



***Great Yarmouth and Waveney
Clinical Commissioning Group***

HealthEast

Raising Concerns Policy

A Whistle-blowing Policy to secure Disclosure of Information in the Public Interest

CCG Establishment Date: 5th December 2012

The CCG has been authorised on the establishment date and from this date onwards has additional powers that include the approval of policies for documents required in 2013/14. This document will be effective from 1st April 2013 when the CCG will be formed as a separate NHS Statutory Body.

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Enquiries to:	Governance Manager

Revision History

Revision Date	Summary of changes	Author(s)	Version Number

Approvals

Significant policies of this nature are required to be approved by the Governing Body. Amendments will be taken back to either the Director of Operations or Audit Committee as required per the Policy Approval Protocol (see the Policy for Policies.)

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1 Summary

The Public Interest Disclosure Act 1998 (PIDA), which came into force on 2 July 1999, introduced specific rights for those who disclose information to a third party about an alleged wrong-doing in defined circumstances. (See reference to the Act in section 14 of this policy.)

The NHS Constitution was updated in 2011 to include the following:

- an expectation that staff should raise concerns at the earliest opportunity,
- a pledge that NHS organisations should support staff when raising concerns,
- and clarity around the existing legal right for staff to raise concerns about safety, malpractice or other wrong doing without fear of reprisal.

The Standards for Members of Clinical Commissioning Group governing bodies published in November 2012 include a requirement that members ensure there are effective complaints and whistleblowing procedures in place and in use

The Health Circular 1999/98 on whistleblowing requirements prohibits the use of confidentiality clauses in employment contracts and compromise agreements that seek to prevent disclosure of information in the public interest. The General Medical Council also published guidance in January 2012 advising doctors to avoid signing agreements that contain clauses that would prevent them raising concerns about patient safety.

This policy seeks to embed the requirements of the Act, Constitution, Health Circular and GMC guidance, specifically setting out:

The right and duty of employees of NHS Great Yarmouth and Waveney Clinical Commissioning Group (the CCG,) to raise any matters of concern that they may have at the earliest opportunity, relating to the delivery of healthcare services it commissions for patients or clients of the Clinical Commissioning Group (CCG.)

This right and duty to raise concerns is included within the national standard employee contract following a change made nationally in 2011 to enshrine this duty and whistleblowing rights into the contract terms.

The policy also guarantees that those raising concerns in good faith can do so without fear of reprisal or victimisation and demonstrates our commitment and support to employees who may need to come forward to express their concerns.

Individuals covered by the Act include 'employees' (those working under a contract of employment) and all 'workers'. More specifically, the Act covers employees, apprentices, agency workers, home-workers, National Health Practitioners such as GPs, certain dentists, ophthalmologists and pharmacists and so any retained clinicians employed by the CCG are included in this category. The Act also covers a worker who works or worked under a contract, whether express or implied, whereby the worker undertakes to do or perform personally any work or services for another party to the contract whose status is not by virtue of the contract that of a client or customer of any profession or business undertaking carried on by the worker. The genuinely self-employed are not covered by the Act. Members of the

Council of Members and on the Governing Body and its Sub Committees are covered by the Act due to their direct link with the commissioning of services delivered by the group.

This policy extends to include volunteers and self-employed contractors engaged in work with the CCG as these individuals/entities are required comply with CCG policies when carrying out work on behalf of the CCG. The Act itself does not extend to volunteers or self-employed persons but best practice guidance promotes extending internal policies to these groups to provide support in raising concerns.

The CCG will support the NHSCB in its direct commissioning obligations in respect of performance management, in particular supporting the implementation of the guidance in respect of early identification and intervention provided by the NHS Employers contained within its document 'Staying on Course – supporting doctors in difficulty through early intervention and action.'

Trainees on work experience programmes where the training is provided under a contract of employment or by any university, college, school or other educational establishment run by that establishment, will also be covered by the PIDA 1998.

The policy has been drawn up in line with the PIDA 1998 and the NHS Guidance in HSC 1999/198 in addition to further resources referenced in Section 3.9.

2 Introduction

The CCG wishes to encourage a free and open culture in dealings between its officers, employees and all people with whom it engages. The CCG recognises that effective, timely and honest communication is essential to its success.

This policy is designed to provide guidance to all those who work within the CCG either as an employee (or in some other associated capacity with or within the CCG) who may from time to time feel that they need to express their concern, relating to the CCG, with someone in confidence.

This policy does not replace any existing policy or business as usual practices for raising concerns, for example the Grievance Procedure or 121 meetings with lines managers it is designed to ensure that concerns relating to the wider public interest may be raised. The policy sets out the support and procedure for staff in raising issues to CCG management early on whilst at the same time provides contact details of external organisations including the national NHS Whistleblowing helpline.

This policy does not replace professional or ethical responsibilities, rules, guidance and codes of conduct.

The CCG wishes to encourage disclosures to be made internally but recognises that there may be occasions when an employee feels this is not possible.

3 Policy Statement

3.1 The CCG is committed to achieving the highest possible standards of service and the highest ethical standards in public life and in all of its practices. The CCG therefore

encourages freedom of speech to enable employees to raise concerns about malpractice at an early stage and preferably following this procedure.

3.2 The Board and Accountable Officer are committed to this policy. If an employee raises a concern under this policy they will not be at risk of losing their job or suffer any form of retribution as a result. Providing the person is acting in good faith, it does not matter if a mistake is made. This assurance is not extended to someone who maliciously raises a matter they know to be untrue – the CCG may choose to discipline such individuals under these circumstances.

3.3 The person making the allegation should make it clear that they wish the matter to be dealt with under this policy.

3.4 If the concern is for a patient/client formally detained against their will under the Mental Health Act, it is possible to refer the matter to the Mental Health Act Commission (see Appendix C). This is a government agency set-up to oversee the care and management of detained patients. The CCG seeks assurance through its contract monitoring processes that this provision is included in equivalent policies operating within healthcare providers through which it commissions healthcare.

14.2 Any unauthorised disclosure of personal information about any patient, client, clinician, member or colleague for whatever reason will be regarded as a most serious matter that will warrant action under the Disciplinary Policy and Procedure. In addition employee contracts agreed between employees and the CCG refer to Information Governance and Confidentiality, Standards of Conduct and Disclosure of Information in the Public Interest (Whistleblowing) requirements.

3.6 This policy should be used if an employee wishes to raise a genuine concern. If, however, the employee is aggrieved about their personal position, they should use the Grievance Procedure which can be obtained from their manager or a Human Resources representative. This Policy and Procedure is primarily for dealing with concerns where the interests of others, or the organisation itself, are at risk.

3.7 **It is imperative that users of this policy understand that the commencement of an investigation does not presume guilt** and that the reporting of concerns should not, accordingly, be delayed.

3.8 Should two or more people come to realise that they share similar concerns about an issue, care must be taken at once not discuss the matter further; nor should issues be discussed within groups. Adherence to this article will help to prevent potential challenges to the effect that concerns have been manufactured or exaggerated, thus running the risk of undermining the process.

3.9 Other Policy Documents –

The CCG operates a range of policies managed directly by specialists within the CCG and by the Commissioning Support Unit on behalf of the CCG procuring support services from this entity. The policies are stored in the Key Document Repository and referenced on the Key Document Tracker. The documents that have a link to this Raising Policy are listed below:

- Grievance Procedure
- Disciplinary Procedure and Procedure
- Standards of Business Conduct (See 'Framework to Delivering Good Governance' appendix to the CCG Constitution.)
- Counter Fraud Policy
- Bullying and Harassment
- Confidentiality
- Serious Incident Policy
- Risk Management Policy
- Information Governance and Security Policies

4 Scope

This policy applies to all employees and workers of the CCG (whether on substantive, temporary, or agency or bank contracts,) volunteers and self-employed contractors when engaged in work on behalf of the CCG, and retained clinicians and board and committee members. See further explanation of the scope set out earlier in the section 1.

5 Designated Officer

5.1 The Designated Officer is a named Non-Executive Director of the CCG with specific responsibility for addressing concerns raised in confidence. The Officer, who will be notified of all matters raised under this policy, will be kept informed at all stages of the procedure and will ensure that the matter is dealt with as outlined by this policy. For matters in respect of fraud see the procedures set out in the Counter Fraud Policy referenced in section 3.9.

5.2 An employee can contact the Designated Officer at any stage via the CCGs switchboard at headquarters – see Appendix C for details.

5.3 The Designated Officer has a deputy who will ensure matters are taken forward appropriately in his/her absence.

6 Definition of a Concern

6.1 The term 'concern' is used to describe circumstances where employees, individually or collectively, wish to raise an issue regarding the activities of the Trust or persons employed by the Trust.

6.2 Whilst this is not an exhaustive list, examples of incidents which may constitute a cause for concern are:

- Poor standard of patient care
- Victimisation or harassment of a patient or colleague
- Criminal acts
- Unethical practices, not necessarily of a criminal nature
- Serious maladministration
- Dangerous acts (or omissions) which create a hazard to health, safety or the environment
- Fraud* or corruption
- Non-compliance with a legal obligation
- Miscarriage of justice

* If the concern is regarding fraud, the Counter Fraud Policy should be used, see section 3.9 for details of this and other policies. The protection offered by the Raising Concerns Policy extends to the Counter Fraud Policy.

6.3 Some patients/clients may be unable or unwilling to represent their own interests: employees, therefore, have a special responsibility to report any instances where they consider a patient/client has not been treated appropriately.

6.4 Manager reminders and information to be provided to investigating officers is set out at Appendix A.

7 Procedure

It is imperative that users of this policy understand the following: the commencement of an investigation does not presume guilt.

7.1 Stage 1 – Informal

7.1.1 All matters of concern should initially be addressed at an informal level with the employee's line manager, if at all possible. This may be done verbally or in writing.

7.1.2 All concerns will be given full and sympathetic consideration. Employees will be treated with respect and understanding and it will be recognised that raising a concern within the auspices of this policy can be a difficult experience. If an employee does not feel confident in raising the issue with their line manager in the first instance, Stage 2 of the process may be invoked.

7.1.3 On considering the concern raised, the manager may advise that this is not the appropriate policy and procedure to use and refer the employee to other relevant policies, eg Grievance, Harassment and Bullying or Fraud Response.

7.1.4 Where the manager feels it is appropriate that the concern is dealt with under this policy and procedure they will immediately inform the Designated Officer, or the nominated Deputy in the Designated Officer's absence, and will keep him/her aware of actions being taken.

7.1.5 The manager will convene a meeting to discuss the issue with the employee raising the concern, who may wish to be accompanied by a representative from their Trade Union or Professional Organisation, or a colleague or friend not acting in a professional capacity. The manager may also wish to seek advice from other health care professionals.

14.2.2 The person raising the concern will, within 10 working days of the meeting, be given a full explanation of what action is to be taken and the reasons (where applicable) why action may not be considered appropriate, eg more appropriately dealt with under another policy.

7.1.7 For clear guidance on who should be contacted at each stage of the procedure see Appendix B.

7.2 Stage 2 – Senior Manager/Director

7.2.1 This stage is to be used:

- where the matter remains unresolved after Stage 1
- where the matter relates to the immediate line manager or the employee does not feel confident in raising the issue with their line manager

7.2.2 The employee should refer their concern in writing to the next level Manager or Director (if not already done at Stage 1) If this is not possible the employee should move to Stage 3.

7.2.3 On considering the concern raised, the Senior Manager/Director may advise that this is not the appropriate policy and procedure to use and refer the employee to other relevant policies, eg Grievance, Harassment and Bullying or Fraud Response.

7.2.4 Where the manager feels it is appropriate that the concern is dealt with under this policy and procedure they will immediately inform the Designated Officer, or the nominated Deputy in the Designated Officer's absence, and will keep him/her aware of actions being taken.

7.2.5 The Senior Manager/Director will convene a meeting to discuss the issue with the employee raising the concern who may wish to be accompanied by a representative from their Trade Union or Professional Organisation, or a colleague or friend not acting in a professional capacity. The Senior Manager/Director may also wish to seek advice from other health care professionals.

7.2.6 Thorough and fair consideration will be given to the concerns and the employee will be treated with respect and understanding.

7.2.7 The person raising the concern will, within 10 working days of the meeting, be given a full explanation, in writing, of what action is to be taken and the reasons (where applicable) why action may not be considered appropriate, eg more appropriately dealt with under another policy.

7.2.8 For clear guidance on who should be contacted at each stage of the procedure see Appendix B.

7.3 Stage 3 – Accountable Officer/Chairman

7.3.1 If, after Stage 2, the matter remains unresolved or the concern is regarding the person mentioned at Stage 2, the employee should raise their concerns in writing to the Accountable Officer/Chairman, who will nominate an appropriate person to investigate the matter.

7.3.2 On considering the concerns raised, the nominated person may advise that this is not the appropriate policy and procedure to use and refer the employee to other relevant policies, eg Grievance, Harassment and Bullying or Fraud Response.

7.3.3 Where the nominated person feels it is appropriate that the concern is dealt with under this policy and procedure they will immediately inform the Designated Officer, or the

nominated Deputy in the Designated Officer's absence, of the concerns raised and will keep him/her aware of actions being taken.

7.3.4 The nominated person will convene a meeting to discuss the issue with the employee raising the concern, who may wish to be accompanied by their Trade Union or Professional Organisation representative, or a colleague or friend not acting in a professional capacity, and then submit a report to the Accountable Officer.

7.3.5 The person raising the concern will be sent an acknowledgment within 2 working days. The matter will be dealt with as swiftly as individual circumstances permit and within 20 working days the employee will be given a full explanation in writing of what action is to be taken and the reasons, if applicable, why action is not considered appropriate.

7.3.6 Thorough and fair consideration will be given to the concerns and the employee will be treated with respect and understanding.

7.3.7 For clear guidance on who should be contacted at each stage of the procedure see Appendix B.

7.4 Stage 4 – NHS East of England Strategic Health Authority (to become NHS Commissioning Board Local Area Team)/Secretary of State for Health

7.4.1 If after Stage 3, the matter remains unresolved or the concern is regarding the Chairman or Accountable Officer, the employee may raise their concerns in writing with the NHS East of England or the Secretary of State for Health.

7.4.2. For clear guidance on who should be contacted at each stage of the procedure, see Appendix B.

8 Confidentiality

8.1 The CCG will not tolerate the harassment or victimisation of anyone raising a genuine concern and operates policies relating to Confidentiality and Bullying and Harassment (see section 3.9 for a full list of related policies.) However, it recognises that employees may nonetheless want to raise a concern in confidence under this policy and procedure. If an employee asks that their identity be protected, the CCG will not disclose it without the employee's consent.

8.2 If the situation arises where the concern cannot be resolved without revealing the employee's identity (for instance because information is needed at an internal CCG enquiry, or to assist external enquiries) the CCG will discuss whether and how it can proceed. It should be remembered that if identity is withheld, it will be much more difficult for the CCG to look into the matter and give feedback, or to protect the employee's position.

8.3 All NHS employees must fulfil their duty of confidentiality to patients/clients and to the CCG as their employer. Unauthorised disclosure of personal information about any patient/client/clinician/member or colleague will be regarded as a most serious matter, which will result in disciplinary action.

8.4 In all cases where employees are considering disclosing confidential information (even on the basis that in their opinion such a step would be in the public interest) they should first seek specialist advice. A list of representative and regulatory organisations from which advice may be sought is given at Appendix D.

9 Disclosure to Outside Agencies

9.1 Disclosure to agencies outside the CCG should only be made when internal procedures have been exhausted or where the significance and sensitivity of the issue requires external advice be sought to effectively raise the issue whilst safeguard the individual's whistleblowing rights. Provided that the procedures have been followed, employees making allegations should feel able to do so without fear of disciplinary or other action against them.

9.2 An employee, having exhausted all the above stages without satisfaction and having sought advice from their appropriate union representative or professional organisation are encouraged to consult an appropriate regulator. Alternatively the employee may wish to consult the Parliamentary and Health Service Ombudsman or his or her Member of Parliament in confidence. Advice on progressing issues externally is available from a union representative or the charity 'Public Concern at Work'. A list of contacts is provided in Appendix D to this policy.

9.3 An issue may be raised directly with the Secretary of State for Health although the CCG encourages employees to use internal procedures if at all possible.

9.4 An approach to the media should only be considered after all the stages of this procedure have been exhausted. It should be considered only as a last resort. Such action, if entered into unjustifiably may unreasonably undermine public confidence and may result in disciplinary action.

9.5 Where an employee raises a concern in good faith to a prescribed body, for example the Health and Safety Executive, Environment Agency, Inland Revenue, Serious Fraud Office, Data Protection Registrar, Financial Services Agency, Information Commissioner and reasonably believes the information and any allegation in it are substantially true, they will remain protected under this policy.

10 Representative and Professional Organisations

10.1 When entering into this procedure all employees are encouraged to seek guidance from their Trade Union, Professional Organisation or appropriate statutory body, particularly if the issue remains unresolved at Stage 3.

10.2 If you are unsure whether to use this policy, or you want independent advice at any state, you may contact the charity Public Concern at Work on 020 7404 6609. Their lawyers will give free confidential advice at any stage about how to raise a concern about serious malpractice at work. Alternatively the national NHS whistleblowing run by the Mencap Society can be contacted on 08000 724 725.

11 Awareness Raising

In order for this procedure to be effective, the CCG believes it is important that all employees are aware of the processes, and that managers are trained in their use. Action to ensure this will be as follows:

- copies of the full procedure will be available on the CCG website
- key features and signposting will be included in staff communications and attached to payslips on an annual basis
- copies will be available from the Governance Manager
- managers will keep a copy in an accessible file with other CCG human resource policies and procedures, and be aware of the provisions
- key features will be included in the employee guide that is given to all employees with their contracts of employment
- managers must explain the provisions to new employees as part of the local induction process
- additional support will be given to people whose first language is not English, or who have a visual impairment or some other disability
- all contract specifications for the provision of health services will require that the provider has a Whistle-Blowing policy in place

12 Queries

Enquiries about the operation of this policy should be addressed to the Governance Manager or Director of Operations.

13 Review

This policy will be reviewed every two years. Any new statutory provisions affecting the procedure will come into automatic effect.

14 Resources Used in Developing this Policy

Public Interest Disclosure Act 1998 –

<http://www.legislation.gov.uk/ukpga/1998/23/contents>

Health Service Circular 1999/98 -

http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4_012138.pdf

Guidance on Setup/Implementation and Audit of Whistleblowing Policies written by the PCaW and issued by the Social Partnership Forum titled - 'Speak up for a healthy NHS', - http://www.nhsemployers.org/SiteCollectionDocuments/Speak_Up_for_a_Healthy_NHSrd181011.pdf

Guidance on GP Performance Management produced by NHS Employers –

http://www.nhsemployers.org/Aboutus/Publications/Documents/Staying_on_course.pdf

Appendix A

Manager Reminders and Information to be provided to investigating officers

Manager Reminders when responding to a concern:

Thank the staff member for telling you, even if they may appear to be mistaken.

- Respect and heed legitimate staff concerns about their own position or career.
- Manage expectations and respect promises of confidentiality.
- Discuss reasonable timeframes for feedback with the member of staff in line with this policy.
- Remember there are different perspectives to every story.
- Determine whether there are grounds for concern and investigate if necessary as soon as possible. If the concern is potentially very serious or wide-reaching, consider who should handle the investigation in line with this policy and know when to ask for help. If asked, put your response in writing.
- Always remember that you may have to explain how you have handled the concern.
- Feedback any outcome and/or remedial action you propose to take to the whistle-blower but be careful if this could infringe any rights or duties you may owe to other parties.
- Consider reporting to your board and/or an appropriate regulator the outcome of any genuine concern where malpractice or a serious safety risk was identified and addressed.
- Record-keeping – it makes sense to keep a record of any serious concern raised with those designated under the policy, anonymising these where necessary.

Information to be provided to investigating officers:

Whilst it is important that whistleblowers do not delay reporting their concern until they have the necessary proof to support their allegation, it would nonetheless be helpful to have as much of the following information as possible at the outset of the investigation (the information below being communicated in line with information governance and security policies – see Section 3.9 of this policy for details of these policies):

- Name(s) of personnel suspected of inappropriate conduct; their job title(s) and work-base;
- The nature of the wrong-doing suspected along with the date(s) of incident(s). Copies of any file notes that may have been kept should be disclosed;
- Copies of any evidence that support the suspicion of wrong-doing;
- The degree to which individual(s) are thought to have suffered as a result of inappropriate conduct;
NB: The names of patients or any other identifying details should not be disclosed at this juncture without their consent – paragraph 8.3 refers
- The degree to which any (other) member(s) of staff are perceived to have witnessed events;
NB: The names of colleagues or any other identifying details should not be disclosed at this juncture without their consent – paragraph 8.3 refers
- The degree to which the person filing the report has challenged the individual(s) suspected of inappropriate conduct or raised the matter with their line or other senior manager;
- The outcome of any such dialogue and accompanying papers, as available.

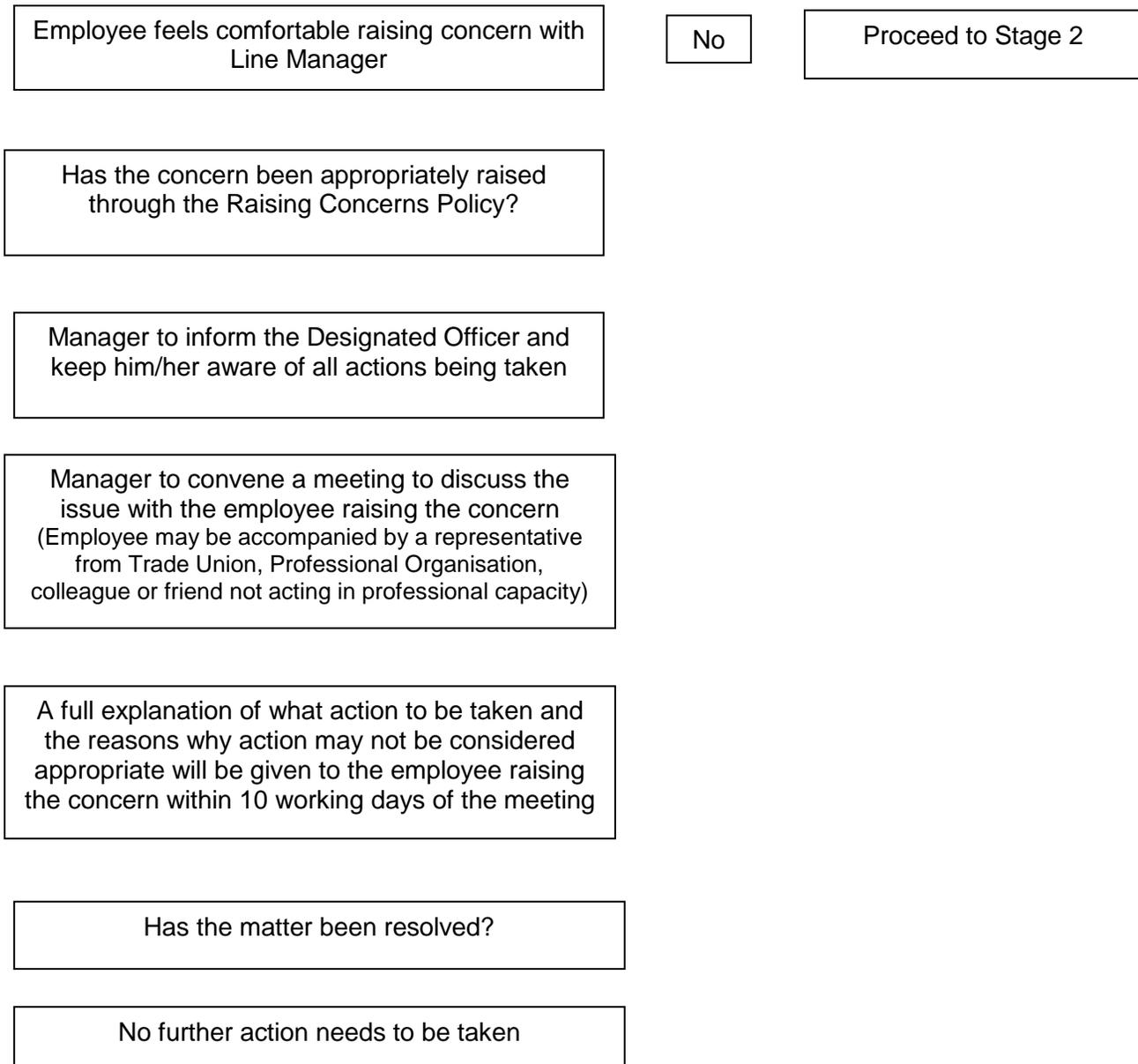
Appendix B

Contact Guidance

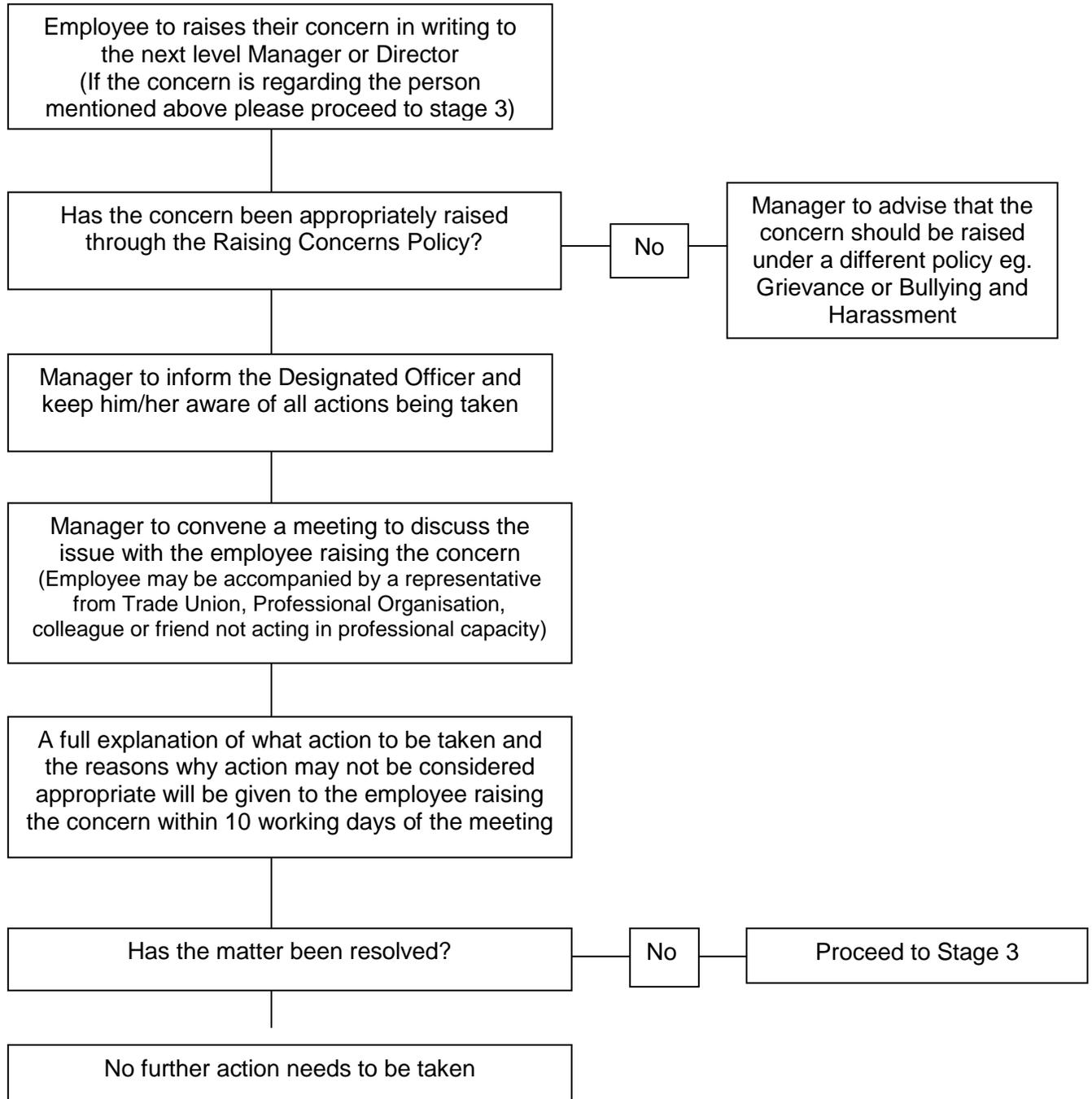
	Raise your concern with:	Take advice from:
Stage 1 <ul style="list-style-type: none"> • Initial concern raised 	Immediate Line Manager and/or Designated Officer, or the nominated Deputy in the Designated Officer's absence	Union/Professional Organisation and/or HR representative and/or Friend or Colleague
Stage 2 <ul style="list-style-type: none"> • Concern raised about immediate line manager • Matter not resolved at Stage 1 	Senior Manager/Director and/or Designated Officer, or the nominated Deputy in the Designated Officer's absence	Union/Professional Organisation and/or HR representative and/or Friend or Colleague
Stage 3 <ul style="list-style-type: none"> • Concern raised about Senior Manager / Director • Matter not resolved at Stage 2 	Chief Executive/Chairman and/or Designated Officer, or the nominated Deputy in the Designated Officer's absence	Union/Professional Organisation and/or HR representative and/or Friend or Colleague
Stage 4 <ul style="list-style-type: none"> • Concern raised about the Chief Executive or Chairman • Concern raised about the Trust 	Designated Officer, or the nominated Deputy in the Designated Officer's absence and/or NHS East of England and/or Secretary of State for Health and/or Member of Parliament	Union/Professional Organisation and/or HR representative and/or Friend or Colleague

The Procedure as a Flow-Chart

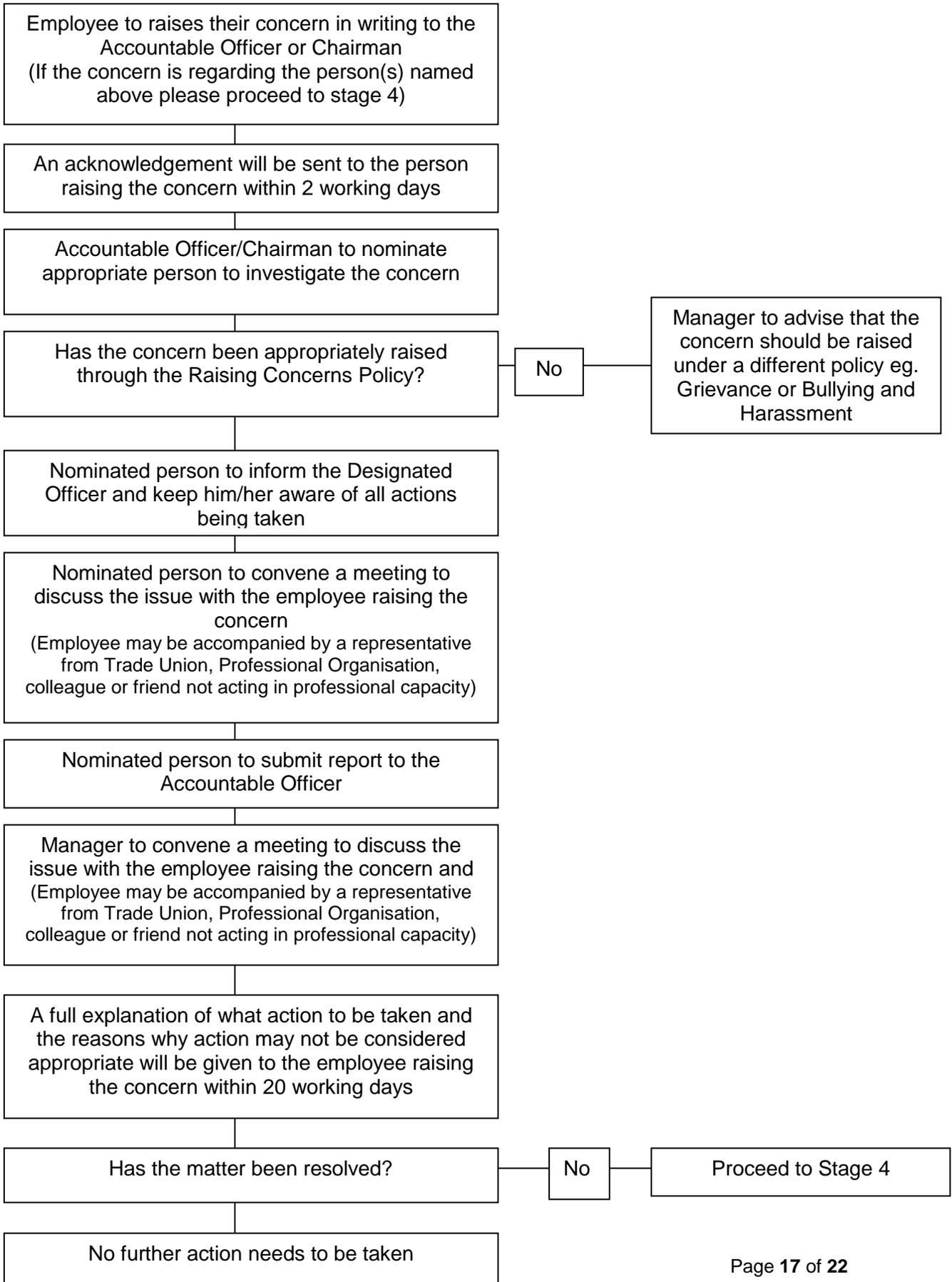
Stage 1 - Informal



Stage 2 – Senior Manager/Director



Stage 3 – Accountable Officer/Chairman



Stage 4 – NHS East of England Strategic Health Authority (to be NHS Commissioning Board Local Area Team) /Secretary of State for Health

Employee to raise their concern in writing to the NHS East of England or Secretary of State for Health

Contact details for the NHS East of England and the Secretary of State for Health can be found in appendix C

Contact Details

Relevant Group	Representative Organisations
All Employees	<p>In the first instance - See flowchart on internal process at Appendix C.</p> <p>Alternatively:</p> <ul style="list-style-type: none"> contact the Designated Whistleblowing Officer (Non Executive Member) Lousie Jordan-Hall or leave a message with reception on 01502/719500 for Louise or the Director of Operations or Governance Manager to contact you <p>Other supporting information: National Helpline 08000 724 725 Provided by Mencap Society Operates weekdays between 08.00-18.00, with an out of hours answering service available at weekends and public holidays.</p>
All Self Employed Contractors/Volunteers	Designated Officer – Raising Concerns/Whistleblowing telephone – 01502/719500
Fraud	NHS Counter Fraud Line 08000 0284060
Administrative/ Managerial staff	
Mip members	Regional Office 0845 601 1144 Leake Street, London SE1 7NN www.miphealth.org.uk
Unison members	Regional Office 0845 355 0845 UNISON Direct 0845 355 0845 1 Mabledon Place London WC1H 9AJ www.unison.org.uk
Unite members	Regional Office 01449 723387 Unit 6, Maitland Road Lion Barn Business Park Needham Market Ipswich, Suffolk IP6 8NW Fax 01449 723571 National Offices 020 7420 8900 35 King Street Covent Garden, London WC2E 8JG Fax: 020 7420 8998

	128 Theobald's Road Holborn, London WC1X 8TN Fax: 020 7611 2555: http://www.unitetheunion.org	020 7611 2500
Other		
Dentists	General Dentist Council Wimpole Street London W1M 8DQ www.gdc-uk.org	020 7887 3800
Dietetics	British Dietetics Association 7 th Floor Elizabeth House 22 Suffolk Street Queensway Birmingham B1 1LS www.bda.uk.com	0121 643 5483
General Medical Practitioners	General Medical Council 44 Hallam Street London W1N 6AE www.gmc-uk.org	020 7580 7642
Nurses	UKCC 23 Portland Place London W1N 3AF www.ukcc.org	020 7637 7181
	Royal College of Nursing Eastern Region Office Abbots Gate House Hollow Road Bury St Edmunds IP32 7AU www.rcn.org.uk	0845 772 6100
Occupational Therapists	College of Occupational Therapists 106-114 Borough High Street London SE1 1LB www.cot.org.uk	020 7357 6480
Physiotherapists	Chartered Society of Physiotherapy	020 7306 6611

	14 Bedford Row London WC1R 4ED www.csp.org.uk	
Podiatrists	Society of Chiropodists and Podiatrists 1 Fellmongers Path Tower Bridge Road London SE1 3LY www.feetforlife.org	020 7234 8620
Speech and Language Therapists	The Royal College of Speech and Language Therapists 2 White Hart Yard London SE1 1NX www.rcslt.org	020 7378 1200
Pharmacists	Royal Pharmaceutical Society 1 Lambeth High Street London www.rpsgh.org.uk	020 7735 9141
Finance	CIPFA (Chartered Institute of Public Finance and Accounting) 3 Robert Street London WC2 www.cipfa.org.uk	020 7543 5600
Information Governance	Information Commissioner's Office www.ico.gov.uk	0303 123 1113
Data Protection	Data Register Registrar See ICO contact link above	
Human Resources	Chartered Institute of Personnel and Development CIPD House Camp Road London SW19 4UX www.cipd.co.uk	020 8971 9000
Other Useful Contacts		
All Employees	NHS East of England – NHS Commissioning Board Local Area Team Capital Park Fulbourn Cambridge CB1 5XB www.eoe.nhs.uk	01223 597500

All Employees	Department of Health Customer Service Centre Department of Health Richmond House 79 Whitehall London SW1A 2NS Email: dhmail@dh.gsi.gov.uk	02072104850
All Employees	Parliamentary and Health Service Ombudsman Millbank Tower Millbank London SW1P 4QP www.ombudsman.org.uk	0345 015 4033
All Employees	The Care Quality Commission CQC National Customer Service Centre Citygate Gallowgate Newcastle upon Tyne NE1 4PA Fax: 03000 616171	03000 616161
All Employees	Mental Health Act Commission Maid Marian House 56 Hounds Gate Nottingham NG1 6BG www.mhac.org.uk	0115 943 7100
All Employees	Mental Health Act Administrator Local contact: Governance Manager	01502 719500
All Employees	Public Concern at Work Email: helpline@pcaw.co.uk www.pcaw.co.uk	020 7404 6609
All Employees	Secretary of State for Health The Department of Health Richmond House 79 Whitehall London SW1A 2NS	020 7210 4850