



Whistleblowing

If you require assistance to read or understand this policy, please let your manager or HR know as translation, interpretation, Braille or a signing service can be made available.

Directorate:	Governance and Compliance		
Lead Officer:	Louise Packer		
Approved by:	Performance Committee		
Approval Date:	15.12.21	Review Date:	15.12.26

Commented [LP1]: However, please note that staff have the right to raise an alert directly with the Safeguarding team or with the Corporate Safeguarding Lead should they feel the need to do so, following the procedure set out in the Response Whistleblowing Policy.

Check the above is in the policy

Change History

Version	Issue Date	Originator/Modifier	Reason for Change
1		Louise Packer	Required review
2			
3			
4			

Policy Statement, Aims and Principles

In line with organisational values, Response aims to provide a high level of service to residents, to operate safely and efficiently and to care for the wellbeing of employees.

All organisations face the risk of things going wrong. By promoting and supporting an open culture with the highest standards of honesty and accountability, all employees and stakeholders are encouraged to raise issues which are of concern at work. By knowing about issues of concern at an early stage, steps can be taken to reduce or eliminate risk to safeguard the interests of all staff, clients, and other stakeholders.

Response recognises that raising concerns can be one of the most difficult and challenging things to do in a work environment. Under this policy you may come forward with legitimate concerns *without* fear of being blamed or of any reprisal. You *will not* be disadvantaged for raising what you consider to be a legitimate concern.

This policy is designed to enable employees of the organisation to raise concerns internally to the right person and to disclose information which the individual believes shows wrongdoing e.g., malpractice or impropriety in order that the values of the organisation are upheld. As a result, if a concern is raised, it will be dealt with positively, quickly, and reasonably.

Scope

This policy applies to all persons working for us or on our behalf, including trustees, employees at all levels whether permanent or temporary, director's officers, agency



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workers, seconded workers, volunteers, work placements, apprentices, agents, contractors, external consultants, third party representatives, and business partners.

It must be noted that this policy and associated procedures should not be used in relation to any employee grievances concerning terms and conditions of employment or other issues regarding working relationships as defined and managed in the Response grievance policy.

Definition of Whistleblowing

Whistleblowing is the term used when an employee passes on information concerning wrongdoing which is called “making a disclosure” or “blowing the whistle”. The wrongdoing will typically (although not necessarily) be something they have witnessed at work.

To be covered by whistleblowing law, an employee who makes a disclosure must reasonably believe two things:

- They are acting in the public interest. This means that personal grievances and complaints are not usually covered by whistleblowing law.
- An employee must reasonably believe the disclosure tends to show past, present, or likely future wrongdoing falling into one or more of the following categories:
 - Unsafe service users care
 - Inadequate training for employees
 - Lack of, or poor response, to a service users safety incident
 - A failure to comply with any legal obligations
 - A criminal offence that has been, is being or is likely to be committed
 - Unauthorised or inappropriate disclosure, misuse, or loss of confidential, personal and/or sensitive information
 - A miscarriage of justice
 - Bribery or financial fraud
 - Risk or damage to the environment
 - A danger to the health and safety of employees or others
 - Attempts to suppress or hide information or evidence relating to a wrongdoing in any of the areas above.

SAFEGUARDS REGARDING THE DISCLOSURE

The Public Disclosure Act 1998 (The Act) provides protection for workers who reasonably believe that they are acting in the public interest, where the concern (disclosure) is covered under one of the areas above. The concern can be about an incident that happened in the recent past, is happening now or that you believe is likely to happen in the near future. Furthermore, The Act makes it unlawful to dismiss, discipline or victimise a worker who “blows the whistle”.

Protection - this policy is designed to offer protection to those employees of Response who disclose such concerns provided the disclosure is made:

- in good faith
- in the reasonable belief of the individual making the disclosure that it tends to show malpractice or impropriety and if they make the disclosure to an appropriate person. It is important to note that no protection from internal disciplinary procedures is offered to those who choose not to use the procedure. In an extreme case, malicious or wild allegations could give rise to legal action on the part of the persons complained about.

Response will not tolerate the harassment or victimisation of anyone who is honestly raising a concern. Victimisation of someone because they are speaking up would be a breach of our values and could result in disciplinary action.

Remember that if you are a healthcare professional you may have a professional duty to report a concern. If in doubt, please raise it.

Confidentiality - Response will treat all such disclosures in a confidential and sensitive manner. The identity of the individual making the allegation may be kept confidential so long as it does not hinder or frustrate any investigation. However, the investigation process may reveal the source of the information and the individual making the disclosure may need to provide a statement as part of the evidence required.

Anonymous Allegations - this policy encourages individuals to put their name to any disclosures they make, especially considering the protection afforded to any individual raising a genuine concern. However, there may be special or unusual circumstances where an individual considers it necessary to make an anonymous disclosure.

Concerns expressed anonymously can at times be more difficult to investigate as there is not the option to seek further information during an investigation and claimants cannot be contacted to discuss the outcome. However, this should not act as a barrier to making an anonymous disclosure if any individual feels that this is the best course of action for them.

Untrue Allegations - where an individual makes an allegation in good faith, which is not confirmed by subsequent investigation, *no* action will be taken against that individual. In making a disclosure the individual should exercise due care to ensure the accuracy of the information. If, however, an individual makes malicious or vexatious allegations, and particularly if he or she persists with making them, disciplinary action may be taken against that individual.

The Standard Operating Procedure (SOP) provides detail on:

- how to raise a concern
- to whom a concern should be raised

- action taken to investigate a concern including timescales
- how you will be kept up to date throughout the investigations
- how to appeal if you disagree with the outcome
- Support that will be proffered to anyone making a disclosure
- Guidance to support the effective handling of a disclosure

Additional support

If you need more support, you can contact the Protect advice line either online or via telephone. This is a charity which offers free expert advice to whistle-blowers. Contact information can be found here <https://protect-advice.org.uk/>

Disclosure to the media

It is advised that internal procedures surrounding whistleblowing should be followed before any disclosures to the media are made. External disclosures made that have not first followed internal procedures may be considered an unreasonable action under The Act and can potentially lead to disciplinary proceedings.

If you feel that your concern is not being dealt with properly through Responses internal Whistleblowing procedures, we recommend seeking legal advice before making any further disclosures as The Act only affords protection to whistle blowers in certain circumstances.

Responsibility, Delegation and Accountability

Who is responsible for what within this policy:

The Governance and Compliance team will have overarching responsibility for:

- ensuring this policy any SOP are upheld
- receiving, documenting, monitoring, and reporting on all whistleblowing concerns
- delegating responsibility to appropriate members of the senior management team, including the executive, to investigate
- Keeping the CEO and COO updated and drawing to their attention any concerns should they arise
- Apprise the Performance Committee and Board with key findings, actions and intended outcomes for future monitoring.

Investigation Managers are responsible for:

- Undertaking necessary and required training to undertake investigations and report writing
- Undertake investigations following Response's policy and procedure to ensure legislation and vales are always adhered to
- compile a report of findings and recommendations that can and will be shared with the governance and compliance team, executive and Board of Trustees
- seeking advice from CEO, COO and the governance and compliance team if they have any concerns around process or other aspect of the investigation

SMT, operations managers and management teams are responsible for:

- sharing and discussing this policy at team, one-to-one and other appropriate meetings
- supporting any investigation by providing the investigating manager with required information and time to meet with any staff member, resident or other stakeholder as needed
- reporting any other issues that relate to the disclosure that may increase risk or potentially hinder an investigation
- provide staff teams and clients with support and/or referrals to other support networks and agencies if needed or seek guidance from the Head of People

Training and Staff Support

Any person identified as being responsible for managing whistleblowing investigations and reporting will be provided with the appropriate training and ongoing development which may also include coaching and mentoring.

Training will be accessed through the Learning and Development Manager when any need is identified during the process or because of the outcome of any investigation.

Status of this Policy

This policy does not give contractual rights to any employees. Response reserves the right to make amendments to or change the content of the policy at any time. Any changes will be communicated to all workers.

Monitoring

Monitoring of incidents raised under this policy will be via a Whistleblowing Incident Log. This will be reviewed monthly and reports provided to the senior management team, performance committee and board on monthly/bi-monthly basis for monitoring of themes and trends, action plans and expected outcomes.

Related Policies and Procedures

Bullying and Harassment Policy
Complaints Policy
Duty of Candour Policy
Grievance Policy
Confidentiality Policy
Safeguarding Policy

Legislation and Guidance

Public Interest Disclosure Act 1998

From the Government website:

[Whistleblowing: guidance and code of practice for employers - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

[Whistleblowing for employees - GOV.UK \(www.gov.uk\)](http://www.gov.uk)



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[Protect \(formerly Public Concern at Work\) Speak up stop harm - Protect - Speak up stop harm \(protect-advice.org.uk\)](https://protect-advice.org.uk)
[Speak Up \(NHS/Adult Social Care\) -speakup@socialenterprisedirect.org.uk](mailto:speakup@socialenterprisedirect.org.uk)

Compliance

Safe	S2: How are risks to individuals and the service managed so that people are protected, and their freedom is supported and respected.
Well-led	W1: How does the service promote a positive culture that is person-centred, open, inclusive, and empowering.

Record Keeping

Details of all concerns raised, and the subsequent investigation will be retained for 7 years. The purpose of this is to ensure that a central record is kept which can be cross-referenced with other complaints to monitor any patterns of concern and assist Response in monitoring the effectiveness of this policy.

GDPR Statement

Response Organisation manages all of the data referred to in this policy and supporting documents in accordance with the General Data Protection Regulations 2018. For more information on how we handle information, please see our Privacy Policy on our website.

Equality, Diversity and Human Rights

Response recognises some people experience disadvantage due to their socio-economic circumstance, employment status, class, appearance, responsibility for dependents, unrelated criminal activities, being HIV positive or with AIDS, or any other matter which causes a person to be treated with injustice.

Response is committed to ensuring that no person or group of persons will be treated less favourably than another person or group of persons and will carry out our duty with positive regard for the following strands of equality; Age, Disability, Gender, Race, Gender-reassignment, sexual orientation, Religion and/or Belief, Civil Partnership and Marriage, Pregnancy and Maternity.

Response will also ensure that all services and actions are delivered within the context of Human Rights legislation. Staff and others with whom Response works with, will adhere to the central principles of the Human Rights Act (1998)

Review

The effectiveness of this Policy is regularly monitored by the Governance and Compliance Directorate to determine whether any improvements are needed and is reviewed on a 5 yearly basis.