


From: Mark Hope MHope@bma.org.uk 
Subject: FW: Info request: BMA member services for whistleblowers
Date: 5 March 2015 11:37
To: MinhAlexander minhalexander@aol.com
Cc: Mark Porter MPorter@bma.org.uk

MH

Dear Dr Alexander,

Thank you for your email and apologies for the delayed response. Please find responses to your three requests below.

- 1) Aside from the submission on 10 September 2014 of the response we have published I think the only two communications in which we submitted in writing substantive information to the Freedom to Speak Up Review (i.e. leaving aside incidental correspondence with the inquiry team) were the two emails attached. The first one (dated 21 August) essentially anticipated one section of our published response. The second one (dated 3 October) contained figures relating to our referrals of potential tribunal claims relating to whistleblowing to our solicitors for 'merits assessments'. We met Sir Robert Francis, who led the Review, on 11 September and indicated at that meeting that we would provide information relating to merits assessments. The marking of the second email as being "in confidence" reflected my understanding that we were sending the figures on a confidential basis for use by the inquiry team. On reflection, we see no particular reason to keep them confidential now.
- 2) I have received the following information on this issue from our regional services. Firstly, we do not have records going back 10 years. The retention period for case files is 6 years. The service we provide is predominantly supporting those members who believe they have suffered a detriment following their raising of concerns. We have also dealt with members who have raised whistleblowing as part of their defence when they are being disciplined or investigated regarding their performance. There are other instances where whistleblowing is raised in a grievance not as the primary issue but as a subsidiary issue. If a member came to the BMA with concerns about patient safety, we would advise the member as per our guidance as to the process for raising the concerns, i.e. we would signpost them. There is information about the number of cases that have gone to our solicitors for a merits assessment and of those the number that passed the merits assessment in the second email attached but we do not check details of ethnicity or gender for individual types as opposed to the whole group. Our solicitors have informed us that since 2006 they have had five Public Interest Disclosure Act (PIDA) claims which have been settled via settlement agreements / COT3s. We have decided that in view of the importance of this area we will in future regularly review cases where whistleblowing is the primary issue raised and will monitor on a quarterly basis cases where whistleblowing is a subsidiary issue.
- 3) We have set up a task and finish group on raising concerns about patient care that will look at how we might better help individual members and advocate policy changes. We intend that your suggestion about an independent audit will be considered by this group.

If you wish to discuss these points further, please feel free to call me on the number below.

Best wishes,
Mark

Mark Hope
Senior Policy Executive
Policy Directorate

British Medical Association

From: MinhAlexander [<mailto:minhalexander@aol.com>]
Sent: 22 December 2014 17:13
To: Mark Hope
Cc: Mark Porter
Subject: Info request: BMA member services for whistleblowers

To: Mr Mark Hope, Senior Policy Executive BMA, 22 December 2014

Dear Mr Hope,

I write to ask you for information, as suggested by @TheBMA, in response to my tweeted questions today, about whether BMA has published all of the evidence that it submitted to the Freedom to Speak Up Review.

1) I would be grateful if you could advise if BMA has published all submitted evidence. This is especially as BMA's submission document to the review dated 10 Sept 2014 (attached) contains no BMA activity data on services actually provided to whistleblower members, which the review said it would seek from unions:

"the number and types of concern raised with them"

"the nature of their involvement in resolving workplace disputes"

If BMA has not published all of the evidence submitted to the review, could it now publish all this evidence in its entirety?

2) Could you also provide such details of member services provided to whistleblowers in the last 10 years, including numbers of PIDA ET claims made, the number of these fully supported by BMA to Court, diversity details of the respective Claimants and numbers of cases settled with a confidentiality agreement?

3) Could you advise if BMA agrees with my suggestion that it should arrange an independent audit of whistleblower's experience of BMA's member services?

Many thanks.
Yours sincerely,

Minh Alexander
cc Dr Mark Porter, Chair of Council, BMA

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