

PUBLIC INTEREST DISCLOSURE POLICY AND PROCEDURE

Policy Statement

1. Employees are often the first to realise that there may be something wrong within the University. However you may not express your concerns because you feel that speaking up would be disloyal to your colleagues or to the University. You may also fear harassment or victimisation. In these circumstances it may be easier to ignore the concern rather than report what may be just a suspicion of malpractice.
2. The University is committed to the highest standards of openness, probity and accountability and encourages its members of staff to raise genuine concerns about malpractice at the earliest practicable stage. Malpractice within the University is taken very seriously.
3. This procedure is to provide safeguards to enable you to raise concerns about malpractice in connection with the University. The aim is to provide a rapid mechanism under which genuine concerns can be raised internally without fear of repercussions to the individual.
4. The procedure also seeks to balance the need to provide safeguards for employees who raise genuine concerns about malpractice against the need to protect other members of staff, members of the Governing Body and the University against uninformed or vexatious allegations which can cause serious difficulties for innocent individuals.
5. This policy is designed to comply with the Public Interest Disclosure Act 1998, as amended and interpreted by the courts from time to time. The Act protects staff who raise concerns about malpractice, as long as they satisfy the conditions contained in the Act. For further information, please contact the Human Resources Department.

Malpractice

6. The following are examples of malpractice:
 - 6.1 criminal offences;
 - 6.2 failure to comply with a legal or regulatory obligation;
 - 6.3 miscarriage of justice;
 - 6.4 endangering the health and safety of an individual;
 - 6.5 endangering the environment;
 - 6.6 fraud/financial irregularities;
 - 6.7 concealment of any of the above.

Procedure

If you want to raise a concern about any of the above, please use the procedure set out below. Please note that the University has a staff grievance policy to enable you to raise grievances concerning your employment.

7. The procedure applies to disclosure by an individual (described in this procedure as “the Discloser”) who is an employee or agency contract worker employed or engaged by the University and who has grounds to believe that malpractice has occurred, is occurring or is likely to occur in the University (whether on the part of another employee or any other person or persons).
8. Grounds for belief will be more than just a possibility or risk of malpractice – the Discloser will need to set out what he or she thinks are the facts and why he or she believes that those facts show malpractice. The disclosure must be made in good faith which means that the Discloser’s belief must be honest and not motivated by personal antagonism.
9. The Discloser shall as soon as practicable disclose in confidence the grounds for belief of malpractice to the Director of Human Resources, or the University Secretary, or the Assistant Director of Human Resources, all of whom have been designated by the University as members of staff with appropriate experience and standing to handle such disclosures. Allegations against the Vice-Chancellor should be referred to the Chair of the Board of Governors, who will make arrangements for the investigation following the principles of this procedure. Each of the above-named persons will now be described in this procedure as the “Designated Officer”.
10. Any disclosure shall be in writing and the Discloser should provide as much supporting evidence as possible about the disclosure and the grounds for the belief of malpractice.
11. On receipt of the disclosure the Designated Officer will offer to interview the Discloser in confidence, such interview to take place as soon as practicable after the initial disclosure. The Discloser may be accompanied by a recognised trade union representative or work colleague at the interview. The Designated Officer may be accompanied by a member of staff to take notes.

Further steps

12. As soon as practicable the Designated Officer will recommend what further steps are to be taken. Such recommendations may (without limitation) include one or more of the following:
 - (a) the matter be reported to the police;
 - (b) the matter be investigated further internally by a member of the University’s senior management or by external auditors or investigators appointed by the University;
 - (c) the Discloser be given the opportunity to seek redress through the grievance procedure.
13. A recommendation of no further action may be made if the Designated Officer is:
 - (a) aware that the matter is already subject to legal proceedings, or has already been referred to the police or other public authority;

- (b) aware that the matter is already (or has already been) the subject of proceedings under one of the University's other procedures;
 - (c) satisfied that the Discloser is not acting in good faith;
 - (d) satisfied after investigation that the malpractice has not occurred or is not likely to occur;
 - (e) satisfied that the allegation appears to be frivolous or vexatious.
14. Any recommendations under this procedure will be made by the Designated Officer to the Deputy Vice Chancellor (or his/her nominee) unless it is alleged that the Deputy Vice Chancellor is involved in the alleged malpractice in which case the recommendations will be made to the Vice-Chancellor. If the allegations are made against the Vice-Chancellor, the recommendations will be made by the Chair of the Board of Governors to a panel of three from the Employment and Finance Committee of the Governing Body. In any event the allegations will be made without identifying the Discloser save as outlined below. The recipient of the recommendation(s) shall implement the recommendation(s) except to the extent that in the view of the recipient there are good reasons for not doing so.
15. The Discloser will be informed in writing through the Designated Officer of the steps taken or that no steps are to be taken. In both cases, reasons for the decision will be given.

External disclosure

16. If having followed the procedure the Discloser is not satisfied with the steps taken the Discloser may raise the matter confidentially with the police or an appropriate public authority. A non exhaustive list of such bodies can be obtained from the Designated Officer.

Safeguards

17. The Discloser will not, where practicable, be identified unless the Discloser consents in writing or there are grounds to believe that the Discloser acted maliciously. In the absence of consent or those grounds the Discloser will only be identified:
- (a) if this is a legal obligation;
 - (b) if the information is already in the public domain;
 - (c) to a professionally qualified lawyer for the purposes of obtaining legal advice; or
 - (d) where it is necessary as part of a proper investigation.

However, whilst all practical steps will be taken to avoid disclosing the identity of the Discloser, the Discloser must accept that in some circumstances it may inevitably be possible to deduce his identity as the discloser of the information. Confidentiality of the Discloser's identity cannot therefore be guaranteed.

18. Any documentation (including computer files and disks) kept in relation to the matter will be kept secure. This will ensure that as far as practicable, any documentation prepared will not reveal the identity of the individual as the discloser of information under this procedure.

19. Where the Discloser involves a local trade union representative or work colleague, the Discloser will be under an obligation to use all reasonable endeavours to ensure that the representative or work colleague keeps this matter strictly confidential except as permitted under this procedure, as required by law or until such time as it comes into the public domain.
20. Where a disclosure is made, the person or persons against whom the allegation is made will receive support and advice which is appropriate in the circumstances.

Protection against detriment for making a disclosure

21. No detriment will be imposed and no disciplinary action will be taken against the Discloser because of a disclosure made in accordance with this procedure. This will not, however, prevent the University from bringing disciplinary action against the Discloser in cases where there are grounds to believe that a disclosure has been made maliciously or vexatiously or where external disclosure is made in breach of this procedure without reasonable grounds.

Misuse of the Procedure

22. If the Designated Officer finds that the member of staff making the allegation has acted maliciously, and/or for personal gain, he/she will be subject to the University's Disciplinary Procedure.

Audit Committee

23. The outcome of all completed investigatory reports under the terms of this procedure will be reported to the Audit & Risk Committee of the Board of Governors

General

24. The purpose of this procedure is to enable the Discloser to disclose serious matters of public interest within the University in confidence, and without fear of reprisal. There is however a body called Public Concern at Work, which can provide confidential advice. The telephone number of this organisation is 0207 404 6609 the email address is whistle@pcaw.org.uk and its website is at www.pcaw.org.uk.
25. This document cannot cover every eventuality and there will be occasions when an alternative approach will be needed. Variations will need the authorisation of the Vice-Chancellor and/or the Chair of the Board of Governors.
26. Anonymous allegations are received from time to time. Our policy is normally not to take action in response to anonymous complaints.

Revision or Termination of the Procedure

27. The operation of the above procedure will be periodically reviewed. Any amendments to it, after consultation with the recognised trade unions, will be advised to staff who will also be informed of the date when the amendment will come into effect. The procedure as a whole may be terminated by management upon giving not less than three months' notice to staff to whom it relates. If terminated a new procedure will be introduced as soon as practicable.

Date January 2010 (with minor amendments August 2014)