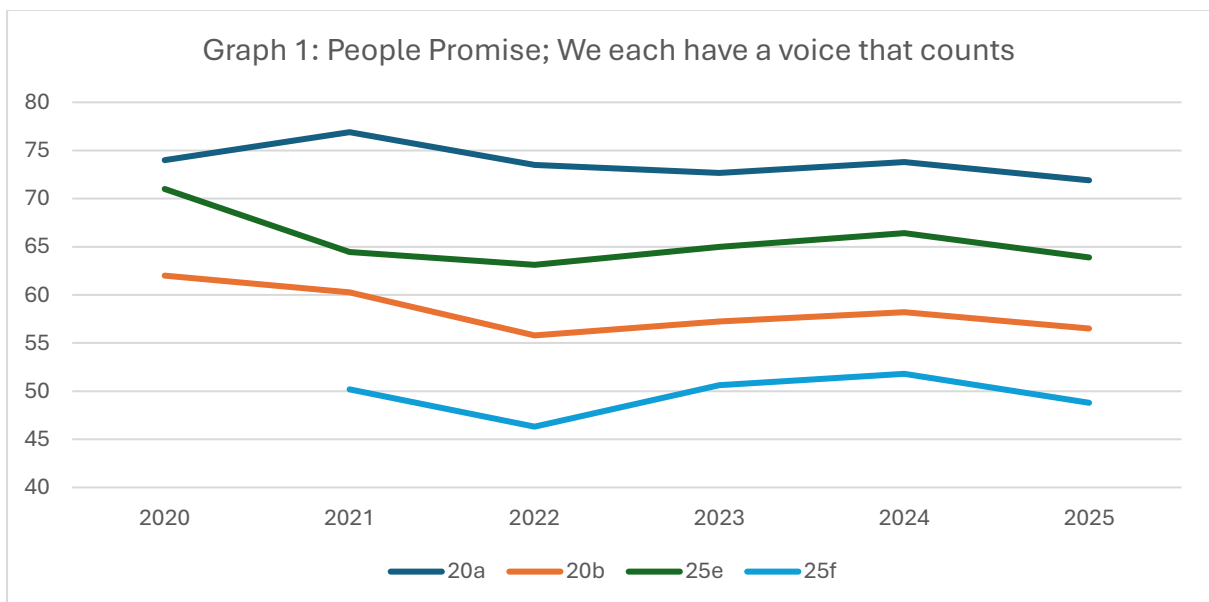


Table 1 : NGO Quarterly submissions		2025/6				
	Size	Qtr1	Qtr2	Qtr3	Qtr 4	TOTAL
Dorset County	Small	119	116	120		355
Dorset Healthcare	Medium	50	65	35		150
Salisbury	Small	37	23	32		92
Somerset Foundation NHS Trust	Large	95	90	78		263
University Hospitals Dorset	Medium	107	127	107		341
University Hospitals Southampton	Large	17	24	x		41

Table 2: Reason to why access the FTSU service?					
	Qtr 1	Qtr 2	Qtr 3	Qtr 4	TOTAL
Unaware of who LM is?	1	0	0	1	2
Not secure in raising concern to LM	10	15	15	23	63
LM aware but not act or address concern	25	30	24	30	109
LM is the issue	29	21	24	16	90
Advice	37	51	40	40	168
Did not think to ask LM	0	0	1	1	2
Unknown	5	10	3	10	28
TOTAL	107	127	107	121	462



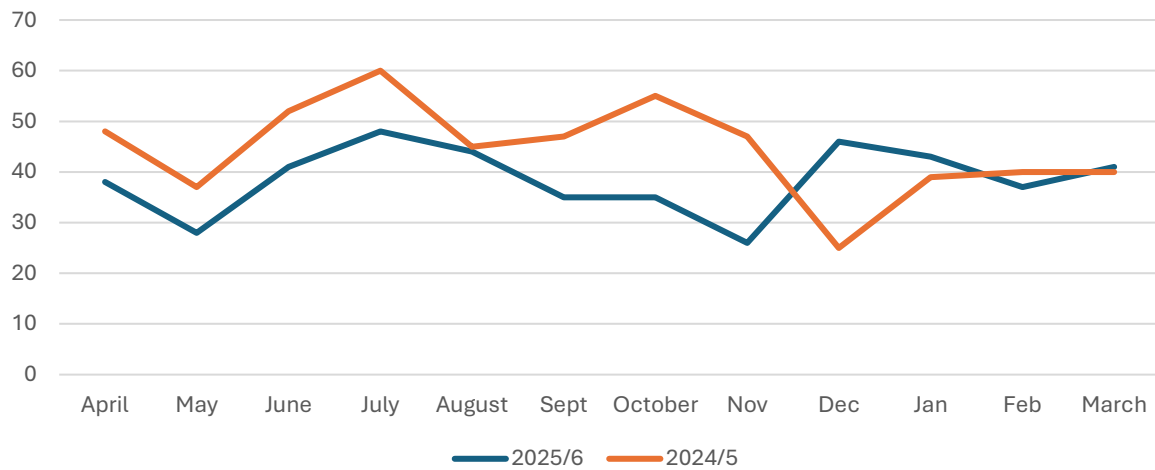
Key to Graph 1	
Q	Speaking up - clinical safety
20a	I would feel secure raising concerns about clinical practice
20b	I am confident that my organisation would address my concern
Q	Speaking up -raising concerns
25e	I feel safe to speak up about anything that concerns me in this organisation
25f	If I spoke up about something that concerned me, I am confident my organisation would address my concern

Table 3: HEE/NGO e- learning modules	2022/3	2023/4	2024/5	2025/6	TOTAL (2024-2026)
Speak Up	61	132	5916	3758	9674
Listen Up	42	85	80	46	126
Follow Up	18	46	46	25	71
TOTAL	121	263	6042	3829	9871

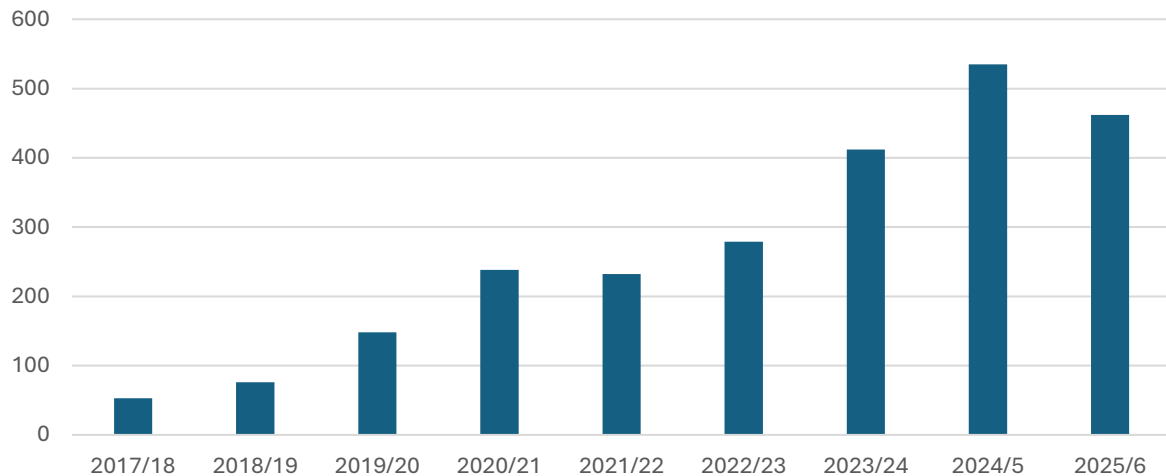
↑
Mandatory training speak up
module launched October 2024

Table 4: Themes of LERNS: raise an issue (Pink)	2024/5 (n= 288)	2025/6 (n= 370)
Attitudes and Behaviours	59%	63%
Policy and procedure	15%	22%
Quality and Safety	4%	1%
Hygiene factors inc environment	4%	2%
Equipment and maintenance	2%	2%
Other (including performance/ patient experience	17%	10%

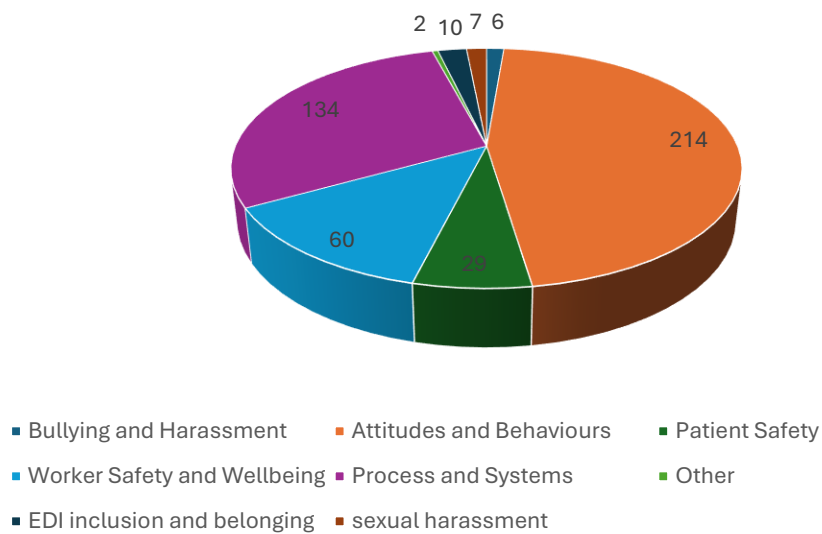
Graph 2: Monthly number of FTSU referrals



Graph 3: Annual number of FTSU referrals



Graph 4: FTSU Themes (2025/6)



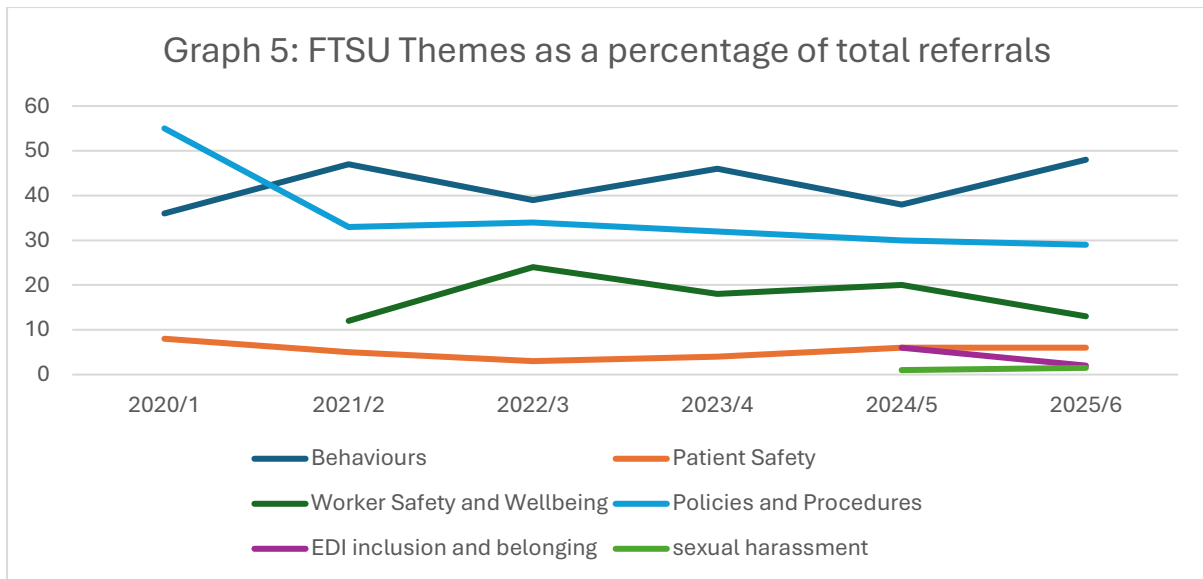


Table 5: Types of Behaviour 2025/6	TOTAL
Cultural breakdown (A deterioration in shared values, trust, behaviours, or norms that undermines teamwork, safety, and organisational effectiveness).	11
Incivility (Low-level disrespectful behaviours (e.g. rudeness, dismissiveness) that may seem minor individually but cause harm when persistent or combined).	116
Longstanding behaviours (Patterns of inappropriate or unprofessional behaviour that have continued over time and become normalised or unchallenged).	39
Miscommunication (Failure to convey or understand information clearly, leading to confusion, errors, or conflict).	31
Toxic workspace (A work environment characterised by persistent negativity, fear, poor leadership, lack of trust, or harmful behaviours affecting performance and wellbeing)	23
	220

Graph 6: People Promise; We are compassionate and inclusive; Civility and respect (subscore 4)

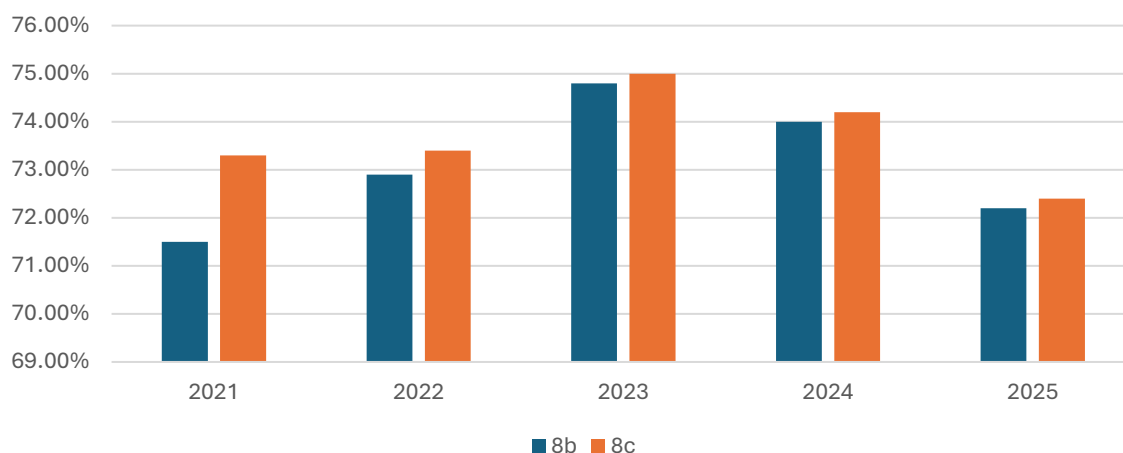


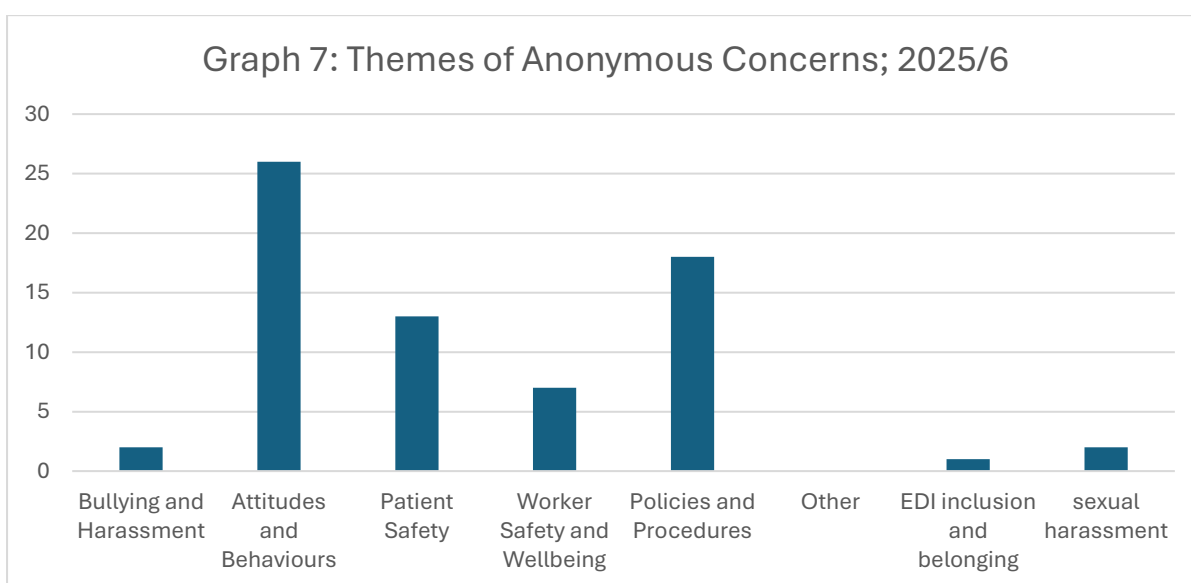
Table 6: Concerns relating to Process and Systems	TOTAL
Organisational Change (Planned or unplanned changes to structures, roles, processes, or culture that affect how people work and deliver services).	10
Clinical Guideline – (Evidence-based recommendations to support safe and effective clinical decision-making and patient care).	3
HR related issue (A concern that centres around people in the workplace such as employment terms, conduct, capability, attendance, performance, or workplace relations managed through HR processes).	81
Recruitment (A theme relating to processes and recruiting staff)	11
Parking (an issue relating to access, management and cost of parking)	4
Education/training (a concern relating to gaps in how people access, develop skills or prepare in their roles)	9
Non-clinical guideline (a concern that relates to a guidance that supports operational, managerial, or professional practice outside direct clinical care. Includes Artificial Intelligence, equipment, procurement, informatics, communication and messaging, recycling and transformation).	11
Health and safety (A theme focused on identifying and addressing risks to people’s health, safety)	4
Pension (A theme concerned with retirement planning and the provision of pension benefits)	1
	134

Table 7: Referrals made by Profession	FTSU referrals	No of staff at UHD (March 2026)
AHP	32	890
Medical	27	1442
Nurse and midwife	155	3011
Admin	86	1985
Additional clinical services*	34	1749
Additional professional science #	18	248
Estates and ancillary	19	708
Health care Scientists	16	255
Students	2	92
Anon	69	
other	4	
	462	10 380

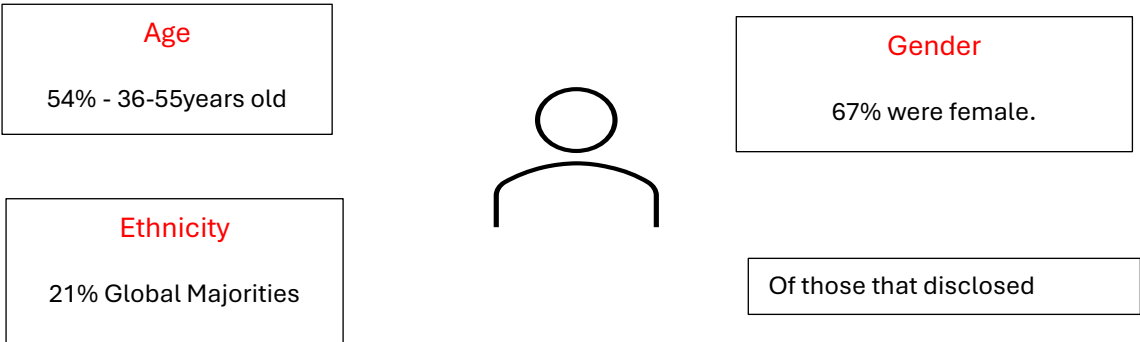
*Additional clinical services includes staff directly supporting those in clinical roles such as Health Care Support Workers (HCSWs), AHP support workers. They have a significant patient contact as part of their role.

#Additional professional scientific and technical include scientific staff including pharmacists, psychologists, social workers

Table 8: Anonymous Referrals	2025/6	2024/5	2023/4	2022/3	2021/2
Number of anonymous cases at UHD	69	71	37	14	12
Percent of cases at UHD which were anonymous	15%	13%	9%	5%	5%
Percent of anonymous cases raised nationally	Not yet reported	11.6%	9.5%	9.4%	10.4%



Graph 8:



Graph 9; Global Majority FTSU Theme; 2025/6

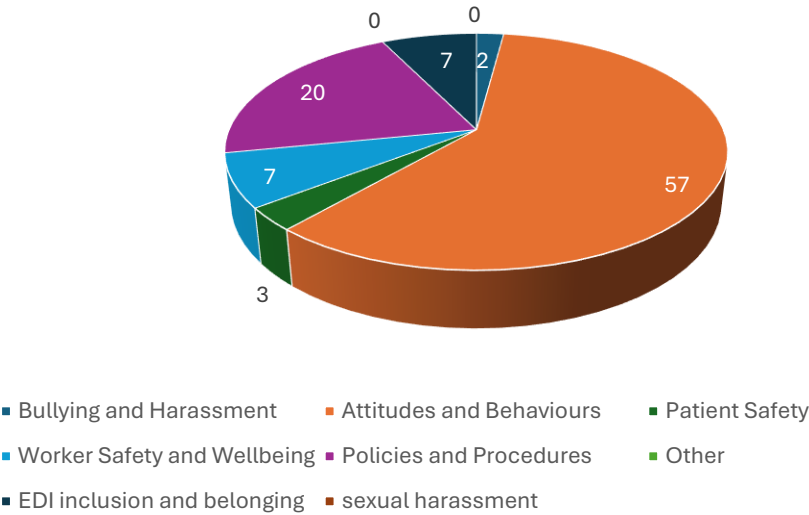


Table 9		FTSU Referrals	Question 25f on NSS (2025)
Care Group	Directorate	Total	UHD: 48.8%
Medical (105)	Accident and Emergency/UTC	24	41.5%
	Specialist Medicine	36	44.1%
	Networked Medicine	16	52.4%
	OPS and Acute Care	28	55.8% (OPS)
	Corporate	1	
Surgical (60)	Surgery	13	46.8%
	Anaesthetics	27	44.9%
	Head and Neck	14	43.9%
	Trauma and Orthopaedics	6	40%
	Private	0	

WCCSS (105)	Child Health	6	58%
	Women's Health	16	49.8%
	Cancer Care	11	50%
	Radiology and Pharmacy	28	45.9% (Ph) 52.7% (Rx)
	Clinical Support	23	55.2% (therapies)
	Pathology	21	41.5%
Operations (37)	Clinical Site	8	
	Facilities	21	50.8%
	Partnership, integration and discharge	2	
	Emergency Planning	0	
	Operational Performance	6	
Corporate (86)	CMO	0	
	CNO	27	41%
	Executive Board	1	73.7%
	Finance, procurement and BI	8	47.4%
	Informatics, IT and IG	8	47.1%
	People	39	53.2%
	Strategy, transformation and Estates	3	45.9%
Anon (69)		69	
TOTAL		462	

