



**INDEPENDENT  
NATIONAL  
WHISTLEBLOWING  
OFFICER**

**People Centred | Improvement Focused**

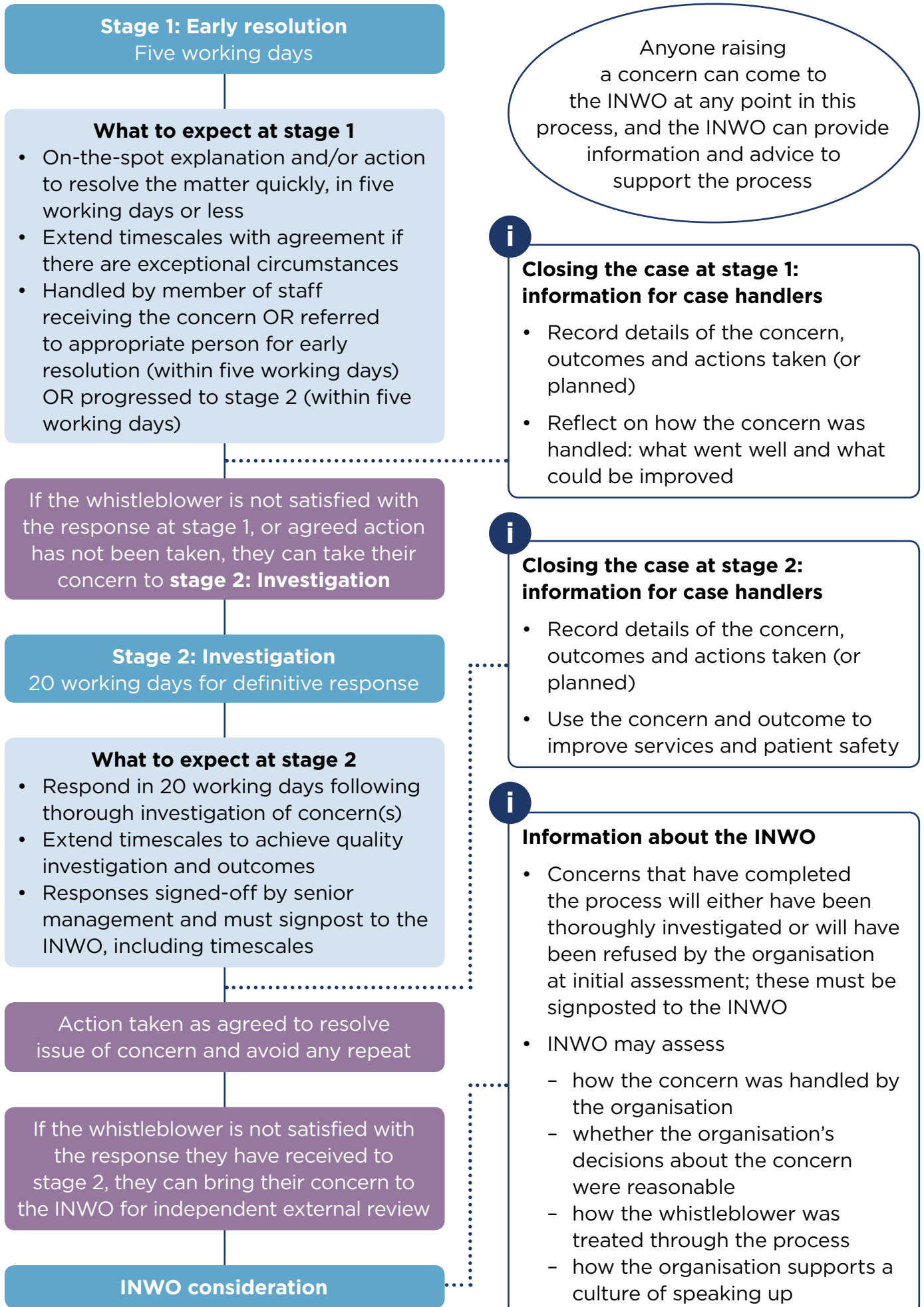
The National Whistleblowing Standards

## **Part 3**

# **The two-stage procedure**

**APRIL 2021**

# Overview of the procedure



## Stage 1: Early resolution

1. Stage 1 is for simple and straightforward concerns that can be responded to within five working days or less. These concerns will involve little or no investigation, and can be handled by providing an explanation or taking limited action. The line manager should be involved in resolving the situation, where appropriate. Issues that are more complex, and will clearly take more than five working days to address, should move straight to stage 2.
2. Organisations must make sure staff have access to an impartial, confidential contact who they can contact by email or phone, or talk to in person. People can raise their concerns with their line manager, the confidential contact or another representative such as a senior manager.
3. Ideally, the person raising the concern will have a face-to-face discussion about the situation. However, if the concern is straightforward and has been raised with someone who is able to take appropriate action, this may be enough to resolve the issue. The person raising the concern must be updated with what has been done.
4. Anyone raising a concern can contact the INWO at any point in the process. The INWO can provide information and advice to support them, and can also give investigators and managers advice on how to handle concerns.

## Initial discussions

5. **Anyone** who provides services for the NHS can raise a concern. This includes current (and former) employees, bank and agency workers, contractors (including third-sector service providers), trainees and students, volunteers, non-executive directors, and anyone working alongside NHS staff, such as those in health and social care partnerships.
6. The person raising the concern must want it to be handled using this procedure. The organisation must offer to support them with raising their concern. The person can be accompanied by a union representative, friend or colleague. See Part 2 of these Standards for more details of the support that is available.
7. If the person does not want to use this procedure, they can raise their concern without giving their name. (See the section on anonymous and unnamed concerns in Part 2 of these Standards for more information about this.) The organisation can choose how to investigate the concern, but good practice would be to follow the whistleblowing principles and investigate the concern in line with these Standards, particularly if existing 'business as usual' procedures have not been able to address the issue successfully.

## Time limit for raising concerns

8. The timescale for accepting a whistleblowing concern is within six months from when the person raising the concern became aware of the issue. The organisation can extend this time limit if there is good reason to do so, for example if the issue is still ongoing or if business as usual procedures have led to a delay. The most important thing to consider is whether there is any chance that the situation could create an ongoing risk of harm or wrongdoing.
9. If a case is not being handled under this procedure due to the timescales involved, this should be clearly explained to the person raising the concern. The organisation must also tell the person that they can ask the INWO to consider the decision.

## Timescales – five working days

10. The organisation has five working days to respond to any concerns that are raised. The manager or the person who received the concern will normally provide the response. If there are clear and justifiable reasons why they cannot meet this timescale, someone more senior in the organisation may agree to allow them a further five working days to respond. Reasons for allowing more time for stage 1 include staff absence or difficulty arranging a meeting. The organisation must tell the person why it is not able to respond within five days, and when they can expect a response.

11. If it is clear from the start that a concern is too complex for the organisation to respond to within five working days, it should move straight to stage 2. If the organisation needs more time to provide a response at stage 1, it must not use this as a reason to delay moving the concern to stage 2.

## Stage 1 discussion

12. Once the organisation has agreed that the concern should be handled under this procedure, the next stage is to discuss and agree:
  - 12.1. what outcomes the person who raised the concern is hoping to achieve, and whether these are possible;
  - 12.2. what action the organisation needs to take to put things right, and appropriate timescales for this;
  - 12.3. whether all the issues are appropriate for this procedure or whether it would be appropriate to handle some of them under other procedures, and if so, which procedures to direct the person to (see Part 2 of these Standards);
  - 12.4. whether any immediate action is needed to put things right or reduce risk to patient safety or the organisation; and
  - 12.5. whether the person who raised the concern needs support (see Part 2) and, if so, how they will get this.

13. If the discussion at stage 1 raises issues which a manager considers would be more appropriate to handle under other HR procedures (such as grievance procedures), they should carefully consider whether any parts of the concern should be handled under this whistleblowing procedure.
14. If someone raises a concern, but a manager decides it is a grievance not a whistleblowing concern, they should tell the person this in writing. They **must** tell the person they can ask the INWO to review this decision if they are not satisfied with it.
15. When a manager or other person receives a concern, they must make sure that the person who raised it receives the support and information they need to consider all appropriate options for handling the concern, including HR procedures. They must tell the person what support is available, and when and how they can get it.
16. Discussions about the concern must cover:
  - 16.1. what exactly the person is concerned about;
  - 16.2. who else is involved;
  - 16.3. what support the person raising the concern or other staff need (or are likely to need);
  - 16.4. the best way to maintain the person's confidentiality;
  - 16.5. the best person to respond to the concern; and
  - 16.6. whether the concern can be responded to in five working days or fewer, or whether it should be handled at stage 2.
17. There is more guidance on considering concerns in Annex A.

## Recording the concern

18. The organisation must record details of all concerns raised by staff and other workers. The manager (or other person) should record a concern when they receive it, and should consider any requests the person raising it makes to keep their details confidential (so they are only shared with people who need to know them in order to investigate and address the concern) or for the concern to be raised anonymously (so nobody in the organisation knows the identity of the person who raised it) (see Part 2). Full details on how to record concerns are provided in Part 5 of these Standards.

## Closing the concern

19. The organisation must provide a written response to a concern that has been handled at stage 1, unless it has agreed with the person who raised the concern that this is not needed (in which case this decision should be recorded). The response (however it is provided) must:
  - 19.1. respond to all the issues raised;
  - 19.2. give the organisation's reasons for any decisions;
  - 19.3. explain what action the organisation is taking in response to the concern; and
  - 19.4. explain how the person can take their concern to stage 2 if they do not feel it has been handled properly.

20. If the organisation does not provide its response in writing, it must still keep a record of its decision and tell the person who raised the concern. It must then close the case and update the records system as appropriate. The date the case is closed is the date when the person receives the response to their concern.

## Learning, improvements and recommendations

21. Concerns raised at stages 1 and 2 of this procedure will often identify changes that are needed to provide services more safely and efficiently, or improve governance arrangements (how the organisation is managed and held accountable for its actions). Any improvements must be appropriately planned, making sure that everyone concerned is kept informed of changes. There is more information on learning from concerns in Part 5 of these Standards. The organisation must include details of any changes that are identified as a result of a concern in the reports it produces on concerns (every three months and every year).
22. The organisation must also consider whether:
  - 22.1. wider learning is needed across other departments following the investigation; and
  - 22.2. the improvements would be beneficial to other NHS organisations across Scotland. If so, it should share them with national organisations or clinical groups to take forward as appropriate.

## When to move a concern to stage 2

23. Some concerns will not be appropriate for stage 1, and should move straight to stage 2. This includes concerns which:
  - 23.1. contain issues that are complex and need detailed investigation;
  - 23.2. relate to serious, high-risk or high-profile issues; or
  - 23.3. the person does not want to be considered at stage 1 because they believe a full investigation is needed.
24. Concerns that relate to serious, high-risk or high-profile issues may need someone more senior in the organisation to investigate them.
25. Or, after a concern has been considered at stage 1, the person who raised it can ask for it to be investigated at stage 2 if they do not feel that stage 1 has addressed the issue appropriately, and they still have concerns. They can do this immediately after receiving the decision at stage 1 or some time later.
26. The organisation should record that the concern has moved from stage 1 to stage 2, and the records system must be clear that this is the same concern, not a new one.

## Stage 2: Investigation

27. Concerns handled at stage 2 of the whistleblowing procedure tend to be serious or complex, and need a detailed examination before the organisation can provide a response. Concerns can move straight to stage 2 if they include issues which are too complex to handle at stage 1, which means a full investigation is needed from the start.
28. An investigation aims to establish all the facts relating to the points raised in the whistleblowing concern. It should be thorough, in proportion to the seriousness of the concern and impartial, so that the organisation can identify any problems and consider what improvements can be made. This may include action to put things right in the short term, or an action plan for future changes. It is also very important to give the person raising the concern a full response that is based on evidence and sets out the organisation's final position.
29. If a concern which is appropriate for stage 2 is raised with someone who was involved in the situation, or was involved in a decision at stage 1, the organisation should do all it can to make sure the person can discuss the situation and their concern with an appropriate person who has not been involved in the situation. This may be a confidential contact or an impartial manager.

## Timescales – 20 working days

30. The following timescales apply to stage 2.
  - 30.1. The organisation should acknowledge the concern in writing within three working days.
  - 30.2. It should provide a full response to all concerns as soon as possible, and within 20 working days, unless it needs to extend this time limit.
  - 30.3. If the organisation needs to extend the time limit, it must tell the person raising the concern when they can expect a full response within the first 20 working days (and then at least every 20 working days after that).
  - 30.4. The organisation should provide updates every 20 working days to everyone directly affected by the investigation. The updates should provide information about what progress has been made and what will happen before the organisation provides the next update or a full response.
  - 30.5. If it will take longer than expected to provide a full response to a concern, the organisation should offer support to those involved during this period.

## Acknowledgement

31. The acknowledgement should include:
  - 31.1. contact details for the person overseeing the investigation;
  - 31.2. an explanation of the timescales at stage 2, when these timescales might need to be extended and what this would mean; and
  - 31.3. details of the support that is available for the person, including information about other agencies and their professional body if appropriate.
32. It may also be appropriate to provide other information in the acknowledgement, including:
  - 32.1. appropriate contact details in case there are any urgent safety issues during the investigation;
  - 32.2. a summary of the concern and the outcomes the person who raised it are hoping to achieve;
  - 32.3. an outline of the proposed investigation and who will be involved;
  - 32.4. an offer for the person who raised the concern to discuss the issues either with the investigating officer or a senior member of staff; and
  - 32.5. a consent form that gives a clear mandate, if a representative has raised the concern on the person's behalf.

## Extending the timescale

33. The organisation should do all it can to meet the timescale above, as not doing so may delay changes that are needed to improve unsafe working practices, and could put patient safety or the organisation at risk, or have a harmful effect on the person raising the concern or the people involved in the investigation.
34. The organisation should aim to provide a full response within 20 working days, but this is not a target or performance measure. It **should carry out a thorough investigation that leads to good outcomes, even if that takes longer than 20 days**. The timescale is there to make sure that organisations take prompt action, and that there is an **ongoing focus on investigating and addressing the concern**, while keeping everyone involved updated on the progress of the investigation.
35. If the organisation cannot provide a final decision within 20 working days, it should still be able to show it has made **significant progress**. The investigation must not be delayed if this could be avoided.
36. There is no flexibility to pause or delay the whistleblowing procedure. The timescale can only be extended if there are clear and justifiable reasons for this. If there are, the investigator should ask a senior manager for authorisation to do so. The organisation must explain the revised timescales to the person who raised the concern and others involved in the investigation, as appropriate.



37. Reasons for extending the timescale might include:
- 37.1. the organisation needs essential accounts or statements from staff who are unavailable due to long-term sickness or leave;
  - 37.2. staff have asked a representative from their professional body to be with them at a meeting, and this has caused unavoidable delays;
  - 37.3. the organisation cannot get information that is essential to the investigation within normal timescales; or
  - 37.4. the investigation is disrupted by circumstances that the organisation could not have expected or avoided, for example industrial action or severe weather conditions.
38. If a complex concern, involving several issues, is likely to take longer than 20 working days to address fully, the organisation should consider whether it could respond to some of the issues in an interim report.

## First considerations

39. When a concern is raised at stage 2 the organisation should consider the following issues:
- 39.1. whether any immediate action is needed to put things right or reduce risk to patient safety or the organisation;
  - 39.2. who should investigate the concern. If possible, this should be a senior member of staff from another department or service. (Part 4 of these Standards on board and staff responsibilities reviews how to handle concerns about an organisation's senior leaders or board members.);
  - 39.3. what the investigation should cover, using the list in paragraphs 12 and 16 and Annex A to look into the concerns in more detail;
  - 39.4. how involved the person who raised the concern wants to be in the investigation, and whether this is appropriate;
  - 39.5. whether it is appropriate to direct the person who made the concern to any other procedures (for example, HR procedures);
  - 39.6. what risks are involved, how they could be reduced, what support the organisation can provide to the person who raised the concern and how to make sure they have access to this;
  - 39.7. what to expect in terms of timescales and updates.



40. Whenever possible, the organisation should discuss the above issues with the person raising the concern.
41. Managers should make sure they are aware of how the person would prefer to be contacted, and use this communication method whenever possible and appropriate. They must also take account of any data protection concerns when communicating, especially by email. If they are using an employee's work email address, the person raising the concern must have consented to this, as they may not always have access to it, or may have concerns about who else has access to it.
42. It is also important to take account of any accessibility issues the person has told the organisation about.
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45. If a concern has already been through stage 1 of this procedure, the investigator should make sure they have all the case notes and associated information that was considered at stage 1. They must also work out, as early as possible, what extra information they will need and how they will get this.
46. It is good practice for the organisation to keep a record of meetings throughout the investigation (either notes or recordings), including any discussions with the person who raised the concern, and to share this record with those involved within an agreed timescale.
47. The investigation should be kept independent of any other procedures, including HR procedures. However, where possible, any linked procedures should be carried out in parallel with the whistleblowing procedure.
48. Similarly, if NHS Counter Fraud Services are carrying out an investigation into allegations of fraud, the organisation may still be able to investigate other issues. The board's Fraud Liaison Officer will be able to confirm if there is an ongoing fraud investigation and whether it would be appropriate to carry out any concurrent investigations.
49. Investigators and decision-makers must take account of the whistleblowing principles (see Part 1 of the Standards), and must:

## The investigation

43. The investigation must focus on the practices or procedures that are unsafe or inappropriate. It must focus on patient safety, safe working practices and good governance; it must be fair, robust and proportionate to the risks identified. It must aim to handle and provide a full response to all the issues involved in the whistleblowing concern that has been raised.
44. The organisation must tell the person raising the concern how the investigation will be carried out and what their role in it will be.
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49. Investigators and decision-makers must take account of the whistleblowing principles (see Part 1 of the Standards), and must:

- 49.1. be trained in what their role involves and how to carry it out;
- 49.2. give everyone involved the right to be heard;
- 49.3. not have a personal interest in the situation or the outcome;
- 49.4. act only on the evidence;
- 49.5. make decisions in good faith and without bias;
- 49.6. consider any person whose interests will be affected by the decision; and
- 49.7. have time set aside to carry out the investigation.

## Other staff involved

- 50. Raising concerns can be stressful for anyone involved in the case, including the person who is being investigated, the investigator and witnesses. Everyone involved must be treated professionally and with respect.
- 51. If someone is accused of poor practice through this procedure, the organisation should tell them:
  - 51.1. that an investigation is taking place;
  - 51.2. of what they have been accused;
  - 51.3. what the investigation process is;
  - 51.4. what their rights and responsibilities are; and
  - 51.5. what support is available to them.
- 52. They do not need to know how the organisation found out about the concern, and the organisation must take care to protect the identity of the person who raised the concern.

## Responding to the concern

- 53. At the end of the investigation, the organisation must give the person who raised the concern a full and considered response, setting out its findings and conclusions, and how it reached these. It must also provide evidence that it has taken the concern seriously and investigated it thoroughly. It must include the conclusions of the investigation and information about any action it has taken or plans to take as a result of the concern, both to deal with the current situation and to avoid it from happening again in the future.
- 54. It is best practice for a single, senior member of staff (or someone authorised to act on their behalf) to be responsible for reviewing each decision made under this procedure before the organisation issues its response. This person must make sure that all necessary investigations have been finished and action is planned to prevent future risks.
- 55. The organisation's response must be in writing and should also be provided in the way the person who raised the concern has told the organisation they prefer to be contacted. The organisation must keep a record of the decision and how it gave this to the person who raised the concern.
- 56. It must be clear from the response that this is the organisation's final decision, and that if the person is still not satisfied with it, or the way their concern has been investigated, they can take their concern to the INWO.

57. The organisation must also keep other people who were directly involved in the investigation updated on the final outcome, and must tell them about any recommendations or action they have taken as a result of the whistleblowing concern. Any updates must be in line with data protection law.
  58. The quality of the investigation and the final (and any interim) report is very important. The report should:
59. If anyone involved in the investigation has had ongoing support from their union or another third party, the organisation should also tell the person or organisation providing the support that it has issued a decision, to make sure they can provide appropriate support when the person needs it. (What further details the organisation can give will depend on the situation.)

- 58.1. be clear and easy to understand, and written in a way that is non-confrontational and focuses on the people involved;
- 58.2. use language appropriate to the person who raised the concern and their understanding of the issues;
- 58.3. address all the issues raised and show that each element has been fully and fairly investigated;
- 58.4. include an apology where things have gone wrong;
- 58.5. highlight any areas where the organisation does not agree with the person's concern and explain why no further action can be taken;
- 58.6. give the name of a member of staff the person can speak to if they don't understand something in the letter; and
- 58.7. explain how the person can refer their concerns to the INWO if they are not satisfied with the outcome of the organisation's investigation.

## Recording the concern

60. Details of all concerns investigated at stage 2 must be recorded. As with stage 1 concerns, the person who receives the concern should record it when they receive it, and consider any requests the person makes to keep their details confidential. (See Part 2 for information about anonymous and 'unnamed' concerns when no personal details are recorded).
61. The record at stage 2 must be a continuation of the record created at stage 1, if this applies. The organisation must update the details when the investigation ends.
62. Full details on how to record concerns are provided in Part 5 of these Standards.

## Learning, improvements and recommendations

63. The process for learning, improvements and recommendations is the same as for stage 1. See paragraphs 21 and 22.

64. At the end of stage 2, organisations may also be able to learn from reflecting on how they have handled the concern. One way to do this, and to make sure the organisation provides consistent responses to concerns, is to involve two different parts of the organisation in reviewing how concerns have been handled and the outcomes of concerns. Not all organisations will be able to do this, but, it is good practice if it is possible.

### **Meetings and correspondence with the person who raised the concern after the organisation's decision**

65. Once the person who raised the whistleblowing concern has received the organisation's decision, they can ask for more information or a meeting, but this should only be to explain the decision.
66. The organisation should make it clear before any meeting that it is for explanation only and not to reinvestigate or reopen the concerns raised. This meeting should be separate from any meeting relating to HR issues. If the person is not satisfied with the way they have been treated, the organisation should tell them they can ask the INWO to look into this. It should also direct them to any appropriate HR procedures.
67. The organisation should not consider any communication relating to how the investigation was carried out or the decisions or outcomes that were reached. Instead, it must refer the person who raised the concern to the INWO for stage 3 of this procedure.

## **Independent external review**

68. Anyone who has raised a concern through this procedure can ask the INWO to consider the way the concern was handled, the outcome of the investigation, or how the person was treated through the process. If someone has not been allowed to raise a concern using this procedure, they can also ask the INWO to investigate this refusal, or the concern.
69. An INWO investigation may include:
- 69.1. how the organisation has responded to the concern raised, applied these Standards and investigated the issues raised;
  - 69.2. whether the organisation's decisions and actions relating to the concern were reasonable in the circumstances;
  - 69.3. how the organisation treated the whistleblower and other people involved, including telling them about any relevant HR procedures;
  - 69.4. the organisation's wider approach to learning from concerns; including how it supports and encourages a culture of speaking up to improve patient safety and service delivery.

70. The INWO recommends that organisations use the wording below to tell people they can ask the INWO to consider the whistleblowing concern.

## Information about the Independent National Whistleblowing Officer (INWO)

The INWO is the final stage for whistleblowing concerns about the NHS in Scotland. If you remain dissatisfied with an NHS organisation after its process has concluded, you can ask the INWO to look into your concern.

The INWO cannot normally look at concerns:

- where you have not gone all the way through the whistleblowing procedure, or
- more than 12 months after you became aware of the matter you want to bring to the INWO.

The INWO's contact details are:

INWO  
Bridgeside House  
99 McDonald Road  
Edinburgh  
EH7 4NS

[Freepost TBC] (You don't need to use a stamp)

**Freephone:** 0800 377 7330

**Online:** [www.inwo.org.uk/contact-us](http://www.inwo.org.uk/contact-us)

**Website:** [www.inwo.org.uk](http://www.inwo.org.uk)

71. If a person raises a whistleblowing concern with the INWO, the INWO may ask the organisation to send all relevant papers and other information to their office, or to speak directly with staff. For more information about what to expect from an INWO investigation, visit [www.inwo.org.uk](http://www.inwo.org.uk).

## Time limits for raising concerns with the INWO

72. Anyone who has raised a concern and had a final response from the organisation can refer their concern to the INWO within 12 months from the date they became aware of the issue. (The INWO can decide to extend these timescales in a similar way as the organisation can, as described in paragraph 8 above.)
73. These Standards and the INWO's powers come into force in April 2021. The INWO only has powers to investigate if a concern has been raised, within the correct time limits, and under the procedure set out in these Standards.
74. Concerns which have been considered under previous whistleblowing procedures or arrangements (those that were in place before April 2021) must be handled under those procedures, and cannot be reviewed by the INWO. Issues raised under this procedure can relate to concerns that were first raised before April 2021, but the time limits above still apply.

75. If someone raises a concern directly with the INWO before the appropriate organisation has carried out a full investigation, the INWO can provide information and advice. They can also agree to investigate a concern that has not been raised with the organisation involved if they consider it is not reasonable to expect the person to use their employer's whistleblowing procedure. The INWO will approach each case on the principle that it is better for the organisation involved to investigate and identify the learning and improvements that are needed. The INWO will look at each case individually when deciding whether to accept a concern direct but could take into account, for example, whether the organisation is very small or the issue involves very senior staff. In limited circumstances the INWO may be able to help make sure concerns are handled appropriately. This may include, for example, monitoring the progress of an investigation.

## Annex A: Further guidance for people receiving concerns

### What does the person want to achieve by raising this concern, and can this be achieved?

When you receive a concern you need to be clear from the start about the outcome the person wants to achieve. The person may not be clear about this, or they may know that they want things to change but not be sure how. It may be appropriate to direct them to other HR procedures if there are connected issues.

Your discussions with the person should include whether the organisation can achieve the outcome they are hoping for. If it is not going to be possible to achieve the outcome, tell the person why. They may expect more than the organisation can provide, or you may feel that any action which would be needed to achieve the outcome is not in proportion to the risks that have been identified.

### What exactly is the person's concern?

It is important to understand exactly what concern the person is raising. It may be necessary to ask for more information to get a full picture. When you receive a concern, remember that the person who raised it may be nervous about doing so. Make sure they have enough time and privacy to explain their concern fully. It can also be stressful to speak about a concern, so if you have a meeting you may need to take breaks or have more than one meeting.



### Who are the other people involved?

Consider whether other staff are aware of the issue, or whether they should be. If so, who are the other staff, and has the person already discussed the concern with them? In particular, consider whether senior staff responsible for this area of work are aware of the issue, or whether they have been told about the concern. You should also take account of any previous investigations into this issue.

### What support do the person raising the concern and other staff involved need?

**Always** check if the person raising the concern needs support. Discuss with them what support would be helpful and how this can be provided. This may include getting support from their trade union or professional representative body. Also consider whether others involved in the situation need support and, if so, how this can be provided. (See Part 2 for a list of contact details for support agencies and professional bodies.)

### Does the person raising the concern want their involvement to remain confidential?

It is important to discuss the level of confidentiality the person wants to maintain and how their details will be used. In all cases, the person's name must not be shared with anyone who does not need to know it in order to investigate the concern, unless it has to be shared by law.

It is important to ensure that records containing the person's name have access restricted. Sometimes the investigator will need to know who raised the concern, but in other cases this isn't necessary or appropriate.

The person may not want to have their details recorded at all. You should advise them that this is an 'unnamed concern', which would limit what can be done for them in terms of support and legal protection. They wouldn't have access to the Standards and the organisation would choose the best way to handle the concern. (See Part 2 of the Standards for more information about anonymous and unnamed concerns.)

### Who is the best person to respond to the concern at stage 1?

If you cannot resolve the concern because, for example, you are not familiar with the issue or do not have the authority to make the changes that are needed, explain this to the person raising the concern, and pass details of the issue to someone who can. Keep the person who raised the concern informed about what is happening and who is responsible for investigating the matter.

**INWO**  
Bridgeside House  
99 McDonald Road  
Edinburgh  
EH7 4NS

Web [www.inwo.org.uk](http://www.inwo.org.uk)

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