YOUR RIGHT TO RAISE A CONCERN

(WHISTLEBLOWING)

HSC FRAMEWORK & MODEL POLICY

2 November 2017
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INTRODUCTION

1. Health and social care services exist to promote the health, wellbeing and dignity of patients and service users and the people who deliver these services want to do the best for those they serve.

2. Encouraging staff to raise concerns openly as part of normal day-to-day practice is an important part of improving the quality of services and patient safety. Many issues are raised by staff and addressed immediately by line managers – this is very much encouraged. When concerns are raised and dealt with appropriately at an early stage, corrective action can be put in place to ensure safe, high quality and compassionate care.

3. The importance of raising concerns at work in the public interest (or “whistleblowing”) is recognised by employers, workers, trade union and the general public. Working in partnership with Trade Unions, staff associations and employee representatives is an important part of ensuring fairness and promoting awareness of the policies, procedures and support mechanisms which a good employer will have in place.

DEFINING WHISTLEBLOWING

4. Whistleblowing is defined as “when a worker reports suspected wrongdoing at work”\(^2\). The wrongdoing is often related to financial mismanagement, such as misrepresenting earnings and false accounting, but can also have more immediate consequences such as those highlighted in the Mid Staffordshire Report (2013)\(^3\).

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1 Raising Concerns at Work: Whistleblowing Guidance for Workers and Employers in Health & Social Care (NHS, 2014)
2 Government Whistleblowing Policies National Audit Office (2014)
5. Staff can report things that are not right, are illegal or if anyone is neglecting their duties. This might include, for example, concerns around:

- patient safety;
- health and safety at work;
- environmental damage; or
- a criminal offence (e.g. fraud).

6. Whistleblowing can also be broadly defined as simply ‘raising a concern’. People outside the organisation, including stakeholders, suppliers and service users, can also raise concerns through the HSC Complaints Procedure. However, whistleblowing is different from making a complaint or raising a grievance. Whistleblowers can often act out of a feeling of fairness or ethics rather than a personal complaint. As Public Concern at Work (PcAW) states, it is important to note that:

“...the person blowing the whistle is usually not directly, personally affected by the danger or illegality. Consequently, the whistleblower rarely has a personal interest in the outcome of any investigation into their concern – they are simply trying to alert others. For this reason, the whistleblower should not be expected to prove the malpractice. He or she is a messenger raising a concern so that others can address it”.

WHY DOES WHISTLEBLOWING MATTER?

7. Staff who are prepared to speak up about malpractice, risk, abuse or wrongdoing should be recognised as one of the most important sources of information for any organisation seeking to enhance its reputation by identifying and addressing problems that disadvantage or endanger other people.

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4 Where’s whistleblowing now? 10 years of legal protection for whistleblowers, PCaW, March 2010
5 Whistleblowing in the Public Sector: A good practice guide for workers and employers, published jointly in November 2014 by Audit Scotland, the National Audit Office, the Northern Ireland Audit Office and the Wales Audit Office, with the support of Public Concern at Work
8. It is important for individuals to feel safe and listened to when raising concerns. An open approach to whistleblowing promotes the values of openness, transparency and candour and encourages employees to treat patients and service users with dignity, respect and compassion.

9. From the employer’s point of view, there are good business reasons for listening to staff who raise concerns, as it gives an opportunity to stop poor practice at an early stage before it becomes normalised and serious incidents take place.

10. From the staff members’ perspective, the freedom to raise concerns without fear means that they have the confidence to go ahead and “do the right thing”. It is part of encouraging staff to reflect on practice as a way of learning.

SCOPE

11. This Framework and Model Policy has been developed in response to the recommendations arising from the Regulation and Quality Improvement Authority’s (RQIA) Review of the Operation of Health and Social Care Whistleblowing Arrangements. The Model Policy, to be adopted by all HSC organisations in Northern Ireland, is set out at ANNEX A. HSC organisations may tailor the Model Policy to take account of their individual organisation’s policies and procedures.

12. This Framework and Model Policy applies to all staff (employees, workers) involved in the work of an HSC organisation. It does not apply to patients and clients or members of the public who wish to complain or raise concerns about treatment and care provided by the HSC organisation or about issues relating to the provision of health and social care. These will be dealt with under the organisation’s HSC Complaints Procedure.

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6 Review of the Operation of Health and Social Care Whistleblowing Arrangements (RQIA, 2016)
7 Definitions set out in Articles 3 (3) and 67K of the Employment Rights (Northern Ireland) Order 1996
13. This Framework and Model Policy is for staff to raise issues where the interests of others or the organisation are at risk. If a member of staff is aggrieved about their personal position they must follow the local grievance procedure or policy for making a complaint about Bullying and/or Harassment.

14. All cases of suspected, attempted or actual fraud raised under this policy should be handled promptly in line with the organisation’s Fraud Response Plan.

AIMS

14. The aim of this Framework and Model Policy is to ensure that under the terms of the Public Interest Disclosure (Northern Ireland) Order 1998 a member of staff is able to raise legitimate concerns when they believe that a person’s health may be endangered or have concerns about systematic failure, malpractice, misconduct or illegal practice without fear of retribution and/or detriment.

15. If a member of staff has honest and reasonable suspicions about issues of malpractice/wrongdoing and raises these concerns through the channels outlined in the model policy, they will be protected from any disciplinary action and victimisation, (e.g. dismissal or any action short of dismissal such as being demoted or overlooked for promotion) simply because they have raised a concern under this policy.

16. This Framework and Model Policy aims to improve accountability and good governance within the organisation by assuring the workforce that it is safe to raise their concerns.

17. The benefits of encouraging staff to report concerns include:
   - identifying wrongdoing as early as possible;
   - exposing weak or flawed processes and procedures which make the organisation vulnerable to loss, criticism or legal action;
• ensuring critical information gets to the right people who can deal with the concerns;
• avoiding financial loss and inefficiency;
• maintaining a positive corporate reputation;
• reducing the risks to the environment or the health and safety of employees or the wider community;
• improving accountability; and
• deterring staff from engaging in improper conduct.

KEY PRINCIPLES & VALUES

Distinction between grievance & whistleblowing concerns

18. Whistleblowing concerns generally relate to a risk, malpractice or wrongdoing that affects others, and may be something which adversely affects patients, the public, other staff or the organisation itself. A grievance differs from a whistleblowing concern as it is a personal complaint regarding an individual's own employment situation. A whistleblowing concern is where an individual raises information as a witness whereas a grievance is where the individual is a complainant. Grievances are addressed using the HSC Grievance Policy.

Raising a concern openly, confidentially, or anonymously

19. In many cases, the best way to raise a concern is to do so openly. Openness makes it easier for the organisation to assess the issue, work out how to investigate the matter, understand any motive and get more information. A worker raises a concern confidentially if they give their name on the condition that it is not revealed without their consent. If an organisation is asked not to disclose an individual’s identity, it will not do so without the individual’s consent unless required by law (for example, by the police). A worker raises a concern anonymously if they do not give their name at all. If this happens, it is best for the organisation to assess the anonymous information as best it can, to establish whether there is substance to the concern and whether it can be addressed.
Clearly if no-one knows who provided the information, it is not possible to reassure or protect them.

**Malicious claims & ulterior motives**

20. There may be occasions when a concern is raised either with an ulterior motive or maliciously. In such a case, and as set out in the model policy at Annex A, the organisation cannot give the assurances and safeguards included in the policy to someone who is found to have maliciously raised a concern that they also know to be untrue. Such situations should be handled carefully. The starting point for any organisation is to look at the concern and examine whether there is any substance to it. Every concern should be treated as genuine, unless it is subsequently found not to be. However, if it is found that the individual has maliciously raised a concern that they know is untrue, disciplinary proceedings may be commenced against that individual.

**LEGAL FRAMEWORK**

21. The Public Interest Disclosure (Northern Ireland) Order 1998\(^8\) (the Order), allows a worker to breach his duty as regards confidentiality towards his employer for the purpose of ‘whistleblowing’. It was introduced in the interest of the public, to protect workers from detrimental treatment or victimisation from their employer if they raise a genuine concern, whether it is a risk to patients, financial malpractice, or other wrongdoing. These are called "qualifying disclosures". A “qualifying disclosure” means any disclosure of information which, in the reasonable belief of the worker making the disclosure, tends to show one or more of the following circumstances:

- where criminal activity or breach of civil law has occurred, is occurring, or is likely to occur;
- where a person has failed, is failing or is likely to fail to comply with any legal obligation he is subject to;
- where a miscarriage of justice has occurred, is occurring or is likely to occur.

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\(^8\) The Public Interest Disclosure (Northern Ireland) Order 1998
where the health and safety of any individual has been, is, or is likely to be endangered;
where the environment has been, is being or is likely to be damaged;
where information indicating evidence of one of the above circumstances is being or is likely to be deliberately concealed.

22. A qualifying disclosure is made by the worker:

- to his employer, or where the worker reasonably believes that the relevant failure relates solely or mainly to the conduct of a person other than his employer or any other matter for which a person other than his employer has legal responsibility, to that other person;
- to a legal adviser for the purpose of obtaining legal advice;
- to the Department of Health or the Minister for Health;
- to a person prescribed by an Order made by the Department for the Economy for the purposes of Article 67F of the Employment Rights (Northern Ireland) Order 1996. The worker should reasonably believe that the relevant failure falls within any description of matters in respect of which that person is so prescribed and that the information disclosed, and any allegation contained in it are substantially true.

23. If the worker makes a disclosure to a person other than his employer or to a person not noted above, it will be a qualifying disclosure in accordance with the Order provided the following conditions are met:

- the worker reasonably believes the information disclosed and any allegation contained within it are substantially true;
- the disclosure is not made for personal gain;
- the worker must act reasonably, taking into account the circumstances;

In addition one, or more, of the following conditions must be met:

- the worker reasonably believes he will suffer a detriment if he makes the disclosure to his employer; or

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9 Public Interest Disclosure (Prescribed Persons) (Amendment) Order (Northern Ireland) 2014
10 The Employment Rights (Northern Ireland) Order 1996 as amended by the Employment Act (Northern Ireland) 2016
• in the case where there is no prescribed person as noted above, the worker reasonably believes that it is likely that evidence relating to the relevant failure will be concealed or destroyed if he makes a disclosure to his employer; or
• the worker has previously made the disclosure to his employer or a prescribed person.

24. In determining whether it is reasonable for the worker to make the disclosure, regard shall be had, in particular, to:
• the identity of the person to whom the disclosure is made;
• the seriousness of the relevant failure;
• whether the conduct is continuing or likely to occur in the future;
• whether the disclosure is made in breach of a duty of confidentiality owed by the employer to any other person;
• whether any previously made concern was acted upon;
• whether the worker followed any procedure laid down by the employer.

25. It should be noted that a disclosure of information is not a qualifying disclosure if the person making the disclosure commits an offence by making it

26. The Order covers all workers including temporary agency staff, student nurses and student midwives, persons on training courses and independent contractors who are working for and supervised by a HSC organisation. It does not cover volunteers. It also makes it clear that any clause in a contract that purports to gag an individual from raising a concern that would have been protected under the Order is void.

HANDLING CONCERNS

27. To enable a whistleblowing policy to work in practice and to avoid unnecessary damage, it is important to ensure that policies authorise all staff, not just health and medical professionals, to raise a concern, and identify who they can contact.
28. Legal protection is very important if staff are to be encouraged to raise a concern about wrongdoing or malpractice. However, it is vital that employers develop an open culture that recognises the potential for staff to make a valuable contribution to the running of public services, and to the protection of the public interest.

29. Where an individual is subjected to a detriment by their employer for raising a concern or is dismissed in breach of the Order, they can bring a claim for compensation under the Order to an Industrial Tribunal.

30. Managers can lead by example, by being clear to staff as to what sort of behaviour is unacceptable, and by role modelling the appropriate behaviours themselves. They should encourage staff to ask them what is appropriate if they are unsure before - not after - the event. If wrongdoing or a potential risk to patient safety is found, it should be taken seriously and dealt with immediately.

**IMPLEMENTING LOCAL POLICY**

31. It is important that all HSC organisations are committed to the principles set out in their whistleblowing arrangements and can ensure that it is safe and acceptable for staff to speak up about wrongdoing or malpractice within their organisation. To achieve this, it is necessary to ensure buy-in and leadership from management, and Trade Union engagement.

32. Within each organisation, an appropriate senior manager should be appointed to take responsibility for ensuring implementation of the whistleblowing arrangements. This could be the clinical governance lead, the nursing or medical director, or responsible officer. HSC organisations should also consider appointing an appropriate number of advisors/advocates to signpost and provide support to those wishing to raise a concern. In addition, each organisation should appoint a non-executive board member to have responsibility for oversight of the culture of raising concerns within their organisation.
33. As an employer, HSC organisations must take all concerns raised seriously. However, it may not be necessary to carry out a formal investigation in each case. Employers should consider a range of possibilities depending on the nature of each case:

- explaining the context of an issue to the person raising a concern may be enough to alleviate their concerns
- minor concerns might be dealt with straightaway by line management
- a review by internal audit as part of planned audit work might be sufficient to address the issue e.g. through a change to the control environment
- there may be a role for external audit in addressing the concerns raised and either providing assurance or recommending changes to working practices
- there may be a clear need for a formal investigation.

34. Having considered the options it is important that employers clearly document the rationale for the way forward. The HSC organisation’s local policy should make it clear whose responsibility it is to decide on the approach to be adopted.

35. If necessary, the HSC organisation can also seek advice and guidance from the relevant prescribed person.

36. Once local arrangements are in place, it is important to ensure all staff are aware of them, and this can be achieved in a number of ways: through hard copy correspondence with staff, communication by email and/or via organisations’ intranet sites, through team briefings and inductions, or the message appearing on payslips. It is also important to ensure that the policies are accessible.

**BRIEFING & TRAINING**

37. Many concerns will be raised openly with line managers as part of normal day-to-day practice. Good whistleblowing arrangements should do nothing to undermine this. It is important that this is made clear to both staff and managers.
38. All managers and designated contacts should be briefed on:

- the value and importance of an open and accountable workplace;
- how to handle concerns fairly and professionally;
- how to protect staff who raise a genuine concern and where staff can get help or refer a concern;
- how to manage expectations of confidentiality;
- the importance of an alternative to line management if the usual channels of communication are unavailable; and
- how to brief their staff on arrangements.

39. Senior managers and designated contacts who are given a specific role in the whistleblowing arrangements should receive training in the operation of their policy for raising concerns.

AUDIT, REVIEW & REFRESH

40. A well-run organisation will periodically review its whistleblowing arrangements to ensure they work effectively and that staff have confidence in them. The following points can sensibly be considered to assure the organisation that the arrangements meet best practice. Monitoring the arrangements in line with this checklist will also help the organisation demonstrate to regulators that their arrangements are working:

- arrange regular feedback sessions to evaluate progress and collect data on the nature and number of concerns raised;
- check the procedures used are adequate to track the actions taken in relation to concerns raised and to ensure appropriate follow-up action has been taken to investigate and, if necessary, resolve problems indicated by whistleblowing. Is there evidence of constructive and timely feedback?
- have there been any difficulties with confidentiality?
- have any events come to the organisation’s attention that might indicate that a staff member has not been fairly treated as a result of raising a concern?
• look at significant adverse incidents/incident management systems or regulatory intervention - could the issues have been picked up or resolved earlier? If so, why weren't they?
• compare and correlate data with information from other risk management systems;
• find out what is happening on the ground - organisations should consider including a question about awareness and trust of arrangements in any future local staff surveys;
• organisations should seek the views of trade unions/professional organisations, as employees might have commented on the whistleblowing arrangements or sought their assistance on raising or pursuing a whistleblowing concern;
• organisations could also consider other sources of information, including information from exit interviews, the Order or other legal claims;
• key findings from a review or surveys should be communicated to staff. This will demonstrate that the organisation listens and is willing to learn and act on how its own arrangements are working in practice;
• refresh whistleblowing arrangements regularly. Regular communication to staff about revised arrangements is also recommended;
• although volunteers are not covered by the Order, the application of this Framework and Model Policy should be considered in the handling of their concerns; and
• think about reporting good news - success stories encourage and reassure everybody.

REPORTING & MONITORING

41. Concerns raised by staff are an important source of information for HSC organisations. It is important that they capture key aspects so that the value of their whistleblowing arrangements can be determined and lessons learned where appropriate.

42. In addition to individual case files HSC organisations should maintain a central register of all concerns raised, in a readily accessible format. Any system for
recording concerns should be proportionate, secure and accessible by the minimum necessary number of staff.

43. An analysis of whistleblowing caseload should be reported regularly to senior management and the HSC organisation’s Audit Committee. In addition, an annual return on caseload, actions and outcomes should be made available to the Department of Health. These will help inform those charged with governance that arrangements in place for staff to raise concerns are operating satisfactorily or will highlight improvements that may be required. HSC organisations should consider reporting on the effectiveness of their whistleblowing arrangements in their annual report\(^5\).
ANNEX A: MODEL POLICY

1. Introduction

All of us at one time or another may have concerns about what is happening at work. The [name of HSC organisation] wants you to feel able to raise your concerns about any issue troubling you with your managers at any time. It expects its managers to listen to those concerns, take them seriously and take action to resolve the concern, either through providing information which gives assurance or taking action to resolve the concern. However, when the concern feels serious because it is about a possible danger, professional misconduct or financial malpractice that might affect patients, colleagues, or [name of HSC organisation] itself, it can be difficult to know what to do.

The [name of HSC organisation] recognises that many issues are raised by staff and addressed immediately by line managers – this is very much encouraged. This policy and procedure is aimed at those issues and concerns which are not resolved, require help to get resolved or are about serious underlying concerns.

Whistleblowing refers to staff reporting suspected wrongdoing at work, for example, concerns about patient safety, health and safety at work, environmental damage or a criminal offence, such as, fraud.

You may be worried about raising such issues and may think it best to keep it to yourself, perhaps feeling it is none of your business or that it is only a suspicion. You may also feel that raising the matter would be disloyal to colleagues, to managers or to the organisation. It may also be the case that you have said something but found that you have spoken to the wrong person or raised the issue in the wrong way and are not sure what to do next.

Remember that if you are a healthcare professional you may have a professional duty to report a concern. If in doubt, please raise it.
Rather than wait for proof, raise the matter when it is still a concern. If something is troubling you of which you think we should know about or look into, please let us know. The [name of HSC organisation] has implemented these whistleblowing arrangements for you to raise any concern where the interests of others or the organisation itself are at risk.

2. Aims and Objectives

[Name of HSC organisation] is committed to running the organisation in the best way possible. The aim of the policy is to promote a culture of openness, transparency and dialogue which at the same time:

- reassures you that it is safe and acceptable to speak up;
- upholds patient confidentiality;
- contributes towards improving services provided by the [name of HSC organisation];
- assists in the prevention of fraud and mismanagement;
- demonstrates to all staff and the public that the [name of HSC organisation] is ensuring its affairs are carried out ethically, honestly and to high standards;
- provides an effective and confidential process by which you can raise genuine concerns so that patients, clients and the public can be safeguarded.

The [Name of HSC organisation] roles and responsibilities in the implementation of this policy are set out at Appendix A.

3. Scope

The [name of HSC organisation] recognises that existing policies and procedures which deal with conduct and behaviour at work (Disciplinary, Grievance, Working Well Together, Harassment and Bullying, the Complaints Procedure and the Accident/Incident Reporting Procedure) may not always be appropriate to extremely sensitive issues which may need to be handled in a different way.
This policy provides a procedure for all staff of the [name of HSC organisation], including permanent, temporary and bank staff, staff in training working within the [name of HSC organisation], independent contractors engaged to provide services, volunteers and agency staff who have concerns where the interests of others or of the organisation itself are at risk. **If in doubt - raise it!**

Examples may include:

- malpractice or ill treatment of a patient or client by a member of staff;
- where a potential criminal offence has been committed, is being committed or is likely to be committed;
- suspected fraud;
- breach of Standing Financial Instructions;
- disregard for legislation, particularly in relation to Health and Safety at Work;
- the environment has been, or is likely to be, damaged;
- a miscarriage of justice has occurred, is occurring, or is likely to occur;
- showing undue favour over a contractual matter or to a job applicant;
- research misconduct; or
- information on any of the above has been, is being, or is likely to be concealed.

**This list is not intended to be exhaustive or restrictive**

If you feel that something is of concern, and that it is something which you think [name of HSC organisation] should know about or look into, you should use this procedure. If, however, you wish to make a complaint about your employment or how you have been treated, you should follow the [name of the HSC organisation’s] local grievance procedure or policy for making a complaint about Bullying and/or Harassment which can be obtained from your manager. This policy complements professional and ethical rules, guidelines and codes of conduct and freedom of speech. It is not intended to replace professional codes and mechanisms which allow questions about professional competence to be raised. (However such issues can be raised under this process if no other more appropriate avenue is apparent).
4. Suspected Fraud

If your concern is about possible fraud or bribery [name of HSC organisation] has a number of avenues available to report your concern. These are included in more detail in the [name of HSC organisation’s] Fraud Policy, Fraud Response Plan and Bribery Policy and are summarised below.

Suspicions of fraud or bribery should initially be raised with the appropriate line manager but where you do not feel this is not appropriate the following officers may be contacted:

- Senior Manager
- Head of Department
- Director of Finance
- Fraud Liaison Office (FLO)

Employees can also contact the regional HSC fraud reporting hotline on 0800 096 33 96 or report their suspicions online to www.repporthealthfraud.hscni.net. These avenues are managed by Counter fraud and Probity Services (CFPS) on behalf of the HSC and reports can be made on a confidential basis.

The [name of HSC organisation’s] Fraud Response Plan will be instigated immediately on receipt of any reports of a suspicion of fraud or bribery.

The prevention, detection and reporting of fraud and bribery and other forms of corruption are the responsibility of all those working for the [name of HSC organisation’s] or under its control. The [name of HSC organisation] expects all staff and third parties to perform their duties impartially, honestly, and with the highest integrity.
5 [Name of HSC organisation] commitment to you

5.1 Your safety
The [name of HSC organisation], the Chief Executive, managers and the trade unions/professional organisations are committed to this policy. If you raise a genuine concern under this policy, you will not be at risk of losing your job or suffering any detriment (such as a reprisal or victimisation). The [name of HSC organisation] will not tolerate the harassment or victimisation of anyone who raises a genuine concern.

The [name of HSC organisation] expects you to raise concerns about malpractices. If any action is taken that deters anyone from raising a genuine concern or victimises them, this will be viewed as a disciplinary matter.

It does not matter if you are mistaken or if there is an innocent explanation for your concerns, you will be protected under the law. However, it is not uncommon for some staff to maliciously raise a matter they know to be untrue. In cases where staff maliciously raise a matter they know to be untrue, protection under the law cannot be guaranteed and the [name of HSC organisation] reserves the right to take disciplinary action if appropriate.

5.2 Confidentiality
With these assurances, the [name of HSC organisation] hopes that you will raise concerns openly. However, we recognise that there may be circumstances when you would prefer to speak to someone in confidence first. If this is the case, you should say so at the outset to a member of staff in [name of Directorate and contact details].

The [name of HSC organisation] is committed to maintaining confidentiality for everyone involved in a concern. This includes the person raising the concern and the person(s) whom the concern is about. Confidentiality will be maintained throughout the process and after the issue has been resolved.

If you ask for your identity not to be disclosed, we will not do so without your consent unless required by law. You should however understand that there may be times when we will be unable to resolve a concern without revealing your identity, for
example, where personal evidence is essential. In such cases, we will discuss with you whether and how the matter can best proceed.

5.3 Anonymity
Remember that if you do not disclose your identity, it will be much more difficult for us to look into the matter. It will also not be possible to protect your position or give you feedback. So, while we will consider anonymous reports in the exact same manner as those which are not anonymised, these arrangements are not best suited to deal with concerns raised anonymously.

If you are unsure about raising a concern you can get independent advice from Public Concern at Work (see contact details under Independent Advice).

6. Raising a concern

If you are unsure about raising a concern, you can get independent advice at any stage from your trade union/professional organisation, or from one of the organisations listed in Section 7. You should also remember that you do not need to have firm evidence before raising a concern. However, you should explain as fully as possible the information or circumstances that gave rise to the concern.

6.1 Who should I raise a concern with?

In many circumstances the easiest way to get your concern resolved will be to raise it with your line manager (or lead clinician or tutor). But where you do not think it is appropriate to do this, you can use any of the options set out below.

If raising it with your line manager (or lead clinician or tutor) does not resolve matters, or you do not feel able to raise it with them, you can contact one of the following people:

- the designated advisor/advocate [insert details]
- the HR or Governance Team (whichever is appropriate) [insert details]
If you still remain concerned after this, you can contact:

- the [name] Director with responsibility for whistleblowing [insert details] or

All these people have been trained in receiving concerns and will give you information about where you can go for more support.

If for any reason you do not feel comfortable raising your concern internally, you can raise concerns with external bodies (see paragraph 7 below).

If exceptionally, the concern is about the Chief Executive, then it should be made (in the first instance) to the Chair, who will decide on how the investigation will proceed.

6.2 Independent advice

If you are unsure whether to use this policy, or if you require confidential advice at any stage, you may contact your trade union/professional organisation.

Advice is also available through the independent charity Public Concern at Work (PCaW) on 020 7404 6609.

6.3 How should I raise my concern?

You can raise your concerns with any of the people listed above, in person, by phone or in writing (including email).

Whichever route you choose, please be ready to explain as fully as you can the information and circumstances that gave rise to your concerns.

7. Raising a concern externally

The [name of HSC organisation] hopes this policy reassures you of its commitment to have concerns raised under it taken seriously and fully investigated, and to protect an individual who brings such concerns to light.
Whilst there may be occasions where individuals will wish to report their concerns to external agencies or the PSNI, the [name of HSC organisation] would hope that the robust implementation of this policy will reassure staff that they can raise such concerns internally in the first instance.

However, the [name of HSC organisation] recognises that there may be circumstances where you can raise a concern with an outside body including those listed below:

- Department of Health;
- A prescribed person, such as:
  - General Chiropractic Council, General Dental Council, General Medical Council, General Osteopathic Council, Health & Care Professional Council, Northern Ireland Social Care Council, Nursing and Midwifery Council, Pharmaceutical Society Northern Ireland, General Optical Council
  - The Regulation and Quality Improvement Authority;
  - The Health and Safety Executive;
  - Serious Fraud Office,
  - Her Majesty’s Revenue and Customs,
  - Comptroller and Auditor General;
  - Information Commissioner
  - Northern Ireland Commissioner for Children and Young People
  - Northern Ireland Human Rights Commission

Disclosure to these organisations/persons will be protected provided you honestly and reasonably believe the information and associated allegations are substantially true.

We would wish you to raise a matter with the external agencies listed above than not at all. Public Concern at Work (or your union) will be able to advise you on such an option and on the circumstances in which you may be able to contact an outside body safely.
8. The media

You may consider going to the media in respect of their concerns if you feel the [name of HSC organisation] has not properly addressed them. You should carefully consider any information you choose to put into the public domain to ensure that patient/client confidentiality is maintained at all times. The [name of HSC organisation] reserves the right to take disciplinary action if patient/client confidentiality is breached.

Communications with the media are coordinated by the [insert name of Department] on behalf of the [name of HSC organisation]. Staff approached by the media should direct the media to this department in the first instance.

9. Conclusion

While we cannot guarantee that we will respond to all matters in the way that you might wish, we will strive to handle the matter fairly, impartially and properly. By using these whistleblowing arrangements you will help us to achieve this.

Please note, this document has been developed to meet best practice and comply with the Public Interest Disclosure (NI) Order 1998 (the Order) which provides employment protection for whistleblowing.

The Order gives significant statutory protection to staff who disclose information reasonably in the public interest. To be protected under the law an employee must act with an honest and reasonable belief that a malpractice has occurred, is occurring or is likely to occur. Disclosures may be made to certain prescribed persons or bodies external to the [name of HSC organisation] listed in the Order. The Order does not normally protect employees making rash disclosures for example to the media, when the subject could have been raised internally.
10. Appendices

Appendix A – Roles and Responsibilities
Appendix B – Procedure
Appendix C – Advice for Managers

11. Equality, Human Rights & DDA

[The [name of HSC organisation to confirm] This policy has been drawn up and reviewed in the light of Section 75 of the Northern Ireland Act (1998) which requires the [name of HSC organisation] to have due regard to the need to promote equality of opportunity. It has been screened to identify any adverse impact on the 9 equality categories.

The policy has been screened out without mitigation or an alternative policy proposed to be adopted.]

12. Personal & Public Involvement (PPI)/Consultation Process

[name of HSC organisation to confirm]

13. Alternative Formats

This document can be made available on request on disc, larger font, Braille, audio-cassette and in other minority languages to meet the needs of those who are not fluent in English.

14. Sources of advice in relation to this document

The Policy Author, responsible Assistant Director or Director as detailed on the policy title page should be contacted with regard to any queries on the content of this policy.

15. Policy Sign Off

Lead Policy Author Date
Director of HR Date
Roles and Responsibilities

The [name of HSC organisation]

- To listen to our staff, learn lessons and strive to improve patient care;
- To ensure that this policy enables genuine issues that are raised to be dealt with effectively;
- To promote a culture of openness and honesty and ensure that issues are dealt with responsibly and taken seriously;
- To ensure that employees who raise any issues are not penalised for doing so unless other circumstances come to light which require this, e.g. where a member of staff knowingly raises an issue regarding another member of staff which they know to be untrue.
- To share learning, as appropriate, via organisations shared learning procedures

The non executive director (NED)

- To have responsibility for oversight of the culture of raising concerns within their organisation

Senior Manager

- To take responsibility for ensuring the implementation of the whistleblowing arrangements

Managers

- To take any concerns reported to them seriously and consider them fully and fairly;
- To recognise that raising a concern can be a difficult experience for some staff and to treat the matter in a sensitive manner if required;
- To seek advice from other professionals within the [name of HSC organisation] where appropriate
• To invoke the formal procedure and ensure [name of Directorate] is informed, if the issue is appropriate
• To ensure feedback/learning at individual, team and organisational level on concerns and how they were resolved

Whistleblowing adviser/advocate
• To ensure that any safety issue about which a concern has been raised is dealt with properly and promptly and escalated appropriately through all management levels
• To intervene if there are any indications that the person who raised a concern is suffering any recriminations
• To work with managers and HR to address the culture in an organisation and tackle the obstacles to raising concerns

This list is not intended to be exhaustive or restrictive

All Members of Staff
• To recognise that it is your duty to draw to the [name of HSC organisation] attention any matter of concern
• To adhere to the procedures set out in this policy
• To maintain the duty of confidentiality to patients and the [name of HSC organisation] and consequently, where any disclosure of confidential information is to be justified, you should first, where appropriate, seek specialist advice for example from a representative of a regulating organisation such as the Nursing & Midwifery Council or the General Medical / Dental Council.

Role of Trade Unions and other Organisations
All staff have the right to consult and seek guidance and support from their Professional Organisations, Trade Union or from statutory bodies such as the Nursing & Midwifery Council, the General Medical Council, Health Professional Council and the Social Care Council for Northern Ireland.
EXAMPLE PROCEDURE FOR RAISING A CONCERN

Step one (Informal)
If you have a genuine concern about what you believe might be malpractice and have an honest and reasonable suspicion that the malpractice has occurred, is occurring, or is likely to occur, then the matter should be raised in the first instance with your Line Manager (lead clinician or tutor). This may be done verbally or in writing.

You are entitled to representation from a trade union/ fellow worker or companion to assist you in raising your concern.

Step two (informal)
If you feel unable to raise the matter with your Line Manager (lead clinician or tutor), for whatever reason, please raise the matter with our designated adviser/ advocate.

[name]
[contact details]
This person has been given special responsibility and training in dealing with whistleblowing concerns. They will:

- treat your concern confidentially unless otherwise agreed;
- ensure you receive timely support to progress your concerns;
- escalate to the board any indications that you are being subjected to detriment for raising your concern;
- remind the organisation of the need to give you timely feedback on how your concern is being dealt with;
- ensure you have access to personal support since raising your concern may be stressful.
If you want the matter dealt with in confidence, please say so at the outset so that appropriate arrangements can be made.

**Step three (formal)**
If these channels have been followed and you still have concerns, or if you feel that the matter is so serious that you cannot discuss it with any of the above, please contact:
[name]
[contact]

**Step four (formal)**
You can raise your concerns formally with the external bodies listed at paragraph 7:

**What will we do?**

We are committed to listening to our staff, learning lessons and improving patient care. On receipt, the concern will be recorded and, where possible, you will receive an acknowledgement within three working days.

A central register will record the date the concern was received, whether you have requested confidentiality, a summary of the concerns and dates when we have given you updates or feedback. While your identity may be included within the allegation or report, the register will not include any information which may identify you, nor should it include any information which may identify an individual or individuals against whom an allegation is made.

**Investigation**

Where you have been unable to resolve the matter quickly (usually within a few days) with your Line Manager, we will carry out a proportionate investigation – using someone suitably independent (usually from a different part of the organisation) and
properly trained – and we will reach a conclusion within a reasonable timescale (which we will notify you of).

Wherever possible we will carry out a single investigation (so, for example, where a concern is raised about a patient safety incident, we will usually undertake a single investigation that looks at your concern and the wider circumstances of the incident). The investigation will be objective and evidence-based, and will produce a report that focuses on identifying and rectifying any issues, and learning lessons to prevent problems recurring.

We may decide that your concern would be better looked at under another process: for example, our process for dealing with bullying and harassment. If so, we will discuss that with you.

We will advise you, where possible, and those identified as the subject of a concern, of the process, what will be investigated and what will not, those who will be involved, the roles they will play and the anticipated timescales.

Any employment issues (that affect only you and not others) identified during the investigation will be considered separately.

Where an Agency worker raises a concern then it is the responsibility of the [name of HSC organisation] to take forward the investigation in conjunction with the Agency if appropriate.

For the purposes of recording, if the concern is already, or has previously been, the subject of an investigation under another procedure e.g. grievance procedure it will not be appropriate to categorise it under the [name of HSC organisation] Whistleblowing Policy.
Communicating with you

We welcome your concerns and will treat you with respect at all times. We will discuss your concerns with you to ensure we understand exactly what you are worried about. We will endeavour to provide a response within 12 weeks of the concern being received. We will provide an update on progress by week 6 and again by week 10 of the investigation. We will share the outcome of the investigation report with you (while respecting the confidentiality of others).

How we will learn from your concerns

The focus of the investigation will be on improving our services. Where it identifies improvements that can be made, we will track them to ensure necessary changes are made and are working effectively. The final outcome and ‘lessons learned’ will be documented and approved as final by the responsible Director. In addition the relevant professional Executive Director will independently assess the findings and recommendations for assurance that the matter has been robustly considered and appropriately addressed.

Board oversight

The [name of HSC organisation] board and the Department of Health will be given high level information about all concerns raised by our staff through this policy and what we are doing to address any problems. We will include similar high level information in our annual report. The board supports staff raising concerns and want you to feel free to speak up. The Chair has nominated a non-executive director with responsibility for the oversight of the organisation’s culture of raising concerns.

Review & Reporting

We will review the effectiveness of this policy and local processes at least annually, with the outcome published and changes made as appropriate.
We will provide regular reports to senior management and to our Audit Committee on our whistleblowing caseload and an annual return to the Department of Health setting out the actions and outcomes.
ADVICE FOR MANAGERS RESPONDING TO A CONCERN

1. Thank the staff member for raising the concern, even if they may appear to be mistaken;
2. Respect and heed legitimate staff concerns about their own position or career;
3. Manage expectations and respect promises of confidentiality;
4. Discuss reasonable timeframes for feedback with the member of staff;
5. Remember there are different perspectives to every story;
6. Determine whether there are grounds for concern and investigate if necessary as soon as possible. Where appropriate alert those identified as the subject of the concern. If the concern is potentially very serious or wide-reaching, consider who should handle the investigation and know when to ask for help. If asked, managers should put their response in writing;
7. Managers should ensure that the investigator is not connected to the concern raised and determine if there is any actual, potential or perceived conflict of interest which exists prior to disclosing full details of the concern. Should a conflict of interest arise during the investigation the investigator must alert the manager. (Note: Any such conflict must be considered, and acted on, by the manager);
8. Managers should bear in mind that they may have to explain how they have handled the concern;
9. Feed back to the whistleblower and those identified as the subject of a concern (where appropriate) any outcome and/or proposed remedial action, but be careful if this could infringe any rights or duties which may be owed to other parties;
10. Consider reporting to the board and/or an appropriate regulator the outcome of any genuine concern where malpractice or a serious safety risk was identified and addressed; and
11. Record-keeping - it is prudent to keep a record of any serious concern raised with those designated under the policy, and these records should be anonymous where necessary.
ANNEX B: FLOWCHART
Raising Concerns & Whistleblowing Process

Seek Advice

You wish to raise a concern
Access [name of HSC organisation] Whistleblowing Policy at (INSERT DETAILS)

Raise Concern
Informally

Raise your concerns with your line manager

Resolved
Not Resolved

Raise Concern
Formally

Raise your concern with advisor/advocate/senior manager
Assessment of concerns / Investigation initiated if required
Investigator appointed, evidence gathered from documents & witnesses
Investigation report submitted to Trust Designated Senior Officer
Feedback to person who raised a concern by Designated Senior Officer

Resolved
Not Resolved

Externally

Raise your concern with the Chief Executive or Chairman

Resolved
Not Resolved

Refer to the Department of Health, Minister for Health or a prescribed person (a regulator or other external body). Always seek advice before deciding whether to raise a concern externally