

**From:** [REDACTED]

**Sent:** Tuesday, October 7, 2025 1:57:42 PM

**To:** [REDACTED]

**Subject:** Re: T&O survey

Hi [REDACTED]

Could I pick up a quick call with both or either of you. I have literally just had a conversation with [REDACTED] - [REDACTED] about something that has come up around T&O.

Many thanks

Best wishes

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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**From:** [REDACTED]

**Sent:** 07 October 2025 13:01

**To:** [REDACTED]

**Cc:** [REDACTED]

**Subject:** T&O survey

Hi [REDACTED]

[REDACTED] has shared with me a proposed survey to be sent by NES to WoS T&O trainees regarding their experience of unwanted behaviours in the workplace.

I'm keen we get as much value from this as possible - and we all know the challenge we face in acting on anonymous and unnamed concerns - so I'd be keen that as part of this we signpost to [REDACTED] or the Board whistleblowing policy and encouraged where possible to flag these concerns in a way that will allow us to act.

Does this seem reasonable?

BW

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

**Sent:** 20 February 2026 08:25

**To:** [REDACTED]

[REDACTED]

[REDACTED]

**Subject:** Re: Programme Visit to WoS T&O

[REDACTED]

There are as you know ongoing processes within the department, and there is a need for follow up actions with the team after these conclude. I have had some early discussions about what this will entail, and the timeframe for doing so.

While I respect the role of NES and understand the reasoning behind the visit, I think that later would be preferable if at all possible (even within the range suggested) from a GGC perspective.

Always happy to discuss

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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**From:** [REDACTED]

**Sent:** 20 February 2026 08:00

**To:** [REDACTED]

[REDACTED]

[REDACTED]

**Subject:** Programme Visit to WoS T&O

Dear All

Following on from discussions around the recent West of Scotland T&O survey, we would like to undertake a pan- WoS programme visit to T&O.

I recognise that the timing of such a visit is sensitive and we are looking at undertaking the visit in May / early June 2026.

Please let me know if that timing would be acceptable to you.

Many thanks

Best wishes

[REDACTED]

[REDACTED]

**From:** [REDACTED]

**Sent:** 04 February 2026 09:22

**To:** [REDACTED]

**Subject:** In confidence.

Hi [REDACTED]

For your awareness - note the supplementary information which was shared.

I am really disappointed that this information has been shared by the STC - the NES internal conversations were confidential but this has not been respected despite clear discussions around the sensitivities.

If you are having any conversations with the team would it be possible to ask that only the SBAR is shared - do you think that is reasonable?

I will pick up a call with [REDACTED]

Many thanks

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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**From:** [REDACTED]

**Sent:** 03 February 2026 17:35

**To:** [REDACTED]  
[REDACTED]

**Cc:** [REDACTED]  
[REDACTED]

**Subject:** Re: consultant meeting

Hi [REDACTED]

The slides presented at the meeting are attached. These slides were prepared by [REDACTED] and presented to the T&O West of Scotland rotation trainees at their monthly teaching programme, and then to the Specialty Training Committee meeting, both at the end of January. I am one of five QEUH consultants that sit on that committee.

The slides are brief and for it's been made clear to the COnsultant body that more granular information cannot be made widely available due to data protection rules.

Supplementary information presented at the STC meeting was also given to the QEUH consultant body at Fridays meeting:

- Our unit is one of three units in the region that has received a formal notification of concern from NES [REDACTED] This is due to a) severity of concerns raised by trainees, and/or b) evidence of a repeated pattern of concerning behaviour.

- The results of the survey will trigger a 'programme visit' from the NES team. We are yet to receive information re the timing of this, and the scope of the visit (ie. Limited to wellbeing/professionalism, or a more comprehensive deanery-like visit encompassing all training issues)

- That all Consultants mentioned specifically in the trainee feedback will be notified separately [REDACTED]

- That the STC members should take on some pastoral care roles in local units, including induction (which we have arranged for tomorrow). [REDACTED] have kindly offered to be a slightly external point of contact for any trainees wishing to discuss issues.







Many thanks

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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**From:** [REDACTED]

**Sent:** 27 January 2026 09:05

**To:** [REDACTED]

[REDACTED]

**Cc:** [REDACTED]

[REDACTED]

**Subject:** RE: Sent on behalf of [REDACTED] - WoS Trauma and Orthopaedic training programme allegations of sexual misconduct

[REDACTED]

Thank you for making the time to attend the [REDACTED] call last night. It was very much appreciated.

The breadth and depth of the discussion generated was proportionate to the strength of feeling in relation to the described events.

Here is my summary of discussions:

- The situation is unequivocally unacceptable and needs action
- There is a challenging situation that is being carefully managed in one Board that may make things more complex if the data are widely shared at present
- There will be a QM round of visits in April to the Boards in question and this would be a timely opportunity to share the data
- The MD group will continue to work with NES on these matters and remain clear on the roles and responsibilities outlined in the communication.

I hope this is useful. I'll share with the [REDACTED] to cascade to the [REDACTED] in the Board.

[REDACTED]

**From:** [REDACTED]

**Sent:** 21 January 2026 14:26

**To:** [REDACTED]  
[REDACTED]

**Cc:** [REDACTED]

**Subject:** RE: Sent on behalf of [REDACTED] - WoS Trauma and Orthopaedic training programme allegations of sexual misconduct

Dear both,

Thank you for sharing this. It will clearly be a worry for the Boards.

We have the [REDACTED] [REDACTED] [REDACTED] Would either of you want to attend and take a few minutes to restate the concerns and then discuss next steps.

Just in case this would be of value.

Let me know

[REDACTED]

**From:** [REDACTED]

**Sent:** 19 January 2026 16:54

**To:** [REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

**Cc:** [REDACTED]

**Subject:** Sent on behalf of [REDACTED] - WoS Trauma and Orthopaedic training programme allegations of sexual misconduct

[REDACTED]

Dear colleagues,

I am writing to share a short SBAR summary relating to trainee experience within Trauma & Orthopaedics across the West of Scotland.

The SBAR is based on a specialty-level survey prompted by free-text comments in the national training survey and undertaken by the STC. The findings represent a credible signal relating to trainee wellbeing, psychological safety and training quality.

I want to be clear about how we are viewing this.

- This is not an investigation, nor does it make findings about individual units or individuals.
- It does, however, point to behaviours and experiences reported by trainees across multiple Boards which, taken together, warrant collective attention and ownership.

NES has responsibility for identifying and coordinating response to system-level risks to training. Territorial Boards retain responsibility for safe working environments, professional conduct, and local response where concerns arise. It is in that spirit that we are sharing this intelligence with you.

Our intention is to work collaboratively with Boards to:

- acknowledge the potential issue,
- reflect on local arrangements for prevention, reporting and support,
- and consider what proportionate actions may be helpful to strengthen culture and psychological safety for trainees.

At this stage, we are not seeking formal assurance or reports. Rather, we see this as an opportunity for shared leadership across Medical Directors to ensure that, where there are risks to trainee experience or safety, they are recognised early and addressed constructively.

NES will continue to triangulate this intelligence with existing data sources and will keep Boards sighted on any proposed next steps.

I would welcome your views on how we can best approach this together, drawing on good practice where it exists.

Thank you

[REDACTED]

**From:** [REDACTED]

**Sent:** 27 January 2026 09:05

**To:** [REDACTED]

**Cc:** [REDACTED]

**Subject:** RE: Sent on behalf of [REDACTED] - WoS Trauma and Orthopaedic training programme allegations of sexual misconduct

[REDACTED]

Thank you for making the time to attend the WOS MD call last night. It was very much appreciated.

The breadth and depth of the discussion generated was proportionate to the strength of feeling in relation to the described events.

Here is my summary of discussions:

- The situation is unequivocally unacceptable and needs action
- There is a challenging situation that is being carefully managed in one Board that may make things more complex if the data are widely shared at present
- There will be a QM round of visits in April to the Boards in question and this would be a timely opportunity to share the data
- The MD group will continue to work with NES on these matters and remain clear on the roles and responsibilities outlined in the communication.

I hope this is useful. I'll share with the MDs to cascade to the DMEs in the Board.

**From:** [REDACTED]  
**Sent:** 18 November 2025 16:01  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** In confidence T&O survey

Hi [REDACTED]

Here is the survey from T&O which we discussed earlier today - many of the free text comments are concerning

There are 3 formats as described by [REDACTED].

Would you have time for us to catch up about this and appropriate next steps.

Many thanks

Best wishes

[REDACTED]

[REDACTED]

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**From:** [REDACTED]  
**Sent:** 18 November 2025 13:59  
**To:** [REDACTED]  
**Subject:** vos T&O papers

Hi [REDACTED]

Please find attached three versions of a report on the WoS T&O survey. As follows:

1 - highly confidential for discussion with GG&C only.

2 - confidential - for discussion between NES and WoS MDs, DMEs and comms. This has removed specific reference to GG&C but left in some comments which add appropriate impact in my view. Discussion and proposed actions removed.

3 - report for discussion at STC and anticipation of open circulation. This has removed specifically attributable comments but left in discussion and a reformatted section on some "proposed actions to discuss at STC and bring back to NES". I thought that the RDiTs would be looking for some proposal of action which is why I reconsidered leaving this in.

I hope these formats look right for each purpose. Keen to hear what you and [REDACTED] think

[REDACTED]

[REDACTED]

**From:** [REDACTED]

**Sent:** 17 November 2025 22:59

**To:** [REDACTED]

**Subject:** Fw: Notifications of concern re West of Scotland Sexual misconduct survey

[REDACTED]

Please see below notifications of concern from free text comments included in response to the recent survey of T&O RDiTs in WoS.

These were submitted anonymously.

[REDACTED]

What are your thoughts on how we proceed? Keen to discuss.

Thanks

[REDACTED]

[REDACTED]

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**From:** [REDACTED]  
**Sent:** 27 January 2026 09:05  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** RE: Sent on behalf of [REDACTED] - WoS Trauma and Orthopaedic training programme allegations of sexual misconduct

[REDACTED]

Thank you for making the time to attend the [REDACTED] call last night. It was very much appreciated.

The breadth and depth of the discussion generated was proportionate to the strength of feeling in relation to the described events.

Here is my summary of discussions:

- The situation is unequivocally unacceptable and needs action
- There is a challenging situation that is being carefully managed in one Board that may make things more complex if the data are widely shared at present

- There will be a QM round of visits in April to the Boards in question and this would be a timely opportunity to share the data
- The [REDACTED] group will continue to work with NES on these matters and remain clear on the roles and responsibilities outlined in the communication.

I hope this is useful. I'll share with the [REDACTED] to cascade to the [REDACTED] in the Board.

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Wednesday, February 4, 2026 10:40:18 AM  
**To:** [REDACTED]  
**Subject:** Re: In confidence.

[REDACTED] - we really are trying to support them but I don't think they are feeling that - let's have a call later. Complexity is increased as there is a current process ongoing.

I will call you at 11:00 if that is still ok.

Many thanks

[REDACTED]

[REDACTED]

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**From:** [REDACTED]  
**Sent:** 04 February 2026 09:42  
**To:** [REDACTED]  
**Subject:** Re: In confidence.



[REDACTED]  
**Subject:** Re: consultant meeting

Hi [REDACTED]

The slides presented at the meeting are attached. These slides were prepared by [REDACTED] and presented to the T&O West of Scotland rotation trainees at their monthly teaching programme, and then to the Specialty Training Committee meeting, both at the end of January. [REDACTED] QEUH consultants that sit on that committee.

The slides are brief and for it's been made clear to the CConsultant body that more granular information cannot be made widely available due to data protection rules.

Supplementary information presented at the STC meeting was also given to the [REDACTED] consultant body at Fridays meeting:

- Our unit is one of three units in the region that has received a formal notification of concern from NES [REDACTED] This is due to a) severity of concerns raised by trainees, and/or b) evidence of a repeated pattern of concerning behaviour.
- The results of the survey will trigger a 'programme visit' from the NES team. We are yet to receive information re the timing of this, and the scope of the visit (ie. Limited to wellbeing/professionalism, or a more comprehensive deanery-like visit encompassing all training issues)
- That all Consultants mentioned specifically in the trainee feedback will be notified separately ([REDACTED])
- That the STC members should take on some pastoral care roles in local units, including induction (which we have arranged for tomorrow). [REDACTED] have kindly offered to be a slightly external point of contact for any trainees wishing to discuss issues.

Nothing in relation to specific incidents was discussed at the meeting on Friday. We are all very conscious of other ongoing processes and that these cannot be compromised in any way.

The plans re next steps at present are:

- Discussion re practical role of the STC committee and safeguarding
- Departmental discussion at proposed upcoming away day re behaviours contributing to current issue
- Signposting to active bystander/upstander courses (GGC, UoG, RCSPG)

I understand you are coming to discuss at our meeting a week on Friday, which I think would be very helpful. I'd be of course happy to discuss further if that would be at all helpfu [REDACTED]

Many thanks

[REDACTED]

[REDACTED]

[REDACTED]

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**From:** [REDACTED]

**Sent:** 03 February 2026 08:47

**To:** [REDACTED]

**Cc:** [REDACTED]

██████████ I wanted to make you aware of the recent STS and GMC survey data for the West of Scotland that was circulated shortly before you took up post. I've reviewed the responses, and I think it identifies several areas we can improve. However, something that specifically stood out in one of the free-text comments was the statement "female colleagues have experienced unwanted sexually inappropriate behaviours."

As you'll be aware, there has been some high-profile work published recently on sexual misconduct in surgery. In Scotland, ██████████ have done work on this issue at a national level. I have discussed it with ██████████ we feel it would be worthwhile to understand the prevalence of this behaviour specifically within orthopaedics in the West of Scotland so we can take appropriate and informed steps to address it.

We would appreciate your perspective and input on this. We'd like to arrange a time to meet with you to discuss the issue further and begin drafting a survey to collect local data. Would you be available for a catch-up sometime soon? I tend to be free Tuesday mornings, or PM Wednesday/Thursday/Friday.

██████████

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Re: Misconduct Trainee Survey

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From [REDACTED]

Date Tue 9/30/2025 10:26 AM

To [REDACTED]

[REDACTED]

Hi [REDACTED]

That looks great.

I was chatting with [REDACTED] and we did think we should perhaps split up GGC by sector - North (GRI, Stobhill), South (QEUH, Gartnavel, Victoria), Clyde (RAH, Inverclyde, VoL), and RHSC. Each unit has separate management teams and education leads so in terms of tackling any results it would likely be more useful to break it down by sector and I don't think will compromise the anonymity.

[REDACTED] - we have chatted briefly about this already but I have included you so you can have a look over what we have put together as a survey before the meeting tomorrow. We pulled the descriptors of sexual misconduct from the NES information page as we thought that would be an appropriate standard to use.

[Sexual Misconduct Resources - Scotland Deanery](#)

[REDACTED]

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Re: Misconduct Trainee Survey

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From [REDACTED]

Date Mon 9/29/2025 3:10 PM

To [REDACTED]

[REDACTED]

Hello,

[REDACTED]

Please let me know if there are any further suggestions following the STC meeting on Wednesday and I can try to create an entry on SurveyMonkey.

Kind regards,

[REDACTED]

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From: [REDACTED]

Sent: 26 September 2025 09:56

To: [REDACTED]

Subject: RE: Misconduct Trainee Survey

Thanks for all this work [REDACTED] Here are my comments:

- 1) I like all of it, apart from the title.....I think we should mirror what has been done in England and simply call it the West of Scotland Sexual Misconduct in T&O Survey.  
(Which makes me think we should really be rolling it out to the Consultants in the region at a later date too. )
- 2) The signposting links have been added twice, so 1 could be removed.
- 3) I am happy to be added as a contact if you feel it is appropriate. I also think we should involve [REDACTED] before this is distributed. Perhaps the best way forward would be an initial discussion under the AOCB section at the STC meeting next Wednesday, so that the whole committee is aware of the plan (sorry you cannot join us [REDACTED] )
- 4) I think we should use the opportunity to INFORM as well as capturing data, so the survey could be sent out with these link perhaps:  
[Breaking the silence on sexual misconduct in surgery: two years on | The Bulletin of the Royal College of Surgeons of England](#)

(And note that there is a webinar (QR code within link) on 8<sup>th</sup> October, so this is very timely.)

[Turning-the-tide-progress-actions-sexual-misconduct-in-surgery.pdf](#)

5) It would also be worthwhile advertising this course at the college: [Active Bystander Training for Tackling Sexual Misconduct in Healthcare | RCPSG](#)

[REDACTED]

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**From:** [REDACTED]  
**Sent:** 25 September 2025 16:55  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** Re: Misconduct Trainee Survey

Hi [REDACTED]

That looks really good. I tweaked some of the wording of the intro and final paragraph a little - let me know what you think though as I struggled to make it not sound like the soundbite at the end of an episode of Hollyoaks signposting to support.

I took your name out so you are not a contact if they wish to discuss things further. On balance I felt this was too much to ask of you in case someone does get in touch with something awful to report.

I added in all the health boards in the training programme as I think we need to list all of them. I also added a note where more than one answer can be selected so it is obvious that you can tick more than one.

[REDACTED] - what do you think? Was there anything else you thought we should include? We took the sexual misconduct list of behaviours from the NES TDWS web page on the topic as we thought that left no room for interpretation about what constituted sexual misconduct in answering the question.

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Thursday, September 25, 2025 2:58 PM  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** Misconduct Trainee Survey

Dear [REDACTED]

Following our discussion last week, please find attached a draft for the trainee survey on misconduct.

I tried to keep it short so we can get as many responses as possible, but that is still 13 questions. I have deleted a couple of points from the NES sexual misconduct criteria based on whether the incidence was experienced or witnessed. I tried to group the hospitals to avoid the risk of identifiability - please let me know if you would like them to be divided into boards instead.

Please let me know how we can improve this.

Kind regards,

██████

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Re: Survey

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From [REDACTED]

Date Fri 10/10/2025 2:47 PM

To [REDACTED]

Hi [REDACTED]

Yes I asked our [REDACTED] to put together a survey and we sent it out to the WOS ortho trainees yesterday. We have asked about experiences of sexual misconduct and witnessing of any misconduct, as well as free text boxes. The survey information also includes signposting to support and we have used it as an opportunity to highlight the bystander training at the RCPSG in November as well.

[REDACTED]

Thank you for your support with this, I appreciate it's a sensitive and potentially difficult topic to address. I will obviously be happy to share the results when they are available. We are likely going to keep the survey open for a couple of weeks so we should get some data back fairly quickly.

[REDACTED]

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**From:** [REDACTED]

**Sent:** Friday, October 10, 2025 12:04:52 PM

**To:** [REDACTED]

**Subject:** Survey

Hi [REDACTED],

I hear from GGC that you are conducting a survey of T&O on sexual harassment. Is that correct? I am fully supportive and keen to hear more. Is this in response to a specific or general concern or something the STC was keen to do as good governance?

Thanks for doing this. I'd like to help with any and all efforts to tackle these issues.

[REDACTED]

[REDACTED]

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Re: Re:

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From [REDACTED]

Date Thu 10/16/2025 3:22 PM

To [REDACTED]

Hi,

I am happy to share the results with you both when we get them and discuss the findings. The survey is not targeted at a specific health board or department, it is more about finding out where we stand across the region.

It is [REDACTED] that has organised the survey though and has the access to the results. I do not have a login for the survey. We felt that if it was lead by [REDACTED] that we would be more likely to get engagement.

[REDACTED]

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From: [REDACTED]

Sent: Thursday, October 16, 2025 2:26 PM

To: [REDACTED]

Subject: Fw: Re:

Please see below

[REDACTED]

[REDACTED]

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[REDACTED]

Sent: 15 October 2025 18:06

To: [REDACTED]

Subject: Re:

Thanks [REDACTED] Very specific questions. It will be very interesting to see what comes back. Might be worth speaking to [REDACTED] to have a think about how the findings are distributed/handled. Public accusations against a specific employer without them having a heads up might be sensitive. I wonder if [REDACTED] would be willing to show you the results and you could give me a heads up before we release? I know the bosses at NES would appreciate forewarning.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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From: [REDACTED]

Sent: 15 October 2025 12:56

To: [REDACTED]

Subject:

As discussed the link below was sent to all WOS ortho trainees last week. As you can see was not related to our previous communication regarding GGC.

<https://s.surveyplanet.com/h3q2l0wg>

The questions will hopefully provide some granularity to what is still often quite generic data.

[REDACTED]

[REDACTED]

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Re: Trainee Survey

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From [REDACTED]

Date Tue 10/21/2025 9:38 AM

To [REDACTED]

Thats great - thanks [REDACTED]

Im not sure what commitments you have this week, but I am in [REDACTED] on Friday am then a clinic with [REDACTED] in the afternoon if you want to catch up in person

[REDACTED]

[REDACTED]

[REDACTED]

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From: [REDACTED]

Sent: 21 October 2025 09:24

To: [REDACTED]

Subject: Re: Trainee Survey

Hi [REDACTED]

The survey was distributed 12 days ago and will run until next week.

It pertains to the whole of the West of Scotland.

No, there are no official complaints for the reasons already explained (fear of loss of anonymity and a belief that there will be loss of future employment for the trainees.)

I doubt this will change.

[REDACTED] aware and supportive (I had conversation with [REDACTED] last week.)

BW

[REDACTED]

[REDACTED]

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From: [REDACTED]

Sent: Tuesday, October 21, 2025 8:28 am

To: [REDACTED]

Subject: Re: Trainee Survey

Thanks [REDACTED]

I agree regarding the limitations of the current surveys, and happy to be part of any conversation looking at how we might improve this.

Apologies for the questions, however

Can I check whether the concerns you have raised have been escalated internally through the NES hierarchy? Is the APGD aware?

Can you confirm when the survey went out, and for how long it will be open?

Am I right in thinking we are still looking at the WoS as a whole within the survey, and that as things stand, there are no formal complaints that have come through this route?

Please keep me informed as this progresses and of any further feedback

[REDACTED]

[REDACTED]

[REDACTED]

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**From:** [REDACTED]

**Sent:** 15 October 2025 17:14

**To:** [REDACTED]

**Subject:** RE: Trainee Survey

The only thing I would wish to add is that the trainees who have spoken to me do not believe that the GMC survey is in any way anonymous. I agree with them.

[REDACTED]

[REDACTED]

[REDACTED]

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**From:** [REDACTED]  
**Sent:** 09 October 2025 15:18  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** Re: Trainee Survey

Hi [REDACTED]

Most of the feedback has come via [REDACTED]. It was an incidental comment made to [REDACTED] at an initial meeting that lead to her informally asking around more about the trainees experiences. [REDACTED] may be able to provide more detailed information regarding the timing and nature of these incidents.

[REDACTED]

After speaking with [REDACTED], I reviewed the trainee survey data myself to check if I had missed anything. The 2024 results did flag issues relating to inclusivity and equality, but the 2025 data shows white boxes across all relevant topics in both the GMC and NTS surveys.

The bullying and general behavioural concerns that [REDACTED] mentioned will not be captured by the survey going out today. When I met with the trainees at their teaching session, I specifically encouraged them to raise any issues such as bullying, racism, or similar concerns directly with me. If I receive any further feedback on these matters relating to GGC, I will of course share it with you.

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Wednesday, October 8, 2025 10:34:53 PM  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** Re: Trainee Survey

Thanks [REDACTED]

I have discussed this in general terms with the relevant [REDACTED]

We would be very keen to see the outcome of the survey once available. We have also looked at the STS and NTS surveys and free text comments from this last year and it does seem that [REDACTED] Orthopaedics isn't especially a poor performing outlier as a site.

Are you able to provide a little more in the way of detail as to how this feedback came to you, and can you give any indication of when events of concern may have occurred, and numbers of resident doctors highlighting these concerning behaviours?

[REDACTED]

[REDACTED]

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**From:** [REDACTED]

**Sent:** Tuesday, October 7, 2025 12:52:22 PM

**To:** [REDACTED]

**Cc:** [REDACTED]

**Subject:** Re: Trainee Survey

Hi [REDACTED]

The questionnaire covers their time as an ST in the west of Scotland rather than a set time period. As some units only get very small numbers of trainees if it was only about experiences over the past year for example, it would likely compromise the anonymity.

The plan is to send it to all the ortho trainees. We will also put a QR code link to it up at their regional teaching (ST3 upwards) on Thursday to try and encourage responses.

My plan is to go along to the teaching to explain the survey and highlight [REDACTED] [REDACTED] on the STC are all happy to be contacted if they wish to discuss anything further. I was going to suggest the local DME as an alternative if they wish to raise any concerns but don't feel comfortable raising them within the orthopaedic community.

I am very happy to discuss and share the results of the survey once we have them.

[REDACTED]

[REDACTED]

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**From:** [REDACTED]

**Sent:** Tuesday, October 7, 2025 12:42 PM

**To:** [REDACTED]

**Cc:** [REDACTED]

**Subject:** Re: Trainee Survey

Thanks

Please let the resident doctors know that I am happy to meet anyone privately, and with anonymity retained, if they wish to discuss any concerns. This may allow us to be clearer about how best to address the concerns raised. There is

also a whistleblower option through GGC that they can choose if felt more agreeable

We would be very keen to see the survey results if you are able to share them with me



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**From:** [Redacted]  
**Sent:** 07 October 2025 12:27  
**To:** [Redacted]  
**Cc:** [Redacted]  
**Subject:** Re: Trainee Survey

Thanks [Redacted]

As you know, we take this concern very seriously

Will the questions identify any time period during which these behaviours have been witnessed / encountered?

Is the plan to send to all WoS T&O trainees?

I plan to let others in the senior team know about the survey so may come back to you before Thursday if other questions arise

Thanks



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**From:** [Redacted]  
**Sent:** 07 October 2025 11:41  
**To:** [Redacted]

---

Re: Trainee Survey

---

From [REDACTED]

Date Tue 10/21/2025 9:38 AM

To [REDACTED]

Thats great - thanks [REDACTED]

Im not sure what commitments you have this week, but I am in [REDACTED] on Friday am then a clinic with [REDACTED] in the afternoon if you want to catch up in person

[REDACTED]

[REDACTED]

[REDACTED]

---

From: [REDACTED]

Sent: 21 October 2025 09:24

To: [REDACTED]

Subject: Re: Trainee Survey

Hi [REDACTED]

The survey was distributed 12 days ago and will run until next week.

It pertains to the whole of the West of Scotland.

No, there are no official complaints for the reasons already explained (fear of loss of anonymity and a belief that there will be loss of future employment for the trainees.)

I doubt this will change.

[REDACTED] aware and supportive (I had conversation with [REDACTED] last week.)

BW

[REDACTED]

Sent from [Outlook for iOS](#)

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From: [REDACTED]

Sent: Tuesday, October 21, 2025 8:28 am

To: [REDACTED]

Subject: Re: Trainee Survey

Thanks [REDACTED]

I agree regarding the limitations of the current surveys, and happy to be part of any conversation looking at how we might improve this.

Apologies for the questions, however

Can I check whether the concerns you have raised have been escalated internally through the NES hierarchy? Is the APGD aware?

Can you confirm when the survey went out, and for how long it will be open?

Am I right in thinking we are still looking at the WoS as a whole within the survey, and that as things stand, there are no formal complaints that have come through this route?

Please keep me informed as this progresses and of any further feedback

[REDACTED]

[REDACTED]

[REDACTED]

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**From:** [REDACTED]

**Sent:** 15 October 2025 17:14

**To:** [REDACTED]

**Subject:** RE: Trainee Survey

The only thing I would wish to add is that the trainees who have spoken to me do not believe that the GMC survey is in any way anonymous. I agree with them.

[REDACTED]

[REDACTED]

[REDACTED]

Best Wishes

[REDACTED]

---

**From:** [REDACTED]  
**Sent:** 09 October 2025 15:18  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** Re: Trainee Survey

Hi [REDACTED]

Most of the feedback has come via [REDACTED]. It was an incidental comment made to [REDACTED] at an initial meeting that lead to her informally asking around more about the trainees experiences. [REDACTED] may be able to provide more detailed information regarding the timing and nature of these incidents.

[REDACTED]

After speaking with [REDACTED], I reviewed the trainee survey data myself to check if I had missed anything. The 2024 results did flag issues relating to inclusivity and equality, but the 2025 data shows white boxes across all relevant topics in both the GMC and NTS surveys.

The bullying and general behavioural concerns that [REDACTED] mentioned will not be captured by the survey going out today. When I met with the trainees at their teaching session, I specifically encouraged them to raise any issues such as bullying, racism, or similar concerns directly with me. If I receive any further feedback on these matters relating to GGC, I will of course share it with you.

[REDACTED]

[REDACTED] [Outlook for Android](#)

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**From:** [REDACTED]  
**Sent:** Wednesday, October 8, 2025 10:34:53 PM  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** Re: Trainee Survey

Thanks [REDACTED]

I have discussed this in general terms with the relevant [REDACTED] and the [REDACTED]

We would be very keen to see the outcome of the survey once available. We have also looked at the STS and NTS surveys and free text comments from this last year and it does seem that QE Orthopaedics isn't especially a poor performing outlier as a site.



I have just spoken with [REDACTED] We have about 27 responses so far. She has seen the results that have already been submitted but has not will not discuss them with anyone. She is going to send out another email to nudge for more responses.

I told her I would like to take over reviewing the results as some new information has come to light and she had no issue with that.

I have told her that initial review of the results would be by us and [REDACTED] etc but in terms of an action plan we would very much like to have her involved and if the data is presented then she obviously leads on that.

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Thursday, October 16, 2025 5:12 PM  
**To:** [REDACTED]  
**Subject:** RE: Sexual Harrassment Survery Results

[REDACTED]

---

**From:** [REDACTED]  
**Sent:** 16 October 2025 15:57  
**To:** [REDACTED]  
**Subject:** Sexual Harrassment Survery Results

Hello,

[REDACTED] and I chatted yesterday about the following:

1. I am going to touch base with [REDACTED] regarding an email reminder and set a deadline for responses at 31<sup>st</sup> October.
2. Result analysis - should [REDACTED] be involved in this, if so, we thought it should be done as a group F2F?
3. I discussed the intended EDI survey at the BOFAS EDI meeting last week and there was an appetite for this being done in ever deanery and be NES/HEE/BOTA led to standardise results - I am going to reach out to BOTA rep

Please let men know if I have forgotten anything [REDACTED].

Thanks,

[REDACTED]

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Fw: Private and Confidential 553966-001

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From [REDACTED]  
Date Mon 11/10/2025 11:47 AM  
To [REDACTED]

[REDACTED]

Hi,

Thought I would just update you ahead of the meeting later where I have got to making enquiries.

I was unable to get through to the Women's Rights legal helpline despite several attempts.

Protect, a whistleblowing helpline references on the GMC website advised they would not be in a position to help give advice until we were at the point of being able to report our findings. They did recommend contacting the ICO

Speaking to the ICO helpline they were able to advise

- although we did not anticipate any personal data being collected as the survey was anonymous we now have got personal data and need to respond to this
- we need to decide whether the personal data collected should be deleted and disregarded or whether, even though it was not expected from the survey, we have a moral duty not to ignore it (I think it is the latter)
- if we decide to keep the data we then need to effectively 'backfill' the data protection/GDPR requirements
- we potentially need to inform the person involved as transparency is key part of data protection rules but in the context of misconduct where it may impair further investigations we should perhaps discuss this further
  - if we do inform the [REDACTED] involved I am not sure what the process for this is and who should inform [REDACTED] and how
- with regard to sharing the information we should consider who it is shared with (the aim being to keep it to a minimum) and ensure we have a lawful basis for sharing the data
  - I said to the ICO helpline that we would potentially want to share the information with [REDACTED] employer not the whole region (which was the purpose of the survey)
  - the helpline also asked about the validity of the data and our confidence in it, the fact the same name is mentioned by multiple respondents adds to the confidence it is valid

I have contacted NES data protection officer and am awaiting a call back. I think the specific question for them are:

- can share the survey information with [REDACTED] in the first instance as my line managers at NES
- do we need to notify the person identified in the survey and what is the process for doing this

- I think we should notify them their name has come up if we are going to pass survey results on to the employer
- can we share the survey information with the named consultants employer

[REDACTED]

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**From:** [REDACTED]  
**Sent:** Friday, November 7, 2025 3:47:24 PM  
**To:** [REDACTED]  
**Subject:** FW: Private and Confidential 553966-001

I am not sure how much this helps. I shall try to digest it over the weekend.

[REDACTED]

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**From:** [REDACTED]  
**Sent:** 07 November 2025 13:14  
**To:** [REDACTED]  
**Subject:** Private and Confidential [REDACTED]

Dear [REDACTED]

Thank you for your recent correspondence to [REDACTED] please find attached my letter of advice.

Please continue to direct all correspondence to [REDACTED] quoting the reference number [REDACTED]

Kind regards,

[REDACTED]

[REDACTED]

[REDACTED]

---

Re: Notifications of concern re West of Scotland Sexual misconduct survey

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From [REDACTED]

Date Tue 11/18/2025 8:30 AM

To [REDACTED]

Cc [REDACTED]

Thank you both for passing on these concerns. I will discuss them with [REDACTED] here at NES and we will act as per our notification of concern mechanisms. This will likely involve discussion with the healthboards referenced. Disclosures will be treated as anonymous but can still be helpful to NES and employers in the continued work to address adverse culture and misconduct.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

---

[REDACTED]

Sent: 17 November 2025 22:04

To: [REDACTED]

Cc: [REDACTED]

Subject: Notifications of concern re West of Scotland Sexual misconduct survey


Dear [REDACTED]

As we recently discussed, [REDACTED] has compiled a full report on our anonymous survey of experiences of sexual misconduct in T&O training in the West of Scotland, which she has now forwarded to you.

However, I feel that there were some concerning statements in the free text boxes of the survey which need to be flagged up to the relevant departments as they have the potential to affect trainee safety and well-being.

Very few of the comments received have identified a particular unit or an individual, except for these.

I wish to bring them to your attention as formal notifications of concern about training in the West of Scotland.



I am not sure if anything can be done in relation to these statements as they are from anonymous sources but I have had detailed discussion with some trainees affected (who wish to remain anonymous for the reasons mentioned) and believe that I have a duty of care to all of them to ensure that their concerns are heard and acted upon and that such behaviour stops so that they may feel safe at their workplace.

Please be assured that I am providing support and advice to those who have personally come to speak to me, signposting them to relevant organisations, as required.

I trust that you will know the correct route for escalation of our concerns.

Best Wishes



---

Re: [REDACTED]

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From [REDACTED]

Date [REDACTED]

Thanks very much for the update [REDACTED] and many thanks also to [REDACTED] for her support in this difficult matter.

I think this all sounds sensible/reasonable. Let's hope that it will lead to a better work and training environment for everyone.

Please let me know if there is anything else you need/would like me to do in the interim.

Best wishes

[REDACTED]

Sent from [Outlook for iOS](#)

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From: [REDACTED]

Sent: Tuesday, November 18, 2025 11:52 am

To: [REDACTED]

Subject: Re: [REDACTED]

I had a useful meeting with [REDACTED] just now to work out the right way forward. In summary:

1 - the specific notifications of concern that relate to a unit/individual will be escalated to the employer as per our usual mechanism. This will happen this week.

2 - I will formulate three versions of the report:

- One which will remain confidential and contain the naming of an individual. This will be taken by [REDACTED] to GG&C and feed into the conduct process which is ongoing
- Another which [REDACTED] and I will take to the other WoS boards. This will contain the results but not the discussion or action proposals. This will also be confidential and for MDs and DMEs only. This will not contain the naming or specific reference to an individual but will allow us to highlight comments relevant to their boards albeit that the themes for the non-GG&C boards are broadly similar.
- A third version for you to take back to the STC. This will have the names and specific unit reference removed. It will have your discussion and action proposals for discussion with the STC. I have edited that slightly to put this as proposals for the STC to discuss and then to bring back to NES (ie [REDACTED] and me) for approval. We have to accept that this version will circulate widely and may well end up on social or mainstream media. We will discuss this with our NES comms team. You should bring any approaches from the media or other external groups to me for discussion with NES comms. This version can be taken to meetings eg SCOT.

All three versions need to be approved by the NES exec ([REDACTED]) so might take a few days to get there. I am working on them now.

I hope you understand the need for this approach and find it acceptable. There is no attempt to water down the findings or protect any location or individual. I personally have confidence that this report will be impactful and is the start of a very proactive approach to tackle these issues in T&O nationally and hopefully lead other surgical specialties to follow.

Thanks again

█

█

█

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**From:** █

**Sent:** 18 November 2025 11:30

**To:** █

█

**Subject:** Re: █

Hi,

I have not shared the survey report with anyone beyond this group yet as I know that you said you wanted to speak to NES about it before it was distributed. I am keen to involve █ and █ and I think they should review the report and advise on any edits as well before we release it more widely in the region.

█ would it be best if you and █ review it first, and then I can share that version with █ and █ with all of us copied in for any feedback from them. We can then look to share it with the trainees and trainers in the region.

For repeating the survey I think having the NES support for methodology/GDPR etc would be very useful and I think the questions could be tweaked a little as well for clarity.

I am happy to group the GGC data if the feeling is that would be better - I think we would need to put North, South and Clyde in one group, whether the RHSC is included as well would need to be considered.

I cannot find the missing 'T' spelling error that [REDACTED] spotted if anyone finds it when reviewing please correct it!

[REDACTED]

---

**From:** [REDACTED]

**Sent:** Tuesday, November 18, 2025 9:58 AM

**To:** [REDACTED]

**Subject:** Re: [REDACTED]

Thanks for all the work on this. It was discussed at the senior team meeting this morning at NES (MD/DMD and deans). There is an appreciation of the effort and initiative shown in devising and conducting this survey and a recognition that there is a lot of work to do to tackle sexual misconduct and wider cultural issues. There is however the caution that we discussed ourselves on the call last week. Any action by and STC/TPD is under the auspices of NES and we are keen to ensure that we apply the best methodologies and have a clear understanding of aim and what we will do with outcomes. We also need to ensure that our comms with all stakeholders are considered in advance to avoid miscommunication. This survey has been very helpful in making us all think about these issues.

NES position on this is as follows:

- 1 - I need to ensure that [REDACTED] is happy with the final format of the report and which stakeholders need to be notified before this is circulated back to the STC or any other party.
- 2 - NES will be producing an updated governance paper for STCs over the next few months to provide more guidance but in essence we will be asking that STCs/TPDs/trainees who want to conduct data gathering within the remit of their NES posts submit their plans to the Dean in advance. This will allow NES to provide support for methodology, comms etc and compliance with GDPR.

I think the survey report is well written and formatted and I doubt [REDACTED] will ask for many edits. I do think though that we should take out detail on which levels of seniority responded as saying that eg [REDACTED] offering too much specificity about respondents and risks breaching anonymity.

Can I please take this report away and make a few edits then take it to [REDACTED] before bringing it back?

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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**From:** [REDACTED]

**Sent:** 18 November 2025 09:12

**To:** [REDACTED]

**Subject:** Re: [REDACTED]

Many thanks for sending this through.

I've been trying to review it on my phone and so apologies if I've not picked up on certain things.

However, I would just like to congratulate you on the presentation of the data underlying its purpose but also its scientific approach.

I wonder if the trainees think that in its current form we have stayed true to their desire for investigating harassment in the west Scotland and I wonder if you've had any feedback about the nature of the presentation of the data in terms of concerns about potential watering down from the trainee rep.

That said the data clearly demonstrates themes and is very challenging for the region.

I think from a personal point of view in terms of the way you've presented the data it is anonymised. I'm not sure how you get around the focus of attention at GGC south without contemporary issues drawing parallels and the rumor mill churning. Would further anonymization of the gender of the trainers add anything to the comments re GGC south I can see why you have split GGC but do you think there maybe some kickback in terms of dividing north and south GGC ? You have not divided Clyde or A&A for example

Do you think mentioning the [REDACTED] in itself makes that individual potentially a target for retribution and again would be useful to have [REDACTED] feedback.

I realise you want to get these results out as soon as possible after the survey has closed however I am conscious that we now have an EDI representative on the STC and their comments would be useful.

Going forward as you've discussed. I think it would be useful for other regions in Scotland to either propose a similar survey or certainly for this to be discussed in the forums that you've described and I think for us at NES, this is something we need to help facilitate. Also, in terms of the smaller units, not providing feedback in the national surveys for fear of identification again I think this is something we should try and look at as the survey has identified that no hospital is immune. There was one spelling error that I thought I had picked up, which is a missing letter T from a paragraph which should read "not" instead of "no" but I'll have to send that in another email as cutting and pasting between the formats seems to be beyond me

Apologies

[REDACTED]

Sent from [Outlook for iOS](#)

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**From:** [REDACTED] >

**Sent:** Monday, November 17, 2025 9:06:59 PM

**To:** [REDACTED]

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**Re: orthopaedic trainee forum**

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**From** [REDACTED]

**Date** Tue 11/25/2025 1:17 PM

**To** [REDACTED]

**Cc** [REDACTED]

Dear [REDACTED]

Many thanks for including me in the email trail.

I think we have some holds in for a meeting next week and it will give us time as a group to discuss a cohesive action plan.

Best wishes

[REDACTED]

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**From:** [REDACTED]

**Sent:** 25 November 2025 12:40

**To:** [REDACTED]

**Cc:** [REDACTED]

**Subject:** Re: orthopaedic trainee forum

Hi [REDACTED]

Thanks for you support with this and for you offer to speak to the trainees. I do think this would be very valuable and appreciated by the trainees.

As [REDACTED] mentioned the next regional teaching day is on 20th January. This is attended by the ST3-ST8 trainees. I have spoken with [REDACTED], [REDACTED] who is organising this terms teaching and he is happy to schedule you into the programme to speak to the trainees. He did say that there neurosurgery trainees have also been invited to the terms teaching so they may be in attendance as well but I did not feel this would be an issue and would actually give you the opportunity to give the message to a wider group of trainees. [REDACTED] is putting together the programme tomorrow so if you

would like some time to speak at it let me know and I can ask him to schedule it in and I will organise to attend as well.

The ST1-2 have a separate teaching programme organised by one of our ST5 trainees. The next session is in the afternoon on 8<sup>th</sup> January and it normally runs in one of the university buildings. if you wanted to speak to these trainees as well I can ask for it to be added and again I am happy to attend that as well with you.

I shall reply to the other email thread but should be able to make one to the suggested time slots to catch up next week.

[REDACTED]

---

**From:** [REDACTED]  
**Sent:** Monday, November 24, 2025 1:24 PM  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** Re: orthopaedic trainee forum

Agreed, let me know what suits

[REDACTED]

---

**From:** [REDACTED]  
**Sent:** 24 November 2025 13:14  
**To:** [REDACTED]  
**Cc:** [REDACTED]  
**Subject:** RE: orthopaedic trainee forum

Yes, I would also be eager to meet to discuss options.

[REDACTED]

[REDACTED]

---

**From:** [REDACTED]  
**Sent:** 21 November 2025 20:56

**To:** [REDACTED]

**Cc:** [REDACTED]

**Subject:** RE: orthopaedic trainee forum

Thanks very much for your email, [REDACTED]  
Many thanks also to [REDACTED] for their recent advice and support.

I think that demonstrating a visible and united front to the trainees would be hugely appreciated.  
During the course of the survey I have been approached by some trainees who have shared their upsetting experiences and insisted on them being completely anonymous and confidential. Some did not complete the survey questions as they were so fearful/distrustful.  
For those individuals it would be reassuring for them to realise that concerns have been heard and acted upon.

The next regional teaching days for T&O West of Scotland will be Tuesday 20<sup>th</sup> January 2026 and Wednesday 18<sup>th</sup> February. These are usually held at the Golden Jubilee (all day) and the programme is arranged by [REDACTED], who is a [REDACTED] and our [REDACTED]

[REDACTED] – perhaps you are better placed to advise what the programme looks like on those days and whether [REDACTED] could join?

It does seem that we are all working together towards a common goal to improve the workplace environment for trainees (and in fact for all of us) although it does not take away from the discomfort in learning how far we have to go to make real progress.

Best Wishes  
[REDACTED]

---

**From:** [REDACTED]  
**Sent:** 21 November 2025 13:55

**To:** [REDACTED]

**Cc:** [REDACTED]

**Subject:** orthopaedic trainee forum

Dear both

I hope this message finds you well.

I spoke with [REDACTED] this morning, who brought me up to date with the trainee survey feedback. I recognise that this has not yet been circulated widely, and I am aware of some specific issues that require my attention as [REDACTED]. While I will not go into detail here, please be assured that I am fully briefed on these concerns and am already taking steps to address them.

As we consider how best to tackle the wider issues raised by the survey, I would greatly value the opportunity to attend a trainee forum in the near future. My primary aim is to thank those who have felt able to speak up and to reassure them, as well as others, who have expressed concerns about possible reprisals, that such a culture will not be tolerated in NHSGGC. I am committed to fostering an open and honest dialogue, and I hope my presence can help promote this moving forward. I would be happy to address any concerns directly and answer questions trainees may have. Could you suggest a suitable date and time for me to join you?

I also want to express my sincere appreciation for the actions you have both taken to support our doctors in training, especially those who may not have felt able to speak out previously. It takes courage to share concerns, and I really do value this openness, recognising that this may not be easy for you as individuals.

Please do let me know how I can best contribute, and do not hesitate to reach out if there are specific ways I can support your ongoing work.

With thanks and best regards,

[REDACTED]

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Re: first draft

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From: [REDACTED]

Date: Mon 12/8/2025 11:27 AM

To: [REDACTED]

Hi,

Have we got a webinar link to share out to the trainees with the email? I can get it forwarded on to them today.

The final draft of the report has not been sent on to me yet to distribute to the STC. Is that likely to be finalised for distribution prior to the webinar? If not I would like to let the STC committee know that the webinar link is going to be sent out just so they are aware it is happening.

[REDACTED]

---

From: [REDACTED]

Sent: Wednesday, December 3, 2025 1:22 PM

To: [REDACTED]

Subject: Re: first draft

I think all trainees rather than just GGC.

I will do my very best to be available on 10/12 but I have an all day list so it's a little unpredictable.

Best wishes

[REDACTED]

Sent from [Outlook for iOS](#)

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From: [REDACTED]

Sent: Wednesday, December 3, 2025 8:20:58 AM

To: [REDACTED]

Subject: Re: first draft

[REDACTED]

[Redacted]

[Redacted]

[Redacted]

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**From:** [Redacted]

**Sent:** Sunday, November 30, 2025 6:39:37 PM

**To:** [Redacted]

[Redacted]

[Redacted]

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**From:** [Redacted]

**Sent:** 29 November 2025 08:51

**To:** [Redacted]

[Redacted]

**Subject:** Re: first draft

[Redacted]

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**From:** [Redacted]

**Sent:** Friday, November 28, 2025 5:31:31 PM

**To:** [Redacted]

**Subject:** Re: first draft

[Redacted]

[Redacted]

[Redacted]

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**From:** [REDACTED]

**Sent:** 28 November 2025 13:14

**To:** [REDACTED]

<Colin.Perry2@nhs.scot>

**Subject:** Re: first draft

[REDACTED]

---

**From:** [REDACTED]

**Sent:** 28 November 2025 09:42

**To:** [REDACTED]

**Subject:** Re: first draft

Hi [REDACTED]

Many thanks for drafting - I agree that this is GGCs to own and NES to support.

[REDACTED]

Thanks again.

Best wishes

[REDACTED]

[REDACTED]

---

**From:** [REDACTED]

**Sent:** 27 November 2025 20:10

**To:** [REDACTED]

**Subject:** first draft

Thanks all for your time this evening. I have written a first draft of proposed email; this is very much a partnership but I do feel a need for GGC to own this (mainly in terms of the culture of fear) with your collective support but happy to discuss.

And can you all please check your titles etc at the bottom?

Let me know times the week after next for us to send out invites

Dear...

I am writing to you as a doctor in training in orthopaedics in GGC.

You may have participated in a survey recently which was sent out to all Specialty trainees in orthopaedics through NES.

We are very grateful to all who submitted a response.

Some of the feedback received describes behaviour which has no place in the workplace. [REDACTED],

I would like to reassure you that these are being treated with the utmost seriousness within GGC, and that I will work in partnership with NES to foster the working and training environment you deserve.

I would also like to thank all who had the courage to share their experiences, however difficult this has been for you. To any who may have felt unable to do so, I would like to offer my support and the reassurance that you can speak up safely and confidentially.

I would like to invite you to a webinar, where I will be joined by [REDACTED]

[REDACTED], [REDACTED] ? title, [REDACTED] and [REDACTED]

[REDACTED] discuss any questions or concerns you may have

Thanks [REDACTED] - I think I realised that after I sent it, sorry.

[REDACTED]

Distribution wise, you collectively know better than me so happy to be guided by you as to who is invited

[REDACTED]

---

**From:** [REDACTED]

**Sent:** 28 November 2025 09:42

**To:** [REDACTED]

**Subject:** Re: first draft

Hi [REDACTED]

Many thanks for drafting - I agree that this is GGCs to own and NES to support.

[REDACTED]

Thanks again.

Best wishes

[REDACTED]

---

**From:** [REDACTED]

[REDACTED]

**Subject:** first draft

Thanks all for your time this evening. I have written a first draft of proposed email; this is very much a partnership but I do feel a need for GGC to own this (mainly in terms of the culture of fear) with your collective support but happy to discuss.

And can you all please check your titles etc at the bottom?

Let me know times the week after next for us to send out invites

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I would like to invite you to a webinar, where I will be joined by [REDACTED] to discuss any questions or concerns you may have

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Re: Sexual misconduct survey update

---

From [REDACTED]

Date Sun 12/14/2025 11:44 AM

To [REDACTED]

Dear [REDACTED],  
[REDACTED]

This sounds both ominous and dissapointing.

Do you still need time during regional teaching in January? I am about to distribute the timetable and wanted to check. I had scheduled you in for 20 minutes, but that can be changed.

BW,  
[REDACTED]

---

From: [REDACTED]

Sent: 11 December 2025 12:01

To: [REDACTED]

[REDACTED]

Subject: Sexual misconduct survey update

Hi,

At the last STC meeting, we discussed plans to distribute a survey on sexual misconduct to orthopaedic trainees in order to better understand the extent of the issue within our region. [REDACTED] and I have now reviewed the

survey responses and shared them with the [REDACTED]  
[REDACTED] It is fair to say that the findings make for  
difficult reading.

The results are currently with the NES senior team, who are compiling them into a formal report for distribution. The intention is not to soften or obscure the findings in any way, but rather to ensure that trainee anonymity is fully protected. I will share the report with you all as soon as I am able.

In the meantime, specific comments relating to GGC have already been relayed to the senior team there. In response, [REDACTED]  
[REDACTED], has invited trainees to a meeting next week to provide a forum in which she can reiterate that sexual misconduct has no place in GGC, and to offer trainees the opportunity to raise any concerns or questions directly with her.

[REDACTED]

[Redacted]

**Subject:** Re: NES Survey Feedback Discussion

Hi,

I appreciate that it's nearly Christmas, a busy time when diaries fill up quickly, so I just wanted to check that the initial email below hadn't been missed and to remind you about the Teams meeting this evening at 5pm. I have copied the link to the meeting below in case anyone can't find the original invite.

[Redacted], is very keen to address some of the recent feedback from the sexual misconduct survey about GGC. This will be an opportunity to speak directly with the senior team at GGC, ask questions, raise any concerns you may have, and hear how they plan to improve things going forward.

I appreciate that the results of the survey have not yet been distributed. I am hopeful that we will be able to share them fairly soon, however, they are still being reviewed by NES, and we are awaiting their feedback prior to circulation.

[Redacted]

[Redacted]

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**From:** [Redacted]

**Sent:** Thursday, December 11, 2025 10:50 AM

**To:** [Redacted]

[REDACTED]

[REDACTED]

I am writing to you as a doctor in training in orthopaedics.

You may have participated in a survey recently which was sent out to all Specialty trainees in orthopaedics through NES.

We are very grateful to all who submitted a response.

Some of the feedback received describes behaviour which has no place in the workplace. As [REDACTED] for Acute services for Greater Glasgow & Clyde, I would like to reassure you that these are being treated with the utmost seriousness within GGC, and that I will work in partnership with NES to foster the working and training environment you deserve.

I would also like to thank all who had the courage to share their experiences, however difficult this has been for you. To any who may have felt unable to do so, I

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Re: Sent on behalf of [REDACTED] - WoS Trauma and Orthopaedic training programme allegations of sexual misconduct

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From [REDACTED]

Date Thu 1/22/2026 8:55 AM

To [REDACTED]

Cc [REDACTED]

Dear [REDACTED]

Many thanks for your email.

The sequencing and timing of what we share I think is important - the generic SBAR was shared ahead of the meeting [REDACTED] had with the resident doctors so that no MD/ DME was blindsided.

Next steps are the STC being involved and encouragingly [REDACTED] and I have been contacted already [REDACTED] [REDACTED] to discuss further.

The Notification of Concern will go through quality management processes, including the Medical Directorate Quality and Safety Group and we are looking to undertake a programme visit in the spring.

This is the start of the process and it would be good to have a call after the STC to catch up if that was possible.

I would be happy to have a call to discuss.

Best wishes

[REDACTED]

[REDACTED]

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From: [REDACTED]

Sent: 21 January 2026 18:49

To: [REDACTED]

Cc: [REDACTED]

Subject: RE: Sent on behalf of [REDACTED] - WoS Trauma and Orthopaedic training programme allegations of sexual misconduct

Dear All

May I please seek clarification of the email below, sent on behalf of [REDACTED] to MDs and DMEs?



**From:** [REDACTED]

**Sent:** 27 January 2026 09:05

**To:** [REDACTED]

**Cc:** [REDACTED]

**Subject:** RE: Sent on behalf of [REDACTED] - WoS Trauma and Orthopaedic training programme allegations of sexual misconduct

[REDACTED]

Thank you for making the time to attend the [REDACTED] call last night. It was very much appreciated.

The breadth and depth of the discussion generated was proportionate to the strength of feeling in relation to the described events.

Here is my summary of discussions:

- The situation is unequivocally unacceptable and needs action
- There is a challenging situation that is being carefully managed in one Board that may make things more complex if the data are widely shared at present
- There will be a QM round of visits in April to the Boards in question and this would be a timely opportunity to share the data
- The MD group will continue to work with NES on these matters and remain clear on the roles and responsibilities outlined in the communication.

I hope this is useful. I'll share with the MDs to cascade to the DMEs in the Board.

[REDACTED]

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updated minutes

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From [REDACTED]

Date Fri 2/13/2026 5:39 PM

To [REDACTED]

[REDACTED]

Hi,

[REDACTED] were both on the teams call. The changes suggested are not wild and think still reflect what actually happened in the room. I have highlighted them in yellow on the document.

- They don't want the units named that had a notification of concern. This matches the SBAR so I guess is perhaps not surprising.
- The paragraph about the delay to the results coming out we have re-phrased as there was concern it suggested NES were withholding results but I think it still emphasises that it took some time for the results to be released and the frustration with that.
- the sharing the results with other TPDs has been changed to sharing the SBAR with the other TPDs so its clear what is being shared.

I updated the minutes as we discussed it during the meeting but wanted to send them on to you to look at before I include [REDACTED] for final confirmation.

We did also discuss the code of conduct. [REDACTED] thinks it probably won't be agreed at NES as with GMC etc there is already effectively a code of conduct. She did say that the individual health board DMEs might be interested in using it. I did suggest that maybe the trainees would want to take it on themselves and then it would not be a NES thing. However [REDACTED] pointed out they might (appropriately) feel it is not them that needs the code of conduct.

I highlighted [REDACTED] work in all this and not getting credited as it keeps getting pulled from her. [REDACTED] is going to get her involved in the STS sexual misconduct question review that is happening in a few months. I thought that was really good thing to get [REDACTED] involved with and [REDACTED]

Happy to chat about it if that is easier than emails!

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**From:** [REDACTED]

**Sent:** Thursday, October 2, 2025 5:51:21 PM

**To:** [REDACTED]

**Cc:** [REDACTED]

**Subject:** Very sensitive T&O training situation

Dear [REDACTED]

[REDACTED] and I have recently been made aware ([REDACTED] [REDACTED]) of inappropriate behaviour towards our resident doctors (and other members of NHS staff.)

Although the problem may be more widespread than we currently know, the majority of these shocking episodes appear to be centred in one particular unit in [REDACTED]

We would appreciate 20 mins of your time (relatively urgently) to clarify the correct pathways for taking this further.

Many thanks

[REDACTED]

[REDACTED]

[REDACTED]

[Redacted]

[Redacted]

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**From:** [Redacted]

**Sent:** 17 February 2026 12:48 PM

**To:** [Redacted]

**Cc:** [Redacted]

**Subject:** West of Scotland sexual misconduct survey - SBAR

Hi,

I am not sure whether you are all aware, but within the WoS we recently carried out a survey exploring trainees' experiences of sexual misconduct during orthopaedic ST training. This work arose following a free-text comment in last years national training survey relating to [Redacted].

As the survey was conducted by the STC, we shared the findings with NES, who have since produced an SBAR and action plan. I felt it would be helpful to share the attached SBAR so that we can learn collectively, as this issue is unlikely to be unique to the WoS. Indeed, the findings are broadly consistent with those described in the national Breaking the Silence report.

The survey was distributed in October via an emailed link. No questions were mandatory, as we were conscious that some trainees might not feel

comfortable responding to certain questions. Engagement was excellent, with a response rate of 70%.

The results showed

- 25% of trainees reported having personally experienced sexual misconduct
- 27% reported having witnessed it.
- Free-text responses highlighted recurring themes, including sexualised language, misogynistic “banter”, boundary violations, abuse of power, and intimidation. (While the full dataset contains more detail, the findings have been deliberately summarised to protect participant anonymity.)
- 5% of those affected reported their experiences formally. Identified barriers to reporting included fear of repercussions, lack of confidence that reporting would lead to meaningful outcomes, and uncertainty about available reporting routes.

I should also highlight that this exercise has been a significant learning experience. NES advised that there are governance processes and formal steps that should have been followed, given that this was undertaken as an STC project. Any future surveys (in any region) would therefore need to be conducted in line with their governance and oversight frameworks. That said, while imperfect, this survey still provides a valuable snapshot of the issue within our region.

I would be keen to hear about any successful approaches or interventions you have implemented in your regions to address this issue, particularly those that could be shared, adapted, or replicated. As we have previously discussed the idea of meeting a few times each year, this topic could be included in those discussions when they take place.



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Re: NES action plan following WoS T&O survey results

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From [REDACTED]  
Date Tue 2/24/2026 7:16 PM  
To [REDACTED]

Thanks for this [REDACTED]  
[REDACTED]

Sent from [Outlook for iOS](#)

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From: [REDACTED]  
Sent: Tuesday, February 24, 2026 5:15:02 PM  
To: [REDACTED]  
[REDACTED]  
Subject: NES action plan following WoS T&O survey results

Dear All

Following on from our recent calls - I have a couple of updates to share.

Joint statement - from a NES perspective we are in the process of drafting a statement which we think should be from NES and the WoS Health Board Medical Directors. [REDACTED] and I have an initial draft which is currently with NES comms and will share with WoS HB Medical Directors and all on this email trail for comments prior to circulating more widely.

Programme visit - a programme visit will be undertaken by the NES quality management team - this will be around May / June given timelines required around notice etc.

Suite of resources for HBs to use - [REDACTED] and I are linking in with [REDACTED] to look at what NES can share with HBs to support them. The HBs will also have resources which will be helpful and we will look at how these are also shared across the West of Scotland HBs.

Code of conduct - We know it is the HBs who need to provide a safe environment for all staff therefore this would be for HBs to decide how to proceed. There is a once for Scotland code of Conduct, each HB will have a code of conduct and Good Medical Practice gives very clear guidance around conduct. I have taken some HR advice about the role of NES and while NES can support ongoing work within the HBs it would not be for NES to deliver this element.

I have asked [REDACTED] to help review the sexual misconduct questions within the Scottish Trainees Survey and look forward to a discussion about how we can manage the STS to support confidential reporting.

I have had a conversation with [REDACTED] and he was supportive of [REDACTED] raising awareness within the department in [REDACTED]. Thank you to [REDACTED] for offering to do that.

I hope this all feels like we are progressing in the right direction.

Many thanks

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Re: Sexual Misconduct Survey Results

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From  
Date

[Redacted]

Hi all,

I just wanted to highlight a typo that has been pointed out to me in the presentation. It should say 52 responses not 54.

[Redacted]

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From: [Redacted]

Sent: Tuesday, January 20, 2026 6:30 PM

To: [Redacted]



**Subject:** Sexual Misconduct Survey Results

Hi,

I appreciate that not everyone was able to attend the regional teaching session today to hear the presentation on the sexual misconduct survey, so I wanted to share the slides along with a summary of the key findings.

### **Key findings**

- 70% response rate
- **25%** of respondents have **personally experienced** sexual misconduct
- **27%** of respondents have **witnessed** sexual misconduct
- free text comments reported behaviours including: sexualised language, misogynistic 'banter', boundary violations, abuse of power and intimidation
- only 5% of those affected had reported the misconduct
- behaviours span multiple health boards and staff groups

While the findings make for difficult reading, the data are extremely valuable. They give us a clear picture of the issue within our region and provide an evidence base from which to move forward.

Our focus now is on how we address this. There will be several parallel strands of work:

- NES has developed an SBAR in response to the survey, which has already been shared with Medical Directors and will be presented to the West of Scotland Orthopaedic STC next week.
- At next week's STC meeting, the Training Committee (which includes BOTA and trainee representative) will review the results in detail and agree a plan of action.
- On an individual level, I strongly recommend the bystander training offered by the RCPSG, which provides practical tools to respond if you witness misconduct.

[Active Bystander Training for Tackling Sexual Misconduct in Healthcare | RCPSG](#)

I feel strongly that trainees must have a clear voice in shaping the response to these findings. If you have any suggestions, reflections, or comments on the survey results, please do get in touch.

The content of the survey is sensitive. If anyone would like to discuss the findings, or wishes to raise or report sexual misconduct, please know that both myself and Miss Murnaghan are very happy to speak with you in confidence. The Trainee Development and Wellbeing Service also has resources and can offer support if you do not feel comfortable raising concerns directly within the specialty.

[Sexual misconduct resources | Scotland Deanery](#)

Finally, thank you for your honesty and openness in completing the survey. I recognise that the delay in sharing the results has caused frustration and may have led to uncertainty or lack of confidence about how the findings were being addressed. Please be assured that all responses have been taken very seriously and carefully considered. We are committed to making meaningful improvements to ensure a safe, respectful, and supportive training environment, and I look forward to updating you with a more detailed action plan following our STC meeting.

