



# Whistleblowing (Public Interest Disclosure Policy)

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Owner: Head of Corporate Governance

## Document History

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## PART 1 – ABOUT THIS POLICY

- 1.1 This policy applies to all employees and students of the University. Other individuals performing functions in relation to the organisation, such as agency workers and sessional staff, are encouraged to use it.
- 1.2 Whistleblowing is the act of disclosing information about wrongdoing in the workplace. The University is committed to the highest standards of openness, probity and accountability and encourages its members of staff and students to raise genuine concerns about malpractice at the earliest practicable stage. Malpractice within the University is taken very seriously.
- 1.3 This procedure is to provide safeguards to enable individuals 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.
- 1.4 This process is not to be used where employees have complaints in relation to their own personal circumstances, such as the way they have been treated at work. In this circumstance the University's Grievance policy and Procedure is to be followed.
- 1.5 The procedure should not be used where students have complaints in relation to their studies. In this circumstance the Students Complaints Policy and Procedure will apply.
- 1.6 The procedure also seeks to balance the need to provide safeguards for those 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.
- 1.7 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 and students 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.
- 1.8 This policy does not form part of any employee's contract of employment.
2. To make a disclosure and be protected by whistleblowing law an employee must reasonably believe the following:-
  - 2.1 That they are acting in the public interest, and,
  - 2.2 That the disclosure tends to show past, present or likely future wrongdoing in one or more of the following categories:-
    - (a) Criminal offences (this may include for example types of financial impropriety such as fraud); Failure to comply with a legal or regulatory obligation;
    - (b) Miscarriage of justice;
    - (c) Endangering the health and safety of an individual (an act creating risk to health and safety);
    - (d) Endangering the environment (an act causing damage to the environment);
    - (e) Concealment of any of the above.

### 3. Procedure

- 3.1 The procedure applies to disclosure by an individual (described in this procedure as “the Discloser”) who is an employee, student, volunteer 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).
- 3.2 The Discloser shall, as soon as practicable, disclose in confidence the grounds for belief of malpractice to the Director of Human Resources, or the Head of Corporate Governance, 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 President & 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”.
- 3.3 The University will ensure this policy is published appropriately to provide staff, students, volunteers and agency workers with guidance on how to identify and report any malpractice. Where appropriate training will also be provided to support the effective management of this procedure.
- 3.4 Any disclosure shall be in writing and the Discloser should provide as much supporting evidence as possible about the disclosure and reasons for suspecting malpractice.
- 3.5 On receipt of the disclosure the Designated Officer will offer to meet with the Discloser in confidence. This discussion is to take place as soon as is practicable after the initial disclosure and will normally be within 10 working days. 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.
- 3.5 A central log of all disclosures will be held and maintained by the Head of Corporate Governance and reported in accordance with the regulations as appropriate.

### 4. Further steps

- 4.1 As soon as is 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 or relevant complaints procedure.
- 4.2 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 after investigation that the malpractice has not occurred or is not likely to occur;
- (d) satisfied that the allegation is frivolous or vexatious.

4.3 Any recommendations under this procedure will be made by the Designated Officer to the Deputy Vice Chancellor (or their 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 President & Vice-Chancellor. If the allegations are made against the President & 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 recommendations will be made without identifying the Discloser save as outlined below. The recipient of the recommendations shall implement the recommendations.

4.4 The Discloser will be informed in writing, normally within 5 working days of the disclosure meeting, through the Designated Officer of the outcome or steps that will be taken. In both cases, reasons for the outcome will be given. Where the recommendation is that the matter should be investigated further the University commits to ensure this is completed within a reasonable timeframe and normally within 30 days. Where the investigation is likely to exceed this timescale the discloser should be informed in writing and kept up to date with progress. On conclusion of this process the discloser will receive details of the outcome of the investigation and any recommendations that are made. However, sometimes the need for confidentiality may prevent the Designated Officer giving the Discloser specific details of the investigation or any disciplinary action taken as a result. The Discloser should treat any information about the investigation as confidential

## 5. External disclosure

5.1 The aim of this policy is to provide an internal mechanism for reporting, investigating and remedying any wrongdoing in the workplace. In most cases the Discloser should not find it necessary to alert anyone externally.

5.2 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.

## 6. Safeguards

6.1 The Discloser will not 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) to a professionally qualified lawyer for the purposes of obtaining legal advice;  
or
- (c) to an investigating officer to ensure a proper investigation following a recommendation under 4.1(b).

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.

- 6.2 The University does not encourage staff or students to make disclosures anonymously. Proper investigation may be more difficult or impossible if further information cannot be obtained. In addition it is difficult for the discloser to receive feedback, although telephone and/or an anonymous email could be used. It may also be more difficult to establish whether any allegations are credible. However, anonymous disclosures will be considered at the discretion of the University, having regard to the seriousness of the issue raised, the credibility of the concern and the prospect of being able to investigate the matter via alternative credible sources.
- 6.3 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.
- 6.4 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.
- 6.5 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.

7. Protection against detriment for making a disclosure
  - 7.1 The Discloser must not suffer any detrimental treatment as a result of raising a concern. Detrimental treatment includes dismissal, disciplinary action, threats or other unfavourable treatment connected with raising a concern. Where the Discloser believes they have suffered any such treatment, they should inform Designated Officer immediately. If the matter is not remedied the Discloser should raise it formally using the University's Grievance Procedure.
  - 7.2 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.
8. Misuse of the Procedure
  - 8.1 If the Designated Officer finds that the member of staff or student making the allegation has acted maliciously or vexatiously they may be subject to action under the University's Disciplinary Procedure.
9. Audit & Risk Committee
  - 9.1 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.
10. General
  - 10.1 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. A body called Public Concern at Work, can provide confidential advice. Their contact details are 0207 404 6609, [whistle@pcaw.org.uk](mailto:whistle@pcaw.org.uk), [www.pcaw.org.uk](http://www.pcaw.org.uk).
  - 10.2 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 President & Vice-Chancellor and the Chair of the Board of Governors.
11. Further information
  - 11.1 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 President & Vice-Chancellor and the Chair of the Board of Governors.
12. Further information
  - 12.1 Further information and resources are available, below are a few suggestions:-

<https://www.gov.uk/whistleblowing>

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/415175/bis-15-200-whistleblowing-guidance-for-employers-and-code-of-practice.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/415175/bis-15-200-whistleblowing-guidance-for-employers-and-code-of-practice.pdf)

<http://www.acas.org.uk/index.aspx?articleid=1919>

<https://www.unison.org.uk/get-help/knowledge/disputes-grievances/whistleblowing/>

### 13. Revision or Termination of the Procedure

- 13.1 The operation of this procedure will be periodically reviewed. Any amendments to it, after consultation with the recognised trade unions, will be advised to staff and students 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. If terminated a new procedure will be introduced as soon as is practicable.



