns.

The data we present in this report is included in NHSE's [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 understanding their organisational culture and the barriers to speaking up that some workers may encounter. The [NHS Staff Survey](#) results are a helpful starting point for NHS organisations to understand if their workers feel able to speak up and if they feel their concerns will be addressed³.

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.⁴

³ [Fear-and-Futility-NHS-Staff-Survey-1.pdf \(nationalguardian.org.uk\)](#)

⁴ <https://nationalguardian.org.uk/learning-resources/case-studies/>

About this report

This report summarises the cases raised with Freedom to Speak Up guardians from 1 April 2022 to 31 March 2023⁵.

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 (92.2% or 23,392) 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.

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

There is now a network of over 1,000 Freedom to Speak Up guardians supporting workers in organisations in primary and secondary care, independent health care providers, integrated care systems and national bodies. In March 2023, there were 642 organisations supported by one or more Freedom to Speak Up Guardian.

⁵ [Speaking Up Data - National Guardian's Office](#)

Headlines 2022/23

TOTAL CASES



25,382 cases

were raised with
Freedom to Speak Up Guardians
in 2022/23

The highest number of cases recorded - 25% increase from 2021/22.

QUARTER 3 HAD THE LARGEST AMOUNT OF CASES



Quarter 3 (Oct-Dec 2022) had the highest number of cases raised with Freedom to Speak Up Guardians in a single quarter (6,947), a record number of cases.

This may be as a result of the awareness raising which takes place during Speak Up Month every October.

SOURCES OF CASES

Cases raised with Freedom to Speak Up Guardians in NHS Trusts (23,392) accounted for 92.2% of cases in 2022/23.

A further 1,990 cases (7.8%) were 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.

ANONYMOUS CASES

The percentage of cases which were raised anonymously has fallen to ten percent (9.3%).

This continues the downward trajectory from 2017, when 17.7% of cases were raised anonymously.



BULLYING AND HARRASSMENT

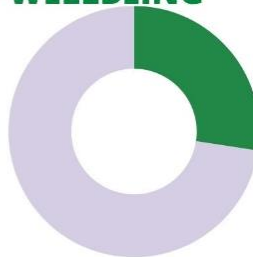
22 % of cases reported included an element of bullying or harassment.

A 10-percentage point fall compared to 2021/22 - this is at least in part due to cases being reported against the new category of 'inappropriate attitudes and behaviours'



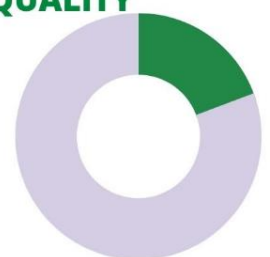
WORKER SAFETY AND WELLBEING

One in every four cases raised (27.4%) involved an element of worker safety or wellbeing.



PATIENT SAFETY AND QUALITY

19.3% of cases raised included an element of patient safety/quality, up from 18.8% in 2021/22.



INAPPROPRIATE BEHAVIOURS

30% of cases involved an element of inappropriate behaviours and attitudes.

The most reported theme in 2022/23.



DETRIMENT

Detriment for speaking up was indicated in 3.9% of cases.

This is down from 4.3% in 2021/22 but higher than 2019/20 and 2020/21 levels.



FEEDBACK

Over four-fifths (82.8%) of those who gave feedback said they would speak up again.



Total cases

From 1 April 2022 to 31 March 2023, 25,382 speaking up cases were raised with Freedom to Speak Up guardians. This was a 25 per cent increase from 20,362 cases reported in 2021/2022. Over 100,000 cases have now been reported to guardians since their establishment in 2016.

There has been a 28% increase in the number of data submissions made by Freedom to Speak Up guardians, 1,678 submissions in 2022/23 up from 1,308 in 2021/22. An average of 15.1 cases were reported in each data submission, this is slightly lower than the 17.7 cases reported, on average, in each submission in 2020/21.

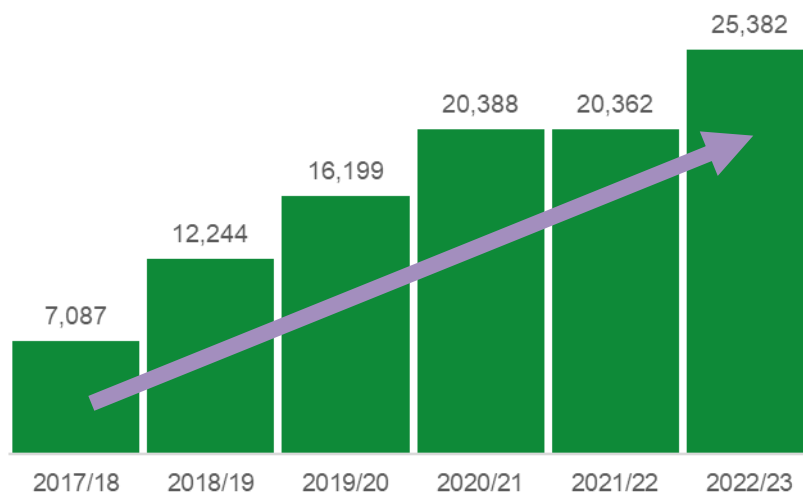


Figure 1. Total cases raised with FTSU Guardians

Quarter three (October to November 2022) saw the highest number of cases reported to the NGO in a single quarter (6,947) since Freedom to Speak Up guardians were established in 2016. This was a 23 percent increase from the same quarter in 2021/22 (5,667).

Quarter three has had the highest number of cases every year since 2018/2019, at least in part due to the awareness raising which takes place during Speak Up Month every October.

Who is Speaking Up to Freedom to Speak Up guardians?

In April 2020, there were 555 Freedom to Speak Up guardians on the NGO's directory. Almost three quarters of them (73.2%, or 406) were supporting NHS and Foundation Trusts (see figure 1). By March 2023, the number of Freedom to Speak Up guardians had increased to 1006, with a lower number (39.3%, or 396) of them from NHS trusts.

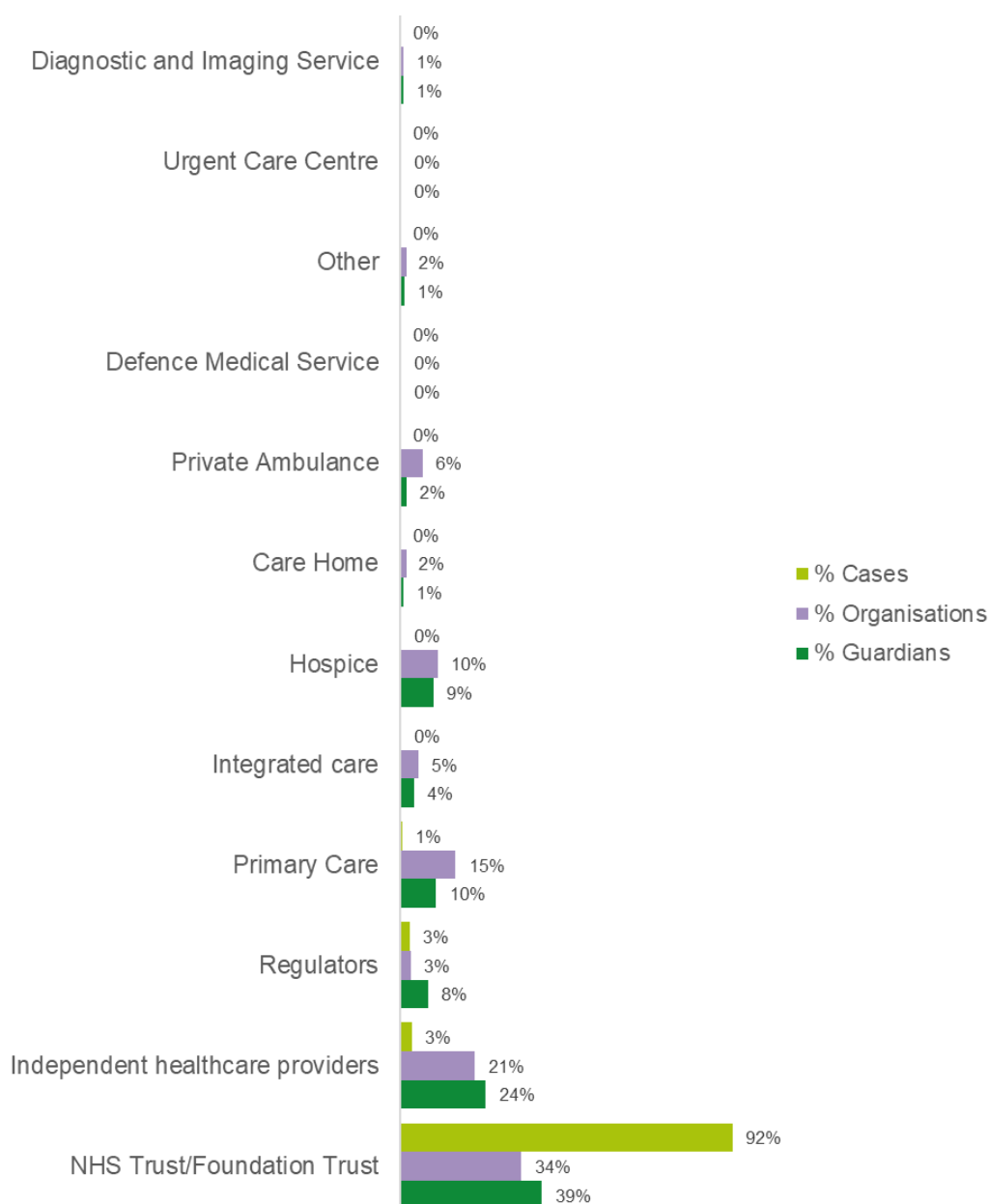


Figure 2. Proportion of Cases, Organisations and Guardians represented by each organisation type for 2022/23

There are increasing numbers of organisations that are not NHS trusts with Freedom to Speak Up guardians. However, most cases reported to the NGO in 2022/23 were still from NHS trusts (92.2%, 23,392 cases, see figure 2). The Freedom to Speak Up Guardian role was first introduced into these organisations, and it has become well-embedded within them.

Freedom to Speak Up guardians are required to report non-identifiable information to the NGO regarding the speaking up cases brought to them. This is a contractual requirement for organisations subject to the NHS standard contract, an expectation of other organisations with Freedom to Speak Up Guardian arrangements, and something considered by CQC when assessing the well-led domain of inspections.

In 2022/23, 157 organisations of those registered on the NGO directory did not submit any data and four of these were NHS trusts. The NGO will be reviewing how we monitor compliance in 2023/24.

NHS trusts

On average, NHS trusts reported 29.2 cases in each submission⁶. The maximum number of cases reported by an organisation in a single quarter was 178 however there were also six occasions when Freedom to Speak Up guardians reported that zero cases⁷ had been raised. Four NHS trusts did not submit any data in 2022/23.

The average number of cases submitted by NHS trusts has increased for all sectors compared to 2021/22 (see figure 3). In 2022/23, slightly more cases were raised with Freedom to Speak Up guardians in Acute and Acute/Community combined trusts (see figure 3) compared to other organisation types. However, Ambulance trusts and Mental Health & Learning Disability and Mental Health, Learning Disability & Community combined trusts also reported high volumes of cases per quarterly data submission. Acute Specialist, Community and 'other'⁸ trust types saw the fewest cases across 2022/23, on average.

⁶ 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 organisations not submitting in every quarter.

⁷ When a quarterly data submission was completed but with zero reported cases. This is different to where a quarterly data submission was not completed and the number of cases is unknown.

⁸This category refers to the Isle of Wight NHS Trust which provides services across all sectors.

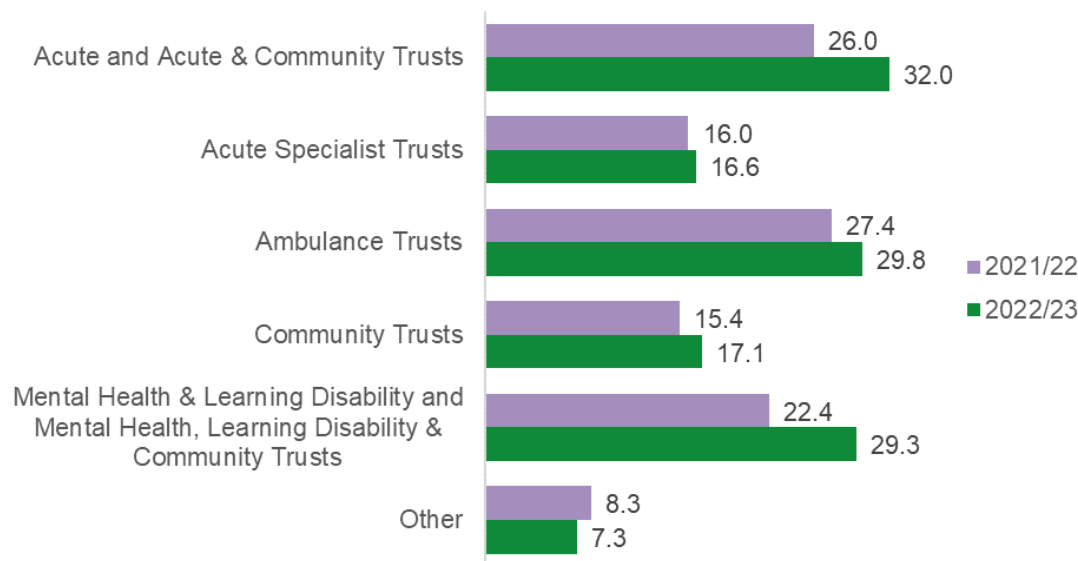


Figure 3. Average number of cases per submission by Sector

A greater number of cases were raised with Freedom to Speak Up guardians in larger organisations, on average (figure 4). This is in line with data from previous years. Twenty-three out of the twenty-eight Community and Acute Specialist trusts are classified as small organisations with up to 5,000 workers.

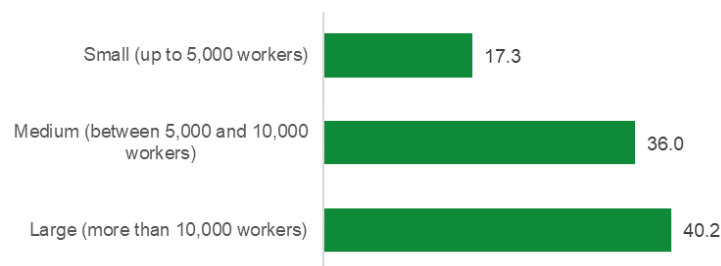


Figure 4. Average number of cases per submission by NHS Trust size (2022/23)

Other organisations

There was an increase in cases reported by other organisation types this year. Just under eight per cent (7.8%, or 1,990) of cases were from organisations which were not NHS trusts compared to six per cent (6.1% or 1240) in 2021/22. In 2022/23, 244 organisations other than NHS trusts submitted data for at least one quarter (including zero case submissions) however they were still less likely to report data to the NGO, despite national guidance.

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

- Independent healthcare providers (867 cases)
- National bodies (including arm's-length bodies (ALBs), system regulators and professional regulators (696 cases).
- Primary medical services (166 cases)

The remaining cases were raised with Freedom to Speak Up guardians across a range of organisation types, including integrated care boards/systems and hospices.

The NGO is working with Freedom to Speak Up guardians in these organisations which are not 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. We plan to share joint guidance with NHS England on the expectations of Freedom to Speak Up for primary care workers by the end of 2023/24. By February 2024, Integrated Care Boards (ICBs) are expected to have Guardian arrangements in place⁹.

Ratings

The Care Quality Commission (CQC) regulates and inspects many of the organisations with Freedom to Speak Up guardians, both NHS and independent providers. 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 trend has been observed since 2019/20. The results of the 2022 NHS Staff Survey showed a positive correlation between speaking up metrics and ratings received by the Care Quality Commission (CQC)¹⁰. Trusts with higher Freedom to Speak Up sub-scores were more likely to be rated 'good' or 'outstanding' by the CQC.

High numbers of cases does not necessarily indicate that the organisation has a problem, it could mean that they have invested more in their Freedom to Speak Up Guardian route.

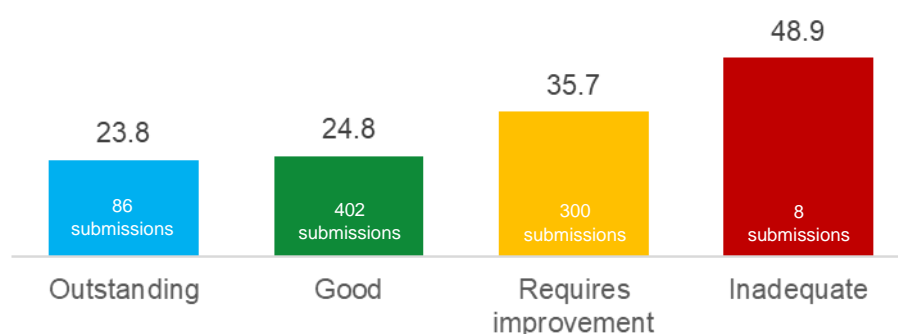


Figure 5. Average number of cases raised by NHS Trusts in 2022/23¹¹ – by latest CQC overall rating¹²

⁹ [NHS England » Integrated care boards, integrated care systems and Freedom to Speak Up](#)

¹⁰ [Fear-and-Futility-NHS-Staff-Survey-1.pdf \(nationalguardian.org.uk\)](#)

¹¹ A submission is a quarterly submission by a trust. In total, there were 796 submissions by NHS Trusts with CQC ratings. Data has been separated in this way due to some organisations not submitting data for all four quarters.

¹² CQC ratings correct as of 1st June 2023

Professional groups

Registered Nurses and Midwives accounted for the biggest portion of cases raised with Freedom to Speak Up guardians (29.9%). Data from NHS Digital¹³ showed that in February 2023, 27.9 per cent of workers in NHS Hospital and Community Health Services were registered nurses and midwives. While these groups are not directly comparable, the proportion of cases raised with guardians by these groups is similar to the share of the workforce they involve.

Administration and clerical staff accounted for the second largest portion of cases (20.2%, or 5,122 cases), a similar proportion to their share of the workforce (18.9%) in NHS Hospital and community health services.

Guardians are only one route for speaking up and these cohorts may also have other routes already embedded within their organisations.

Potentially of more concern is the smaller proportions of additional clinical services (healthcare assistants, nursing assistants, support to ambulance and other clinical staff) (9.8%, or 2,489 cases) and medical and dental workers (6.5%, or 1,638 cases) who are speaking up to Freedom to Speak Up guardians. These groups represent 19.4% and 10.5% of the NHS workforce respectively, both higher proportions than the proportion of workers from these groups who are using the guardian service as a route to speak up. The NHS Staff Survey 2022^{14, 15} also showed that nursing/healthcare assistants and medics confidence in speaking up is deteriorating, particularly for raising unsafe clinical practice concerns and feeling that they will be addressed.

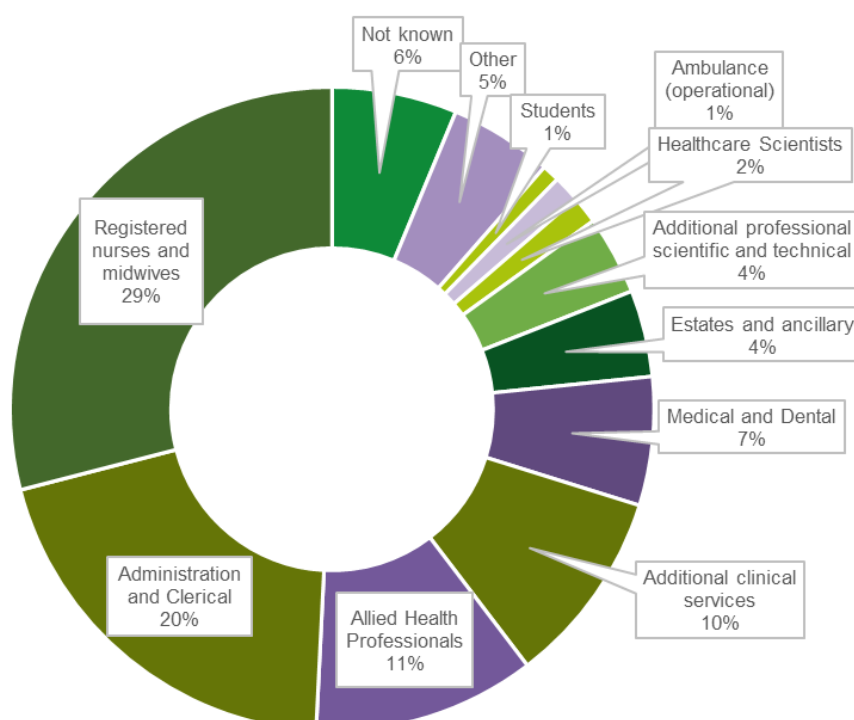


Figure 6. Proportion of cases raised by professional group¹

¹³ [NHS Workforce Statistics - February 2023 \(Including selected provisional statistics for March 2023\) - NDRS \(digital.nhs.uk\)](#)

¹⁴ [Working together to improve NHS staff experiences | NHS Staff Survey \(nhsstaffsurveys.com\)](#)

¹⁵ [Fear-and-Futility-NHS-Staff-Survey-1.pdf \(nationalguardian.org.uk\)](#)

How are workers speaking up to Freedom to Speak Up guardians?

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).

Anonymous reporting

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 percentage of cases which were raised anonymously fell to 9.3% in 2022/23 (2,379 cases). There has been a downward trajectory since 2017/18 when 17.7% of cases were anonymous (1,254 cases), an eight-percentage point change between 2017/18 and 2022/23.

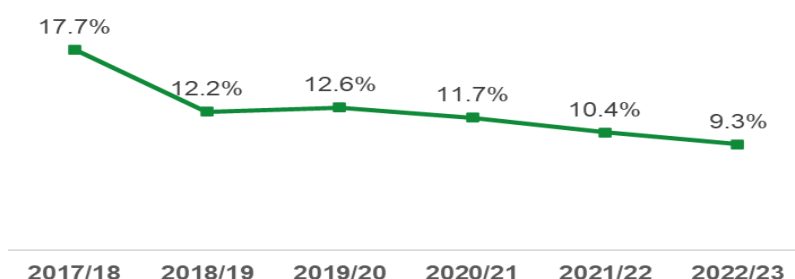


Figure 7. Proportion of cases reported anonymously – by financial year

There were small changes over the year in the proportion of cases raised anonymously. The lowest quarter was Q4 when 8.2% of cases were reported anonymously (556 cases).

Q3 had the biggest change from the previous year, a three-percentage point fall compared to Q3 in 2021/22 (674 cases). There has been no marked increase in the actual number of anonymous cases over the past three years (figure 8) despite overall case numbers going up.

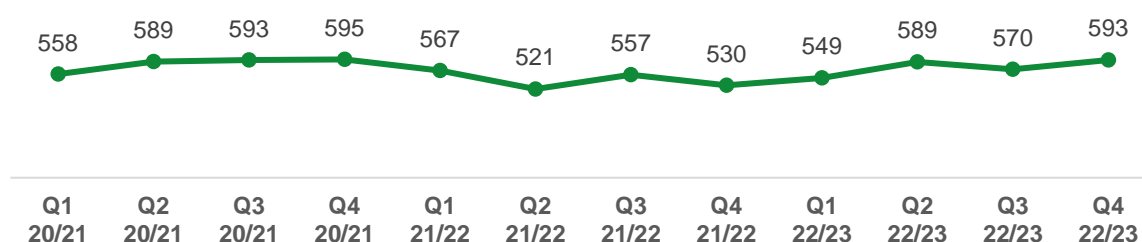


Figure 8. Moving average number of cases reported anonymously by quarter

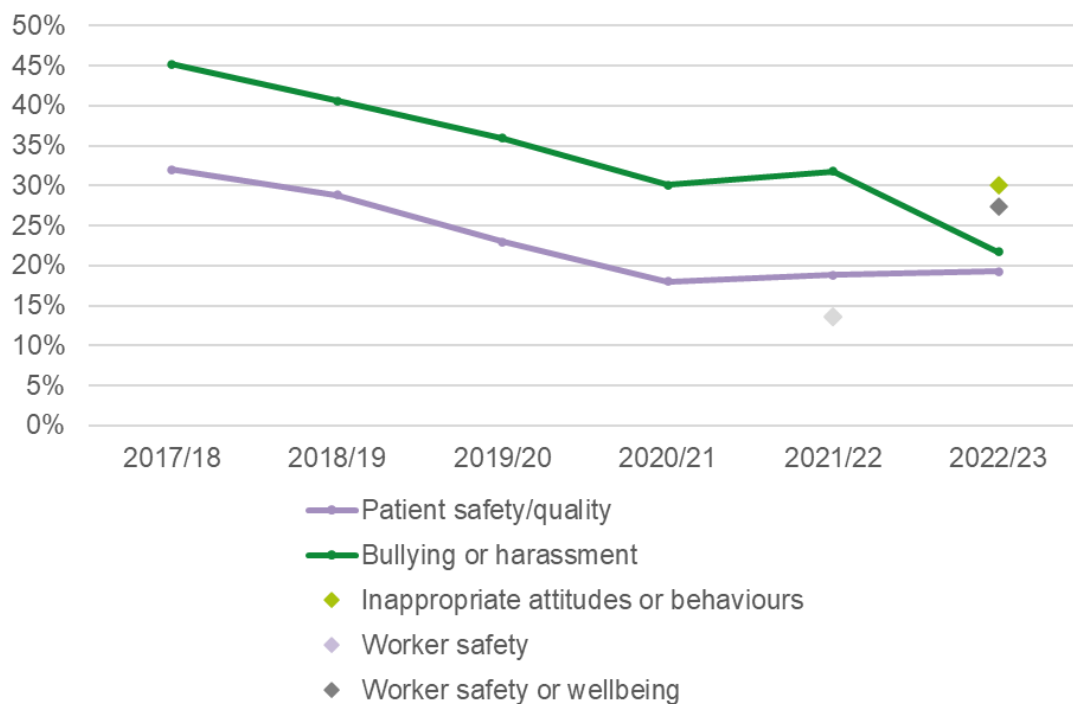
What are workers speaking up about?

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

In response to the feedback from Freedom to Speak Up guardians, we updated the guidance on recording cases and reporting data¹⁶, adding wellbeing to the worker safety category. We also introduced a new category 'inappropriate attitudes and behaviours' to broaden our understanding of behavioural cases that do not fall within the bullying or harassment category. This updated guidance came into effect in February 2022.

In 2022/23, cases were reported to the NGO against four categories: patient safety/quality, worker safety or wellbeing, inappropriate attitudes and behaviours and bullying or harassment. Please see our guidance for further information on these categories.

We are continuing to review this guidance to broaden our understanding about cases raised with Freedom to Speak Up guardians and ensure the guidance is relevant, including to the ever-changing composition of the network. The guidance will be reviewed and refreshed by the end of 2023/24 if changes are identified.



¹⁶ [Recording Cases and Reporting Data \(nationalguardian.org.uk\)](https://www.nationalguardian.org.uk/guidance/recording-cases-and-reporting-data)

Figure 9. Percentage of cases raised with Freedom to Speak Up Guardians over time by reporting category¹⁷

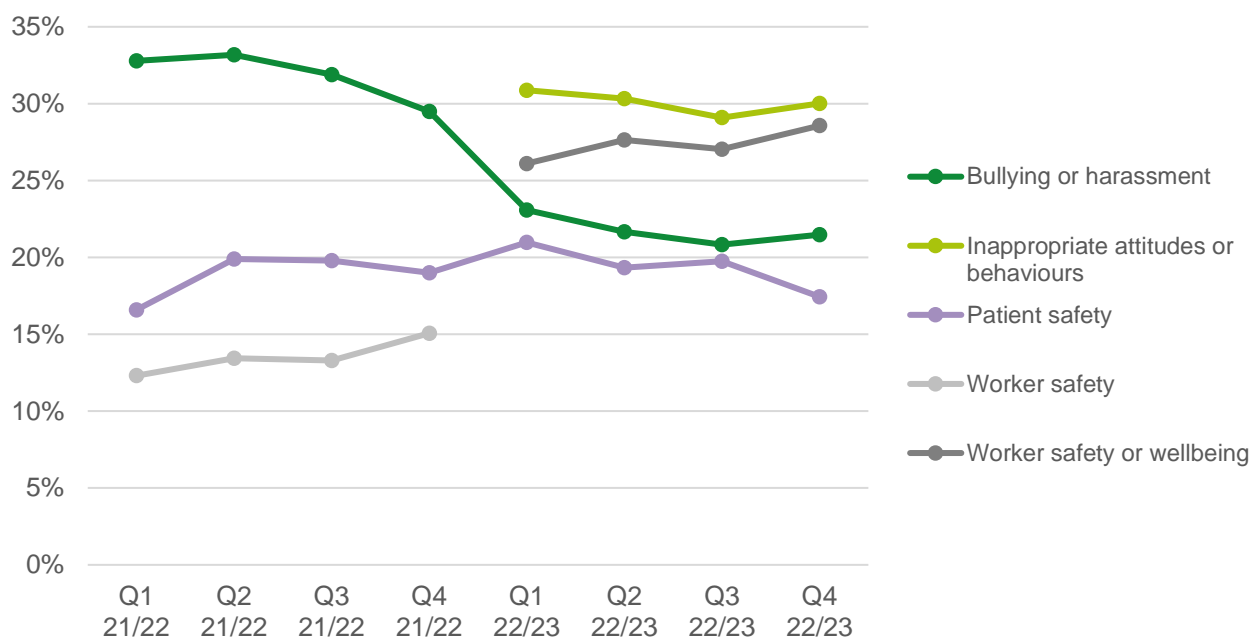


Figure 10. Percentage of cases raised with Freedom to Speak Up guardians – by quarter

Worker safety or wellbeing

In response to concerns being raised during the pandemic, the National Guardian's Office introduced a new reporting category of worker safety in 2021/22 and 14 per cent (13.5% or 2,757) of cases were reported against this category (figure 9). The category was further amended to 'worker safety or wellbeing' in 2022/23 and 27 percent of cases (27.4, or 6,953 cases) were reported against this new category, more than double compared to the 'worker safety' cases reported the previous year. It cannot be inferred if the increase is solely due to the inclusion of wellbeing cases or if there has also been an increase in the volume of worker safety cases.

In comments provided alongside data submissions, Freedom to Speak Up guardians told us about work that is being done in organisations to address worker safety, for example the application of zero-tolerance to violence policies. This work is vital. In the 2022 NHS Staff Survey, the proportion of workers who said they had experienced physical violence at work increased¹⁸ and of those who had experienced violence at work only 72.4% reported the incident.

Where guardians told us about the themes of cases pertaining to the worker safety and wellbeing category, staffing levels and increased workloads were the two most common. This reflects the known system pressures across the healthcare sector. The cost-of-living crisis was another theme that is having an impact on worker wellbeing.

¹⁷A case may include elements of multiple reporting categories and there may be overlapping cases reported in each type of issue.

¹⁸ [NHS Staff Survey 2022](#) 14.7% of workers had experienced violence from patients/service users, their relatives or other members of the public; 0.8% from managers and 1.8% from other colleagues.

Freedom to Speak Up guardians identified the need for workers to be able to access psychological support.

System pressures

In previous years workers spoke up about the COVID-19 pandemic and the ways it had impacted on them. Post-pandemic system pressures have been well-publicised^{19,20}, and workers are speaking up about this across all reporting categories:

- Staffing shortages and bed pressures increasing the risk of patient safety failings.
- Staffing shortages and workloads impacting worker safety and wellbeing.
- Stress caused by workloads is leading to incivility and poor behaviours, including bullying and harassment.

Patient safety and quality

In 2022/23, 19 percent of cases (19.3% or 4,898) involved an element of patient safety and quality, a similar proportion as reported in 2021/22 (18.8% or 3,838) (figure 9 above). 94.2% of the patient safety and quality cases raised with Freedom to Speak Up guardians were raised with guardians supporting NHS trusts.

In the 2022 NHS Staff Survey²¹ there was a fall in the proportion of workers who said that they would feel secure to raise concerns about unsafe clinical practice, this is a risk to patient safety.

Examples of cases that workers raised with Freedom to Speak Up guardians about patient safety or quality included:

- Health and safety concerns
- Infection prevention and control
- Medication management and prescribing
- Requirement for full debriefs after clinical incidents
- Requirement for improved staff supervision and training.

Inappropriate attitudes or behaviours

The National Guardian's Office introduced a new reporting category of inappropriate attitudes and behaviours in 2022/23 and almost a third of cases (30.0% or 7,621) were reported against this category this year making it the most reported theme.

Workers reported a range of behaviours to Freedom to Speak Up guardians under the inappropriate attitudes and behaviours category. These included disrespectful attitudes, lack of compassion, micro-aggressions, micromanagement, gossiping, aggressive communication styles, rudeness and unprofessional behaviour that didn't

¹⁹ [Full extent of NHS staffing crisis revealed \(unitetheunion.org\)](https://unitetheunion.org/)

²⁰ [NHS England » NHS pressure continues as hospitals deal with high bed occupancy](#)

²¹ [NHS Staff Survey 2022](#)

align with organisational values. Inappropriate attitudes and behaviours took place verbally and over email and were reported about workers at all levels of an organisation, including managers and leaders.

In response to the increase in inappropriate attitude and behaviour cases, Freedom to Speak Up guardians told us about initiatives that have been launched to address the issue, such as, cultural reviews, civility saves lives training, behaviour charters and the introduction of kindness and respect champions within teams.

Civility Saves Lives²² is a campaign that aims to raise awareness of the importance of civility in healthcare. The campaign was founded by health professionals who believe that a civil work environment is essential for patient safety and quality of care.

There is a growing body of evidence that shows that incivility can lead to:

- Increased stress and burnout among healthcare workers
- Reduced job satisfaction and morale
- Decreased teamwork and communication
- Increased errors and medical mistakes
- Worse patient outcomes

Bullying or harassment

There has been a large reduction in the proportion of cases reported to Freedom to Speak Up guardians under the category 'bullying or harassment'. In 2022/23, 22 percent of cases (21.7%, or 5,506) reported included an element of bullying or harassment, a 10-percentage point fall compared to 2021/22 (31.8%, or 6,471). This large fall is at least in part due to cases being reported against the new category of 'inappropriate attitudes and behaviours'.

In the 2022 NHS Staff Survey only half (49.7%) of the workers experiencing harassment, bullying or abuse at work²³ said that themselves or a colleague had reported the incident.

Examples of bullying and harassment cases reported to Freedom to Speak Up guardians included:

- Discrimination
 - Workers being blocked from development and promotion opportunities
 - Transparency and fairness of processes like performance management
 - Fairness and consistency of hearing flexible working requests
- Sexual harassment

²² [Home | Civility Saves Lives](#)

²³ [NHS Staff Survey 2022](#) 27.8% of workers had experienced harassment, bullying or abuse at work from patients/service users, their relatives or other members of the public, 11.1% from managers and 18.7% from other colleagues.

Bullying and harassment cases have been raised by workers about senior leaders and all levels of management but also by managers about junior team members.


Freedom to Speak Up guardians told us that early engagement can help to resolve bullying concerns in a timely way as people do not always understand the effects of their actions and how their behaviours are being perceived. Staff development to raise awareness of what constitutes bullying and harassment can also help to tackle the problem. Guardians felt that better support was needed for those who speak up on these matters, both emotional support and support in feeling empowered to challenge unacceptable behaviours and escalate concerns.

Other themes

Freedom to Speak Up guardians are asked to provide brief details of the main themes arising out of the cases raised with them. In most cases the main themes were aligned with the four reporting categories, however, some other themes were also identified.

Equality, diversity and inclusion (EDI)

Cases had been raised with Guardians about poor worker experience for those with protected characteristics such as neurodiverse workers, pregnant workers, workers with disabilities and overseas workers. There was a lack of understanding about cultural differences and some processes did not encompass cultural needs. Responses to reasonable adjustment requests were not always appropriate.



“Harassment experienced by frontline staff can have an element of racial discrimination which will often not be disclosed unless asked, hence this may be underreported, similar to this may be cases with an element of sexual harassment which will only be named after a longer discussion”

Freedom to Speak Up Guardian

Freedom to Speak Up guardians may want to consider capturing the protected characteristics of workers, where possible, to help identify any emerging themes. As part of the review of the recording and reporting data guidance the NGO will be undertaking this year, we will be exploring the benefits and challenges of capturing and reporting the protected characteristics of individuals who speak up.

Discrimination cases had also been raised by bank workers, part-time workers, and non-clinical workers who felt that they were treated differently to their permanent, full-time, and clinical colleagues.

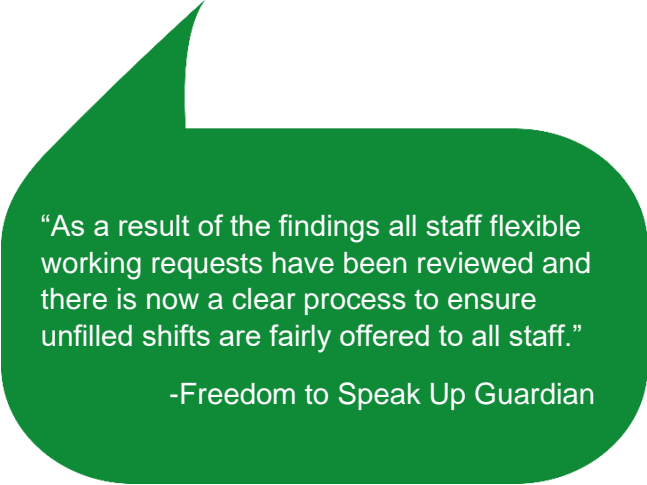
Learning from these themes had identified staff networks as an effective forum to help organisations discuss issues and drive improvements.

Policies and processes

Policies and processes were mentioned frequently. Some workers spoke up about a lack of transparency in recruitment, performance management and general

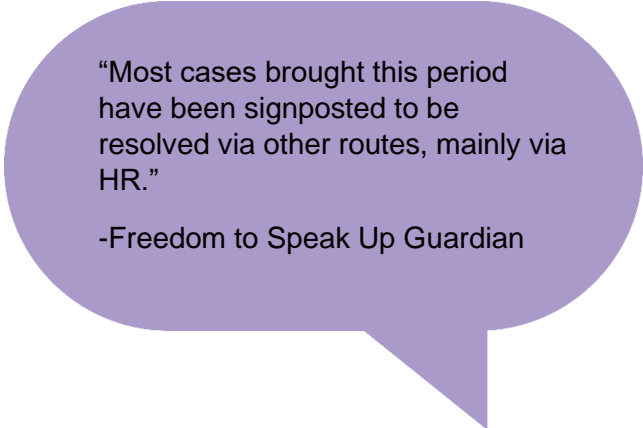
management decisions. Others raised concerns about how requests for special leave and flexible working were managed. In some cases, there was perceived discrimination due to the inconsistent application of these policies. Freedom to Speak Up guardians said that more training and development is needed for managers, for example unconscious bias training.

There was recognition that a large portion of cases raised were resolved by signposting workers to HR as they concerned processes or policies, such as, pay. Improved clarity of HR policies and processes may help to reduce the volume of HR issues being raised with Freedom to Speak Up guardians.



“As a result of the findings all staff flexible working requests have been reviewed and there is now a clear process to ensure unfilled shifts are fairly offered to all staff.”

-Freedom to Speak Up Guardian



“Most cases brought this period have been signposted to be resolved via other routes, mainly via HR.”

-Freedom to Speak Up Guardian

Detriment

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. Freedom to Speak Up guardians told us that some workers feared that they would suffer detriment for speaking up via other routes, in particular if their concern related to behaviours such as bullying and harassment.

Detriment for speaking up was indicated in just under four per cent of cases (1000 cases). In 2021/22 the proportion of cases involving detriment had started to increase for the first time since Freedom to Speak Up guardians were established. This year the proportion has decreased slightly (to 3.9%) but remains higher than 2020/21 levels (3.1%) as shown in figure 11.

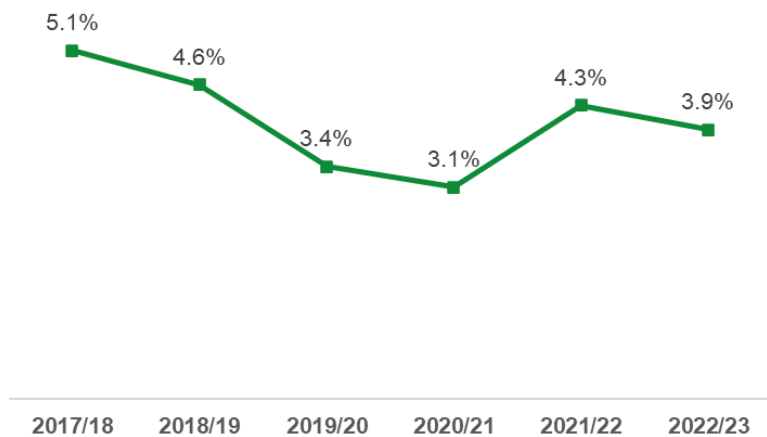


Figure 11. Proportion of cases that indicated detriment for speaking up – by financial year

The proportion of cases indicating detriment spiked in Q3 at 4.9% (342 cases). This is the highest rate (and overall number) of cases indicating detriment ever reported to the NGO in one quarter and was a 34% increase compared to Q3 of 2021/22 (256 cases).

The actual numbers of cases indicating detriment has increased for all four quarters of 2022/23 compared to the previous year.

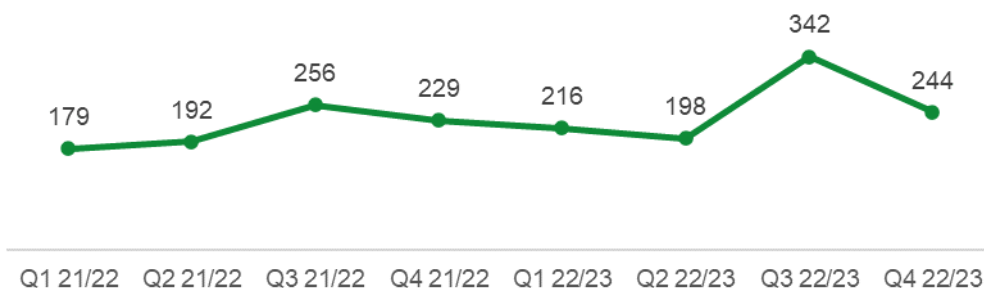


Figure 12. Number of cases that indicated detriment for speaking up – by quarter

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' (82.8%). This was slightly lower than previous years (85.1% in 2021/22 and 84.3% in 2020/21).

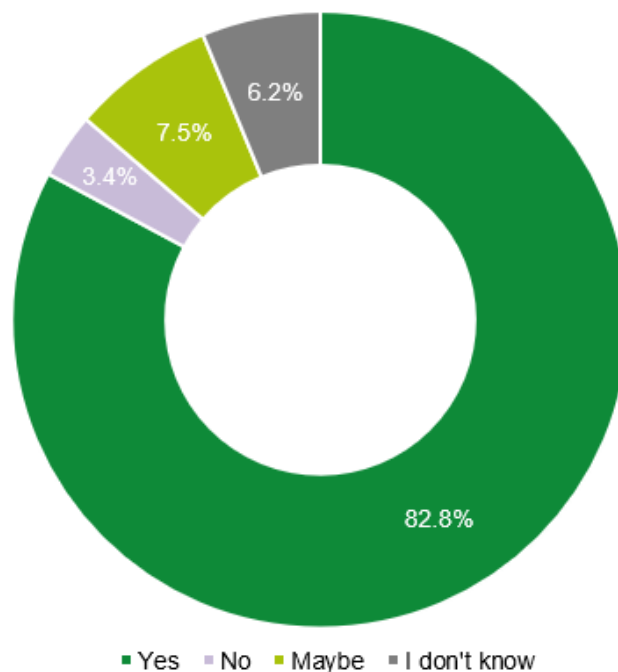


Figure 13. Given your experience, would you speak up again?

Feedback themes

Freedom to Speak Up guardians provide brief details from the feedback they gather from people who have spoken up to them. The responses²⁴ detailed some of the main themes about workers experience of speaking up. Most of the feedback comments (60.1%) came from Freedom to Speak Up guardians who support NHS trusts.

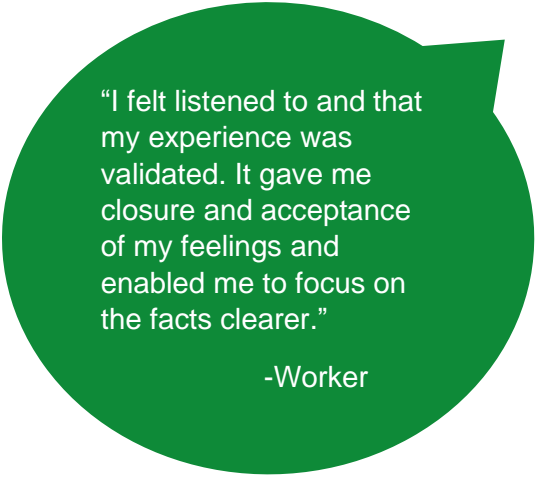
²⁴ There were 174 responses in Q1, 171 in Q2, 175 in Q3 and 170 in Q4.

Freedom to Speak Up guardians

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. Almost a third of all comments mentioned that workers felt listened to or supported.

There were multiple mentions of speaking up being a positive experience, workers feeling empowered to speak up again either to a Freedom to Speak Up Guardian or through other routes, for example line managers. Several workers also fed back that they would encourage colleagues to use the Freedom to Speak Up service.

The Freedom to Speak Up Guardian provided a psychologically safe, non-judgemental, and unbiased environment which helped workers feel able to speak up.



"I felt listened to and that my experience was validated. It gave me closure and acceptance of my feelings and enabled me to focus on the facts clearer."

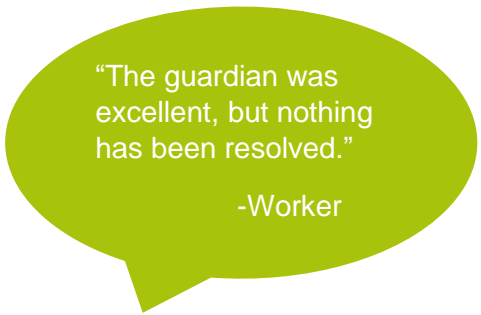
-Worker

Workers found the service easy to access and appreciated the flexibility given when arranging a time and space to meet.

One Freedom to Speak Up Guardian said that some workers who had a positive experience of speaking up have now become Freedom to Speak Up Champions. The Champion network helps to increase awareness of the service. Several Guardians told us that they are aiming to increase their champion networks to increase visibility.

Line Managers

Some workers told Freedom to Speak Up guardians that they used the service because their line managers did not take concerns seriously or were unsupportive. Guardians told us that there is a need for better training and development, so managers are equipped to listen and respond to speaking up cases. This should include soft skills, for example, around having difficult conversations. It is also recommended that managers complete Listen Up training²⁵ to improve awareness of how to respond to workers when they speak up and to better understand the barriers that these workers can face.



"The guardian was excellent, but nothing has been resolved."

-Worker

Case handling


Freedom to Speak Up guardians told us that keeping workers informed throughout the case handling process, providing updates at regular intervals, and giving feedback is paramount to a worker's experience. Where communication was poor workers were left with the perception that speaking up is not taken seriously and was

²⁵ [Freedom to Speak Up - elearning for healthcare \(e-lfh.org.uk\)](https://www.lfh.org.uk/e-learning/freedom-to-speak-up)

futile. Length of investigations, especially where no updates were provided, was also found to damage workers confidence in speaking up.

Feedback from workers highlighted the importance of establishing expectations at the start of the process, in particular around the Freedom to Speak Up Guardian's role and realistic outcomes. Several workers had negative experiences of speaking up due to unrealistic expectations of outcomes.

The NGO has recently published guidance on [Starting Out and Stepping Down](#) which brings together guidance relating to guardians starting the role, during periods of absence, and when they step down. This guidance includes a 'template opening letter', which guardians can adapt to outline their role, set expectations and agree next steps with people who come to them.



"We are seeing an increase of staff raising concerns with unrealistic outcomes expected."

- Freedom to Speak Up Guardian

Seeking feedback

In some cases, Freedom to Speak Up guardians had struggled to gather feedback from workers who spoke up. Where cases had been raised anonymously, feedback was difficult to gather. A small number of Guardians told us that they do not have enough time to seek feedback from workers who speak up.

Next steps

New [guidance](#) on reporting and recording data took effect from February 2022. This enables Freedom to Speak Up guardians to identify and report on cases related to inappropriate attitudes or behaviours and worker wellbeing for the first time.

We are undertaking a 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. There will also be a focus on exploring the benefits and challenges of capturing and reporting the protected characteristics of individuals who speak up. The updated guidance will come into effect in April 2024.

The NGO will also be reviewing how we monitor compliance of Freedom to Speak Up in organisations subject to an NHS contract and what actions to be taken for non-submission of case data in 2023/24.

We will work with organisations other than trusts to support them to report data to the NGO, in accordance with our guidance. We plan to share joint guidance with NHS England on the expectations of Freedom to Speak Up for primary care workers by the end of 2023/24²⁶.

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 other systems and professional regulators, and the NGO will promote the use of this data by other organisations.

²⁶ [NHS England » Integrated care boards, integrated care systems and Freedom to Speak Up](#)

Annex

Table 1. Overall figures

Quarter	Number of cases raised with Freedom to Speak Up guardians, as reported to the NGO
Total 2017/18	7,087
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 2018/19	12,244
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 2019/20	16,199
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 2020/21	20,388
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 2021/22	20,362
Q1 (Apr – Jun 2021)	4,876
Q2 (Jul – Sep 2021)	4,557
Q3 (Oct – Dec 2021)	5,705
Q4 (Jan – Mar 2022)	5,224
Total 2022/23	25,382
Q1 (Apr – Jun 2022)	5,493
Q2 (Jul – Sep 2022)	6,183
Q3 (Oct – Dec 2022)	6,947
Q4 (Jan – Mar 2023)	6,759

Table 2. Comparison by size of organisation

Size	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23
Small (less than 5,000 staff)	3,088	5,450	7,003	7,097	6,391	6,302
Medium (5,000 to 10,000 staff)	2,960	5,100	7,004	9,860	9,835	13,048
Large (more than 10,000 staff)	1,039	1,648	2,117	3,147	3,567	6,006
Not Set	-	46	75	234	569	26
Total	7,087	12,244	16,199	20,388	20,362	25,382

Table 3. Comparison by type of organisation

Size	2019/20	2020/21	2021/22	2022/23
NHS trusts	16,032	19,560	19,122	23,392
Other organisations	167	828	1,240	1,990
Total	16,199	20,388	20,362	25,382

Table 4. Comparison by CQC ratings

Rating	2017/18	2018/19	2019/20	2020/21	2021/22*	2022/23
Outstanding	626	1,331	1,511	2,390	-	2,811
Good	3,057	5,199	9,078	10,403	-	12,402
Requires Improvement	3,103	5,414	5,271	6,333	-	7,306
Inadequate	297	300	264	459	-	882
Unknown/Not regulated by CQC/No rating	4	-	75	803	-	1,981
Total	7,087	12,244	16,199	20,388	20,362	25,382

*Ratings comparison was not calculated in 2021/22

Table 5. Cases by professional group (2022/23)

Professional group	Cases	%
Additional clinical services	2,489	9.8%
Additional professional scientific and technical	1,007	4.0%
Administration and Clerical	5,122	20.2%
Allied Health Professionals	2,834	11.2%
Ambulance (operational)	334	1.3%
Estates and ancillary	1,103	4.3%
Healthcare Scientists	357	1.4%
Medical and Dental	1,638	6.5%

Registered nurses and midwives	7,367	29.0%
Students	222	0.9%
Not known	1,594	6.3%
Other	1,315	5.2%
Total	25,382	-

Table 6. Anonymous cases

Quarter	Numbers recorded	% of cases reported
Total 2017/18	1,254	18%
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 2018/19	1,491	12%
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 2019/20	2,037	13%
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 2020/21	2,379	11.7%
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 2021/22	2,120	10.4%
Q1 (Apr – Jun 2021)	532	10.9%
Q2 (Jul – Sep 2021)	451	9.9%
Q3 (Oct – Dec 2021)	674	11.8%
Q4 (Jan – Mar 2022)	463	8.9%
Total 2022/23	2,373	9.3%
Q1 (Apr – Jun 2022)	608	11.1%
Q2 (Jul – Sep 2022)	610	9.9%
Q3 (Oct – Dec 2022)	599	8.6%
Q4 (Jan – Mar 2023)	556	8.2%

Table 7. Patient safety/quality cases

Quarter	Numbers recorded	% of cases reported
Total 2017/18	2,266	32%
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 2018/19	3,523	29%
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 2019/20	3,732	23%
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 2020/21	3,668	18.0%
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 2021/22	3,838	18.8%
Q1 (Apr – Jun 2021)	809	16.6%
Q2 (Jul – Sep 2021)	907	19.9%
Q3 (Oct – Dec 2021)	1,129	19.8%
Q4 (Jan – Mar 2022)	993	19.0%
Total 2022/23	4,898	19.3%
Q1 (Apr – Jun 2022)	1,152	21.0%
Q2 (Jul – Sep 2022)	1,195	19.3%
Q3 (Oct – Dec 2022)	1,372	19.7%
Q4 (Jan – Mar 2023)	1,179	17.4%

Table 8. Worker safety or wellbeing cases²⁷

Quarter	Numbers recorded	% of cases reported
Total 2021/22	2,757	13.5%
Q1 (Apr – Jun 2021)	600	12.3%
Q2 (Jul – Sep 2021)	612	13.4%
Q3 (Oct – Dec 2021)	758	13.3%
Q4 (Jan – Mar 2022)	787	15.1%

²⁷ Wellbeing added to reporting category in 2022/23

Total 2022/23	6,953	27.4%
Q1 (Apr – Jun 2022)	1,434	26.1%
Q2 (Jul – Sep 2022)	1,709	27.6%
Q3 (Oct – Dec 2022)	1,879	27.0%
Q4 (Jan – Mar 2023)	1,931	28.6%

Table 9. Bullying or harassment cases

Quarter	Numbers recorded	% of cases reported
Total 2017/18	3,206	45.0%
Q1 (Apr – Jun 2017)	566	39.0%
Q2 (Jul – Sept 2017)	630	42.0%
Q3 (Oct – Dec 2017)	929	48.0%
Q4 (Jan – Mar 2018)	1,081	49.0%
Total 2018/19	4,969	41.0%
Q1 (Apr – Jun 2018)	1,046	42.0%
Q2 (Jul – Sep 2018)	1,104	42.0%
Q3 (Oct – Dec 2018)	1,489	41.0%
Q4 (Jan – Mar 2019)	1,330	38.0%
Total 2019/20	5,813	36.0%
Q1 (Apr – Jun 2019)	1,373	39.0%
Q2 (Jul – Sep 2019)	1,364	36.0%
Q3 (Oct – Dec 2019)	1,631	36.0%
Q4 (Jan – Mar 2020)	1,445	33.0%
Total 2020/21	6,131	30.1%
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 2021/22	6,471	31.8%
Q1 (Apr – Jun 2021)	1,599	32.8%
Q2 (Jul – Sep 2021)	1,512	33.2%
Q3 (Oct – Dec 2021)	1,819	31.9%
Q4 (Jan – Mar 2022)	1,541	29.5%
Total 2022/23	5,506	21.7%
Q1 (Apr – Jun 2022)	1,268	23.1%
Q2 (Jul – Sep 2022)	1,340	21.7%
Q3 (Oct – Dec 2022)	1,447	20.8%
Q4 (Jan – Mar 2023)	1,451	21.5%

Table 10. Inappropriate attitudes or behaviours cases

Quarter	Numbers recorded	% of cases reported
Total 2022/23	7,621	30.0%
Q1 (Apr – Jun 2022)	1,696	30.9%
Q2 (Jul – Sep 2022)	1,875	30.3%
Q3 (Oct – Dec 2022)	2,021	29.1%
Q4 (Jan – Mar 2023)	2,029	30.0%

Table 11. Cases involving perceived detriment

Quarter	Numbers recorded	% of cases reported
Total 2017/18	361	5.0%
Q1 (Apr – Jun 2017)	97	7.0%
Q2 (Jul – Sept 2017)	72	5.0%
Q3 (Oct – Dec 2017)	100	5.0%
Q4 (Jan – Mar 2018)	92	4.0%
Total 2018/19	564	5.0%
Q1 (Apr – Jun 2018)	117	5.0%
Q2 (Jul – Sep 2018)	133	5.0%
Q3 (Oct – Dec 2018)	177	5.0%
Q4 (Jan – Mar 2019)	137	4.0%
Total 2019/20	544	3.0%
Q1 (Apr – Jun 2019)	133	4.0%
Q2 (Jul – Sep 2019)	122	3.0%
Q3 (Oct – Dec 2019)	161	4.0%
Q4 (Jan – Mar 2020)	128	3.0%
Total 2020/21	632	3.1%
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 2021/22	856	4.2%
Q1 (Apr – Jun 2021)	179	3.7%
Q2 (Jul – Sep 2021)	192	4.2%
Q3 (Oct – Dec 2021)	256	4.5%
Q4 (Jan – Mar 2022)	229	4.4%
Total 2022/23	1,000	3.9%
Q1 (Apr – Jun 2022)	216	3.9%
Q2 (Jul – Sep 2022)	198	3.2%
Q3 (Oct – Dec 2022)	342	4.9%
Q4 (Jan – Mar 2023)	244	3.6%

Table 12. Feedback received, responses to 'would you speak up again?'

Quarter	Feedback received	Yes	No	Maybe	Don't Know
Total 2022/23	7,282	6,032	250	547	453
% of total	-	82.8%	3.4%	7.5%	6.2%
Q1 (Apr – Jun 2022)	1617	1346	56	123	92
Q2 (Jul – Sep 2022)	1784	1522	51	125	86
Q3 (Oct – Dec 2022)	1969	1645	83	152	89
Q4 (Jan – Mar 2023)	1912	1519	60	147	186