

**INDEPENDENT
NATIONAL
WHISTLEBLOWING
OFFICER**



People Centred | Improvement Focused

The National Whistleblowing Standards

Part 10

Arrangements for volunteers

APRIL 2021

Volunteers' access to the Standards and the Independent National Whistleblowing Officer (INWO)

1. All volunteers working within NHS services must have access to these Standards; they must be able to speak out where they have concerns over patient safety or malpractice, and they must have access to the support they need to do so.
2. Volunteers often have a unique perspective on the work of a ward or service. Their regular presence may mean they become aware of issues which are of concern, and they may well be uncertain of how to deal with them. They may also be uncertain about how serious a problem is, or whether it is something they should have any involvement in.
3. Volunteers are unlikely to share their concerns unless they are encouraged and offered the opportunity to share their insights with others. They may not feel that a whistleblowing procedure applies to them, so it is particularly important to ensure that all volunteers are informed of the procedure and how they can access it.

Volunteers raising concerns within NHS services

4. Volunteers do not have access to most NHS policies and procedures, but this procedure is an exception. They must have access to information and advice from all the same sources as board staff, including:
 - 4.1. the board's confidential contact for raising concerns, or other confidential speak up contact;
 - 4.2. the INWO (phone 0800 008 6112 or email INWO@spsso.gov.scot), who can provide information and advice about how a concern should be handled, and can provide support through the process; and
 - 4.3. coordinator for the organisation they are volunteering for.
5. They must also be able to raise concerns with:
 - 5.1. a service manager or team leader;
 - 5.2. a more senior manager if circumstances mean this is more appropriate;
 - 5.3. a volunteer representative (see below for details); or
 - 5.4. a confidential contact for raising concerns (in some places there may also be whistleblowing ambassadors or advocates).
6. NHS boards must be open to receiving concerns either directly from a volunteer, or through a volunteer coordinator or representative.

Volunteers raising concerns through the charity's representative

7. In addition to the routes normally available to staff, volunteers can also raise their concerns with a volunteer representative. This is the person nominated by the organisation arranging the volunteering opportunity (which could be directly through the NHS, a charity or other third sector provider). It may be that information and advice is enough for the volunteer to then raise the concern within the service. However, if this is not felt appropriate in the circumstances, or if the volunteer does not feel confident that this would achieve the right outcome, they must be able to raise their concern through the organisation's representative or volunteer coordinator.
8. Any organisation that engages volunteers to work in NHS services must be provided with information about these Standards and asked to ensure that they have someone (such as the volunteer coordinator), who can act as an advocate, and take the concerns to the board or primary care service on the volunteer's behalf, if needed. This person must be fully aware of these Standards, what volunteers can expect when they raise a concern, and who to contact in each of the boards where their volunteers work, in case any concerns are raised.
9. The volunteer representative must provide information and advice to volunteers, and discuss the implications of raising the concern either directly or using the representative as an advocate. This discussion must include:
 - 9.1. consideration of confidentiality issues;
 - 9.2. support available to the volunteer and how to access it; and
 - 9.3. details of the procedure and what to expect.
10. If a volunteer chooses to, they can use the volunteer representative to raise a concern on their behalf, and can choose whether they then remain anonymous to the board or service provider. If they choose this anonymity, all communication must go through the volunteer representative. This includes enquiries for further information, updates and a final response at the end of the process.



Recording volunteer concerns

11. Volunteer concerns should be recorded in the same way as any other concerns. Detailed information about what to record is available in Part 5 of the Standards.
12. For concerns that are raised by a volunteer representative rather than by the volunteer, the record should indicate the role of the person bringing the concern, as well as their full contact details, and information about the concern being raised. The name, contact details or any other personal details (including volunteering role) of the volunteer must not be recorded, as this could put them at risk of detriment.

Support for the volunteer

13. Volunteers raising concerns must have access to all appropriate forms of support. Their representative will be able to provide some support in person. They will also be expected to be aware of, or seek out information about, support options provided by the board or service provider.
14. Boards must ensure that, wherever possible, volunteers have access to the same support as staff do in relation to raising concerns. This may, on occasion, mean making special arrangements to ensure access, for example, to counselling which would normally be provided through an employee assistance scheme.

Signposting to the INWO

15. The final response or feedback provided by the NHS service on any concern raised with them must include signposting to the INWO. This also applies to concerns raised by volunteers, and the volunteer representative must take responsibility for passing on this information to the volunteer concerned.



INWO
Bridgeside House
99 McDonald Road
Edinburgh
EH7 4NS

Web www.inwo.org.uk

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