Speaking Up Safely

Final Internal Audit Report

2026/27

Cardiff and Vale University Health Board

Reasonable Assurance

Contents

Review Reference	CVU-2627-02
Fieldwork	May - June 2026
Executive Sign Off	July 2026
Audit Committee	September 2026
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Executive Summary

Purpose

Our audit of Speaking Up Safely (SUS) was completed as part of our 2026/27 Internal Audit work for Cardiff and Vale University Health Board (the 'Health Board'). The purpose of the audit was to review the effectiveness and operation of the Health Board's processes for speaking up safely and the raising of staff concerns, including the level and awareness of these processes across the Health Board.

The NHS Wales Speaking Up Safely Framework (WHC/2023/036), issued by Welsh Government in September 2023, states that '*this is the Framework that organisations, departments and teams are required to follow in order to establish and sustain a culture where no individual will suffer victimisation or detrimental treatment as a result of speaking up, and where organisations learn and improve as a result of listening and responding to concerns raised'*.

Having effective arrangements which enable staff to speak up (also referred to as 'raising a concern') helps to protect patients, the public and the NHS workforce, as well as helping to improve the population's experience of healthcare.

Overview

The Health Board has a current Speaking Up Safely (SUS) Guidance document that is aligned to the Welsh Government SUS Framework and clearly sets out how concerns can be raised. This includes multiple reporting routes such as email, telephone, and the confidential Work in Confidence (WIC) reporting platform, which supports anonymous reporting and structured case management.

Since the launch of SUS in December 2024, the Health Board has undertaken extensive awareness activity to embed SUS culture and promote the WIC reporting platform. This includes ward-based engagement, leadership communications, training and induction programmes, and awareness sessions for Board members. The implementation of SUS is supported by dedicated resources, funding for the WIC reporting platform, and the ongoing recruitment of volunteer SUS Connectors, helping to integrate SUS into wider workforce development.

Our sample based testing indicates that concerns raised through SUS are managed effectively and in line with Welsh Government Framework requirements. Cases are acknowledged promptly, progressed within expected timescales, and include appropriate consideration of staff welfare and escalation where required. Overall, this reflects a well-developed system with consistent processes, governance, and monitoring arrangements, including annual oversight by the People and Culture Committee through SUS reporting.

SUS Connectors play a key role as impartial staff volunteers, offering initial advice and directing individuals to appropriate resolution pathways without acting in a managerial or advocacy capacity. They are supported through training, guidance, system access, and ongoing engagement via internal forums, enabling knowledge sharing and consistent practice.

We have concluded **reasonable** assurance on this area, the matters requiring management attention include:

- The Health Board's staff SUS Guidance document does not include the Welsh Government SUS Framework compliance timescales and is not available in the Welsh Language.
- The Health Board has not established a planned ongoing SUS awareness programme.
- There was a lack of Speaking Up Safely Connectors representation across some areas within the Health Board.
- There was minimal uptake of ESR SUS Training modules by staff and managers.

Full details of matters arising are provided within the Findings & Agreed Action Plan.

Scope & Assurance Summary

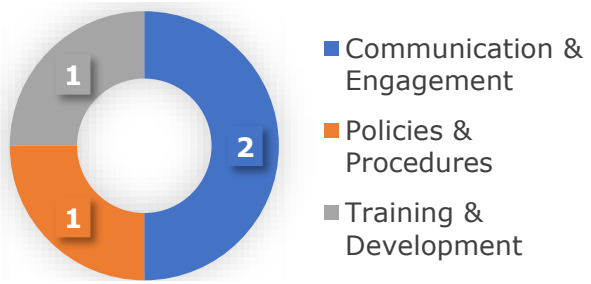
Objectives (The objectives and associated assurance ratings are not necessarily given equal weighting when formulating the overall audit opinion.)		Related Findings	Assurance
1	The process for staff to raise concerns is appropriate and is clearly documented and subject to regular review.	1	**Reasonable**
2	Arrangements are in place to raise staff awareness of the process for speaking up safely, ensuring they can do so with confidence and that they will be supported and not suffer detriment as a result. The process for managing concerns once raised is effective and consistently adhered to.	2, 3	**Reasonable**
3	Designated contacts, responsible for the handling of staff concerns are aware of their responsibilities and have received training to deal with the concerns appropriately.	4	**Reasonable**
4	Regular updates are provided to the Board or relevant committee on the implementation of the Welsh Government framework and the ongoing operation of the SUS processes, and any lessons learnt to date are shared.	-	**Substantial**

Management Actions

0 High Priority

4 Medium Priority

Themes



Risk Types

Quality or Safety Issues

Findings & Agreed Action Plan

Objective 1: The process for staff to raise concerns is appropriate and is clearly documented and subject to regular review.	Reasonable

Overview / Summary of Observations

The Health Board has produced a Speaking Up Safely (SUS) Guidance document for staff that reflects the content of the Welsh Government SUS Framework. It is suitably specific to staff requirements and outlines the methods by which SUS concerns can be raised, including that on the confidential, online Working in Confidence reporting platform. The SUS Guidance is current and dated June 2026, and states version control accordingly, and is published on the SUS Sharepoint and Health Board Internet sites.

	Key Findings	Risk & Impact	Agreed Management Action
1	<u>SUS Guidance – Absence of Welsh Government SUS Framework Timescales</u> The Health Board Speaking Up Safely Guidance states the processes undertaken when a SUS concern is raised. However, it does not include the process timescales as prescribed in the Welsh Government SUS Framework. Including these timescales within the SUS Guidance would provide individuals raising concerns with a clearer understanding of the process and greater confidence that their concerns will be reviewed and addressed in a timely and efficient manner. <u>SUS Guidance for Welsh language speakers</u> We note that the Guidance is not currently available in Welsh, nor is there supplementary information stated on the respective SUS Sharepoint and internet sites that signposts Welsh language speakers to report their concerns in the medium of Welsh.	Staff are unaware of the Speaking Up Safely framework and are therefore unclear how to report a concern.	**Agreed Action:** The Health Board Speaking Up Safely (SUS) Guidance will be revised to state the Welsh Government case processing timescales. The Corporate Governance Department will liaise with the Health Board Welsh Language Officer to facilitate the translation of the SUS Guidance into the medium of Welsh and ensure appropriate Welsh language signposting is provided on the respective Sharepoint and internet SUS pages.
			Expected Evidence of Implementation: Welsh version of SUS All Staff Guidance on SUS Sharepoint site.
		Medium Priority	**Officer:** Frankie Ogden, Head of Corporate Governance
	Theme: Policies & Procedures	Control Design	**Target Implementation Date:** October 2026

Objective 2: Arrangements are in place to raise staff awareness of the process for speaking up safely, ensuring they can do so with confidence and that they will be supported and not suffer detriment as a result. The process for managing concerns once raised is effective and consistently adhered to.	Reasonable

Overview / Summary of Observations

The Health Board has undertaken a broad range of activities to promote the Speaking Up Safely agenda since its launch in December 2024. These include targeted ward-based engagement, leadership-led communications, inclusion in induction and training programmes, and awareness sessions for Board members. SUS is embedded within key workforce development initiatives and supported by a dedicated budget, appropriate resourcing, and ongoing recruitment of SUS Connectors. However, there is no plan in place for an ongoing awareness programme and completion of the SUS training modules in ESR is very low.

Established and well-communicated reporting mechanisms are in place, including a dedicated email, telephone line, and the Work In Confidence (WIC) reporting platform, all of which are subject to regular monitoring. The WIC platform enables confidential and anonymous reporting and provides structured case management via SUS Connectors, with strict access controls to maintain confidentiality.

Our testing of case files indicates that concerns are managed effectively and in line with Welsh Government framework requirements. Cases are acknowledged promptly, progressed within required timescales, and include appropriate consideration of staff welfare, communication, and escalation where needed. Overall, the arrangements demonstrate a well-developed and operationally effective system, supported by consistent processes and sound governance.

Key Findings		Risk & Impact	Agreed Management Action
2	<u>Absence of a planned SUS awareness Programme</u> Currently there is no formal, structured and planned programme of ongoing awareness/engagement activities designed to systematically cover all Clinical Board Directorates, thereby maximising awareness of the SUS agenda, the SUS Sharepoint site and the Work In Confidence reporting platform.	Staff are unaware of the processes or feel unsafe to speak up meaning that harmful practices may go unreported, weakening organisational culture, trust, and the ability to drive meaningful improvement.	**Agreed Action:** The Corporate Governance Department will compile a formal and timetabled programme of SUS awareness/engagement events that will cover all Clinical Board Directorates.
			Expected Evidence of Implementation: Annual SUS promotion programme
		Medium Priority	**Officer:** Nikki Regan, Corporate Governance Officer
	Theme: Communication & Engagement	Control Operation	**Target Implementation Date:** October 2026

Key Findings		Risk & Impact	Agreed Management Action
3	<u>ESR SUS Training for staff and managers</u> Currently, SUS specific training is available to staff and managers via three non-mandatory ESR training Modules, these being: • Speak Up – Core training for all staff; • Listen Up – Training for all Managers; and • Follow Up – For Senior Managers Our review of ESR data relating to the uptake of these Modules between the launch of SUS in December 2024 and June 2026 identified limited engagement. During this period, 12 Health Board staff completed the Speak Up – Core training for all staff module, while no Health Board managers have completed the Listen Up – Training for all Managers module and the Follow Up – For Senior Managers module. Given the very low course completion rates, there is a clear opportunity to increase awareness and promotion of these Modules to support greater uptake of SUS training across the Health Board. We noted that none of the three ESR SUS Modules are referenced or signposted on the SUS Sharepoint site, nor are they included within the staff SUS Guidance. In addition, our review identified there has been no promotion of these as part of the SUS awareness exercises undertaken from December 2024 to the present time.	Concerns are not documented, investigated or acted upon appropriately.	**Agreed Action:** The ESR SUS Modules will be signposted on the SUS Sharepoint site, referenced within future iterations of the SUS Guidance and their existence promoted as part of future SUS awareness exercises. It is noted this will support with raising awareness and promoting a speaking up safely culture in the UHB and be used in parallel with Connector training.
			Expected Evidence of Implementation: SUS awareness training referenced on SUS Sharepoint site & SUS Guide
		Medium Priority	**Officer:** Nikki Regan, Corporate Governance Officer
	Theme: Training & Development	Control Operation	**Target Implementation Date:** October 2026

Objective 3: Designated contacts responsible for the handling of staff concerns are aware of their responsibilities and have received adequate training to deal with the concerns appropriately.	Reasonable

Speaking Up Safely 'Connectors' are Health Board staff volunteers who provide an initial, impartial point of contact for staff wishing to raise concerns, and where appropriate, offer advice and guidance. Connectors do not provide a 'management take' or advocate on behalf of the individual raising the issue. Instead, their role is to support and signpost the individual to the most appropriate channels to facilitate the effective resolution of issues. Connectors meet regularly through a dedicated Corporate Governance Teams channel to discuss SUS related issues and share experiences.

Upon completion of training the Connector is set up on WIC with their own personal account and given access to the Sharepoint SUS Connectors Channel by the Corporate Governance Team, so that they are provided with ongoing SUS news and refresher training sessions.

Connectors are also provided with a guidance document that comprehensively outlines their roles, responsibilities including the use of the WIC platform for the management of cases and liaison with relevant Health Board Subject Matters experts to facilitate the effective and professional resolution of concerns.

	Key Findings	Risk & Impact	Agreed Management Action
4	<u>Speaking Up Safely Connector representation across the Health Board</u> Our review of Connector representation across the Health Board identified that there are currently no Connectors in place within the Surgery Clinical Board, Digital Health & Intelligence and Capital, Estates and Facilities and Finance Directorates respectively. It is unclear why staff within any of these five areas have not expressed interest or volunteered for the Connector role, particularly given their respective staffing levels and breadth of services that cover the Health Board. The absence of Connectors within these areas may lead to the reluctance and inhibition of staff who wish to raise a concern with confidence and be listened to and offered advice in a confidential and psychologically safe manner.	Concerns are not documented, investigated or acted upon appropriately.	**Agreed Action:** Corporate Governance Department will undertake formal liaison with the respective senior management contacts within the Surgery Clinical Board; Capital, Estates and Facilities; Digital Health & Intelligence and Finance Directorates to further promote the need for and importance of Connectors within their respective areas.
			Expected Evidence of Implementation: More corporate connectors
		Medium Priority	**Officer:** Frankie Ogden, Head of Corporate Governance
	Theme: Communication & Engagement	Control Operation	**Target Implementation Date:** March 2027

Objective 4: Regular updates are provided to the Board or relevant committee on the implementation of the Welsh Government Framework and the ongoing operation of the SUS processes, and any lessons learnt to date are shared.	Substantial

Overview / Summary of Observations

Monitoring of SUS activity is undertaken annually by the People and Culture Committee through receipt of the SUS Annual Report, which provides an overview of the implementation and promotion of the SUS agenda across the Health Board. The 2025/26 Report is scheduled to be presented to the Committee in July 2026 and includes metrics on reported concerns, response and closure times from the Work in Confidence platform, as well as analysis of the types of concerns raised. In addition, a Staff Story on Speaking Up Safely was presented to the People and Culture Committee in October 2025 to further raise awareness of it.

We were also informed by the Head of Corporate Governance that SUS activity is subject to regular monitoring by the Corporate Governance team and any identified 'spikes' in activity would be escalated to Committee and / or Board as required on an exception basis.

Lessons learned feedback relating to the resolution of the SUS concern is provided directly to staff during and upon complete of the conversation between the Connector and the individual reporting the concern.

Quality Assurance (QA) surveys are offered to an individual upon case closure, which are auto generated by the Work in Confidence system and sent to the reporting individual's email address held on the system. Since the implementation of the QA surveys in November 2025 to the end of June 2026, a total of 26 closed cases have led to QA surveys being sent, but less than five have been responded to by individuals. However, we acknowledge that completion and submission of the surveys is optional and not mandatory, especially as reported cases are often made anonymously.

Appendix A

Assurance Opinion

	**Substantial**	Few matters require attention and are compliance or advisory in nature. **Low impact** on residual risk exposure.
	**Reasonable**	Some matters require management attention in control design or compliance. **Low to moderate impact** on residual risk exposure until resolved.
	**Limited**	More significant matters require management attention. **Moderate impact** on residual risk exposure until resolved.
	**Unsatisfactory**	Action is required to address the whole control framework in this area. **High impact** on residual risk exposure until resolved.
	**Advisory**	Given to reviews and support provided to management which form part of the internal audit plan, to which the assurance definitions are not appropriate. These reviews are still relevant to the evidence base upon which the overall opinion is formed.

Prioritisation of Findings

Priority	Explanation
High	Significant risk to achievement of a system objective OR evidence present of material loss, error, or misstatement. Poor system design OR widespread non-compliance.
Medium	Some risk to achievement of a system objective. Minor weakness in system design OR limited non-compliance.

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Audit work undertaken by NHS Wales Audit and Assurance Services conforms with the International Standards for the Professional Practice of Internal Auditing and associated Public Sector Internal Audit Standards as validated through the external quality assessment undertaken by the Chartered Institute of Public Finance & Accountancy in April 2023.

Website: [Audit & Assurance Services - NHS Wales Shared Services Partnership]

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