

'Whistle-Blowing' Policy & Procedure. (Incorporating 'Freedom to Speak Up' Guardian)

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Version Control

Version 1	24/08/18	Policy Creation
Version 2	13/03/19	Updated Contact number for “Public Concern at Work”
Version 3	07/05/19	Updated number for new FTSU Gaudian at Frimley Health

SECTION 1 - POLICY

Policy Statement

Southern Ultrasound is committed to maintaining the highest levels of probity and behaviour amongst its workforce, and takes very seriously any form of malpractice that is identified or uncovered. Our Code of Conduct for Employees sets out the standards expected from all our employees, providing staff with a comprehensive frame of reference. As an organisation, our values are to be fair, helpful and authoritative and we expect our employees to work in accordance with these values.

Employees who have concerns are able raise disclosures about wrong doing under this policy, so that problems can be identified and resolved quickly. Where employees raise concerns in good faith and reasonably believe them to be true, they will be protected from possible reprisals or victimisation. If employees raise a genuine concern under this policy, they will not be at risk of losing their job or suffering any form of retribution as a result. Provided they are acting in good faith, it does not matter if they are mistaken.

However, in making a disclosure the individual should take care to ensure the accuracy of the information. This assurance cannot be extended to someone who it is shown has raised untrue matters. Employees should give this careful consideration and take advice prior to making a complaint. If it can be shown that the employee who raises the disclosure has done so vexatiously, mischievously, maliciously or for personal gain, disciplinary action may be taken.

This policy and procedure provides a mechanism for employees to raise serious concerns about wrongdoing and get feedback on any action taken as a result. Employees are encouraged to feel confident in raising such concerns. The procedure also provides details of how to pursue any appeal, if an employee is not satisfied with any action taken.

Background

The Public Interest Disclosure Act 1998 protects employees against detrimental treatment or dismissal as a result of any disclosure by them of normally confidential information in the interests of the public. The Enterprise and Regulatory Reform Act 2013 strengthened protection of 'whistle blowers'. Southern Ultrasound' whistle-blowing policy and procedure, as set out here in, is in line with these Acts.

A disclosure will qualify for protection if the concern relates to unlawful conduct, financial malpractice or dangers to the public or the environment.

Scope and principles

All employees of Southern Ultrasound may use this policy. This includes permanent and temporary staff. It also covers agency staff and staff seconded to the organisation.

Contractors working for the Southern Ultrasound may also use this policy in order to make the Company aware of any concerns that the contractor's staff may have with regard to any contractual or other arrangement with Southern Ultrasound or its undertakings.

It is not intended to be used where other more appropriate procedures are available, for example the Grievance Procedure, where an individual is aggrieved about their personal position. Rather the Whistle-blowing policy is primarily for concerns where the interests of others or of the organisation itself are at risk.

If an individual asks for their identity to be protected, it will not be disclosed without their consent. Meetings may, if necessary be arranged off-site. If, due to the nature of the disclosure, Southern Ultrasound is not able to resolve the concern without revealing their identity (for instance because the employee's evidence is needed in court), this will be fully discussed with the employee to agree how the matter can proceed. Southern Ultrasound will make effort to protect employee confidentiality, but this cannot be guaranteed because the content of the complaint, at the very least will need to be revealed if any action is to be taken; this may in turn identify the source. If employees do not disclose who they are, ie they make an anonymous disclosure, the matter will be dealt with in accordance with the procedure, although it may be more difficult to look into the matter or give feedback.

Accordingly, while **Southern Ultrasound** will consider anonymous complaints, this policy is not designed to deal with them.

If an employee raises a concern and then wishes not to proceed with the disclosure, the manager or 'Freedom To Speak' Up Guardian receiving the disclosure will be obliged to consider whether the matter should be investigated because of the potentially serious nature of the issue. The employee will be informed of this decision.

Where an employee has been made subject to a Whistle blowing disclosure, and following an investigation there is a case to answer the matter will be dealt with through the Southern Ultrasound policies and procedures.

Employees who are unsure about whether to use this policy and procedure or require independent advice at any stage, may contact:

- the National Whistleblowing Helpline (0800 724 725)
- the charity 'Protect' (0203 117 2520) for legal advice
- the independent charity Public Concern at Work on 020 3117 2520. Its lawyers can give you free confidential advice at any stage about how to raise a concern about serious malpractice at work

If an employee takes the matter outside Southern Ultrasound, they should ensure that no disclosure of confidential information takes place, as the Public Interest Disclosure Act does not provide blanket protection and could leave employees vulnerable to disciplinary or other action, if they disclose confidential information in circumstances not covered by the Act.

If the disclosure is shown to have been malicious, the manager appointed to investigate may recommend an investigation under the Disciplinary Procedure against the complainant.

While Southern Ultrasound cannot guarantee that matters will be responded to in the way employees might wish, a commitment is made to handle the matter fairly and properly.

SECTION2 - PROCEDURE

Making a disclosure – initial action

As soon as an employee becomes reasonably concerned about a matter, they should first raise the issue with their line manager (the "receiving manager"), unless the disclosure concerns them, in which case the employee should contact the Company's Freedom to Speak Up (FTSU) guardian – Company Director, Kevin Rendell.

All managers have a responsibility to act on the concerns raised, passing full details on to the company's FTSU Guardian, in accordance with this procedure. Failure to do so in accordance with the policy and procedure may lead to disciplinary action.

Alternatively, if the matter affects the company's activities for Frimley Health NHS Foundation Trust, staff can contact the Trust's FTSU Guardian – Steve Roots – on 07775 547 175 or steve.roots@nhs.net.

Concerns may be raised verbally or in writing and should give the background, the nature of the malpractice that is alleged; relevant dates where possible; the reasons for the concern and the names of individuals against whom the allegations are made.

If the concern is raised verbally, then the person receiving the information should put in writing, an outline of the matters raised, and this should be confirmed in writing to the employee. This should be done within 5 working days.

Once a concern is raised the receiving manager, should report the matter to the Company's FTSU Guardian who will appoint an appropriate "investigating manager". This could be receiving manager or the FTSU guardian or another appropriate individual.

If the matter is dealt with under the Whistle blowing policy then the employee will then be informed of the name of the investigating manager and how they can be contacted.

The investigating manager will then inform the employee in writing of the process to be followed.

The investigating manager will also inform any employee against whom allegations are made of the allegations. This will normally be done in writing within ten working days. This may, however, be delayed if it is likely to jeopardise the investigation.

Handling a disclosure

The investigating manager will be responsible for deciding whether there are grounds for proceeding further with the case. Potential action that the investigating manager could take includes a clarification of the facts, a more formal investigation or the employee may be advised that the matter is better dealt with under another Southern Ultrasound policy.

Where appropriate, the matters raised may:

- be investigated by the investigating manager
- be referred to the police

Within four weeks of a concern being raised, the investigating manager will write to all relevant parties including the FTSU Guardian:

- indicating how the Company proposes to deal with the matter, and where an internal investigation is still ongoing, giving an estimate of how long it will take to provide a full response

Any internal investigation should take no longer than three months to complete from the date of receipt of original disclosure. As part of the investigation, the investigation manager will decide:

- whether disciplinary action be taken against any employee
- whether changes should be recommended to Beehive Solution procedure
- whether any other action should be recommended

These will be detailed in a final report

The investigating manager will send a copy of the final report, including recommendations, to the Company's FTSU Guardian, who will consider the recommendations and determine what action, if any, to take. The investigating manager will also give a response in writing to the employee who made the disclosure as soon as possible after the completion of the investigation.

This response will include the outcome of the investigation and what action, if any, is to be taken, although precise details may not be given where there are legal constraints, or it would infringe a duty of confidence owed by us to someone else or where there are business reasons for not doing so.

The individual who is subject to the disclosure will also be informed of the outcome in writing and what action, if any, is to be taken as soon as possible after the completion of the investigation.

Appeal

An employee who raises a concern and is not satisfied with the outcome or action proposed may appeal against the decision to a more senior manager within the Southern Ultrasound. An appeal should be made within five days' of receipt of the outcome letter.

The Directors will determine who should hear the appeal. The appeal should be completed within one month.

An employee who is subject to action arising from a whistle blowing disclosure will be able to make representations, within five working days, to Board of Directors about the outcome of the report. The Board of Directors will consider these representations and may direct further investigation or review as appropriate.

Recording and monitoring

The Company will maintain a register containing all concerns that are brought to the organisation's attention. These will be reported on a quarterly basis to the Board.

All records will be treated as confidential and kept no longer than necessary in accordance with the Data Protection Act 1998. Individuals will have the right to request and have access to certain personal data. Employees will be given copies of meeting records, although some information may be withheld to protect a third party.

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POLICY STANDARDS

Monitoring processes

The Board of Directors monitor HR issues, via reports from the Service Leads, presented at least annually to the Board Meeting.

Monitoring of this policy, together with its implementation, shall be performed by the CG Lead.

Equality Impact Assessment

An Equality Impact Assessment has been performed on this policy and procedure. The EIA demonstrates the policy is robust; there is no potential for discrimination or adverse impact. All opportunities to promote equality have been taken.

		Yes/No	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	Race	No	
	Ethnic origins (inc. gypsies and travellers)	No	
	Nationality	No	
	Gender	No	
	Culture	No	
	Religion or belief	No	
	Sexual orientation including lesbian, gay and bisexual people	No	
	Age	No	
	Disability - learning disabilities, physical disability, sensory impairment and mental health problems	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	NA	
4.	Is the impact of the policy/guidance likely to be negative?	NA	
5.	If so can the impact be avoided?	NA	
6.	What alternatives are there to achieving the policy/guidance without the impact?	NA	
7.	Can we reduce the impact by taking different action?	NA	

Training Requirements

Our Clinical Governance Lead has received training suitable for role.

Distribution and Awareness Plan

All staff are made aware of the policy as part of their induction training. If there are any significant changes to the policies that affect the way in which staff initiate or respond, these are communicated to them via team briefs and staff meetings.

A copy of the policy is available to all staff via the Policy sub-folder of the Company's on-line Governance Framework folder, and can be accessed 24/7 from any location with Web Access. A hard copy version is retained at all sites of operation.

Approval & Review

This policy has been approved by the undersigned and will be reviewed annually and any time there is a change in the Law, Guidance or Best Practice Recommendations.

These Directors report to the Board of Directors periodically, with reviews and recommendations.

The CG Lead and IG Lead will delegate duties to the Service Leads, where appropriate, but retain ultimate responsibility for audits, assessments and other delegated work.

Policy Created: 12/04/18

Last Reviewed & amended: v3 07/05/19

Kevin Rendell Director

