Whistleblowing policy – version 8

Date approved for use: 1st November 2019

Scope

1.1 This policy is a Dimensions Group policy. This means it applies to all Dimensions (UK) Limited, Outreach 3 Way, Waymarks and Discovery employees, agency workers and volunteers. If any subsidiary takes a different approach, it will produce a version of its own.

1.2 This policy tells us what our rules are around whistleblowing.

1.3 It is a legal requirement to comply with current legislation regarding whistleblowing.

1.4 The purpose of this policy is to ensure that people are aware of their responsibilities and can find the procedures to put this policy into practice.

1.5 Helping employees to ‘speak up’.

1.6 To go straight to the policy content click on the hyperlink section title below:

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Policy statement

2.1 We are committed to the highest standards of openness, integrity and accountability and to continuous improvement in the way we support people and their families.

2.2 This policy sets out the way in which staff may raise any concerns that they have and how we will deal with those concerns.

The impact of not implementing this policy

3.1 If you do not follow this policy, this may lead to:

- matters of concern not being reported to the relevant bodies until it is too late;
- outside bodies such as the Care Quality Commission (CQC) or the police being contacted;
- suspension of those involved;
- the Grievance policy being started;
- the poor reputation of Dimensions;
- harm or upset for the individuals involved;
- legal proceedings being taken against the Group or an individual.

Policy content

Identifying a whistleblowing concern

4.1 The law provides protection for workers who raise legitimate concerns about specified matters. These are called ‘qualifying disclosures’. A qualifying disclosure is made in the public interest by a worker who has a reasonable belief that:

- a criminal offence
- a miscarriage of justice
- an act creating risk to health and safety
- an act causing damage to the environment
- a breach of any other legal obligation
or cover-up of any of the above is being, has been, or is likely to be, committed.

4.2 It is not necessary for you to have proof that such an act is being, has been, or is likely to be, committed. A reasonable belief is enough. You have no responsibility for investigating the matter. It is the organisation’s responsibility to ensure that an investigation takes place.

4.3 Examples include:

- wilful or intentional harm or physical, psychological or financial abuse of a person we support
- theft, fraud, deliberate falsification of records
- fighting, assault on another person or threat of violence or offensive behaviour
- drinking alcohol whilst at work
- any act or omission which puts people supported by the company at risk of harm or abuse
- deliberate disregard of a safety rule or condition
- sleeping on duty unless expressly permitted.

4.4 There may be times when areas of practice raise concerns, which need to be acknowledged and addressed. This is especially important in our organisation as most of our activity is in areas that may require subjective judgement on how care, support and services should be provided. There may also be times when you become aware of practices, actions or inactions where you work, that you do not agree with or believe could have serious consequences for the people we support, the people we employ or the organisation.

**Key points**

5.1 This policy applies not only to employees but also to other individuals such as relief and agency workers.

5.2 The policy is not intended to be used when other procedures would be more appropriate. For example, the procedure in the Grievance policy should be used in relation to employment issues, including complaints about your pay, working hours, workload or bullying by fellow workers.
5.3 We will aim to resolve matters quickly and without the initial involvement of an outside agency or the chair/member(s) of the Board. However, there may at times be unique circumstances when it will be necessary to involve someone from outside of the organisation. Possible situations include:

- when the concern involves a very senior member of staff. In this case, the matter can be reported to the chair or a member of the Board (contact information is given in appendix 1: List of contacts)

- when a criminal offence has been committed. Such incidents will be reported to the police

- when a vulnerable adult has been abused. Such cases will be referred to the local authority and appropriate regulatory authority – that is, the CQC in England and Care Inspectorate Wales (CIW) in Wales – and the police if necessary

- with issues relating to any regulated care homes and domiciliary care agencies, it may also be necessary to inform the CQC/CIW that a matter is under investigation

- when issues relate to housing and/or property services provided by the organisation. Such issues can be referred to the Homes and Communities Agency – tel. no.: 0300 123 4500.

5.4 Employees may also disclose alleged wrongdoing or malpractice to certain specified bodies in circumstances where the alleged wrongdoing or malpractice falls within that body’s remit, such as the Health and Safety Executive or the Financial Conduct Authority.

**Reporting a concern**

6.1 It may not be easy for a member of staff to report concerns, for the most part relating to malpractice, dangerous activities, abuse, fraud or corruption. Any concerns must be raised as early as possible, thus reducing the risk of any problem becoming more serious.

6.2 You should be prepared to set out the background and history of your concern, giving names, dates and places where possible, and the facts of why you are worried about the situation.

6.3 You do not have to be able to prove the allegations, but you do need to have a reasonable and genuine belief that the information you have is true and you are acting in the public interest. Some allegations may prove to be unfounded but
we would prefer the issue or concern to be raised, rather than run the risk of not detecting a problem early on.

6.4 Often it is possible, and appropriate, to raise a concern directly with your manager through personal contact or by telephone. E-mail also provides a quick way to bring something to the attention of a manager who may be ‘off-site’. If the issue is complex, a detailed email or letter may help ensure your concerns are fully understood.

**Who to report to**

7.1 In most cases, you should be able to raise concerns with your line manager or, if the concern relates to your manager, to someone higher up the management chain.

7.2 However, where you do not feel able to do this, or you are not satisfied with your manager’s response, you can call the whistleblowing hotline (operated by an external independent company). The number to use is 0800 915 1571. This service is available 24-hours-a-day and ensures confidentiality of the person raising the concern. Once you have raised your concerns, a report will be produced and sent to the group director of quality, public affairs & policy within 24 hours.

7.3 If you wish to meet with a senior manager then a confidential meeting can be arranged. Any necessary action to arrange such a meeting will be taken immediately by the senior manager concerned.

7.4 In any case, you may wish to come forward with a work colleague or a trade union representative to support you.

**Protection for the whistle-blower**

8.1 If you make a qualifying disclosure, the law states that you have the right not to be dismissed, subjected to any disadvantage or blame following bringing the matter to our or the governing body’s attention. This could, for example, include demotion, being given all the worst jobs or forced to work a lot of overtime.

8.2 We are committed to supporting you if you disclose information in line with this policy and will strive to protect you from any repercussions. We also wish to make it clear that, as far as is possible, by telling us your concerns your career with the organisation will not be affected. This will apply even in cases where you have come forward in good faith but the allegation later turns out to be unjustified.
8.3 Confidentiality will be respected as far as possible if requested by you. However, it is important to note that there may be times when we are unable to honour this due to the nature of the allegation and the course of action that needs to be taken.

8.4 It must be understood that protection under this procedure will not apply if you knowingly and/or maliciously make false allegations against a colleague. In these circumstances, you may become subject to investigation and possible disciplinary action.

**Investigation**

9.1 On receiving a whistleblowing alert, a senior manager will appoint someone with a suitable background to undertake an investigation. The chair of the board will, in extreme cases initiate an investigation. Wherever possible, when outside agencies also carry out an investigation, we will endeavour to carry out the internal investigation in conjunction with the external investigation.

9.2 The person appointed to be the investigating manager will usually be a member of the Group Executive Team (ET) or an experienced member of the Compliance team. In exceptional circumstances, an independent person or a member of the Board may be appointed to undertake the task. The investigating manager will have the right in serious cases to recommend suspension where he/she feels that it is appropriate. Where appropriate the chair of the Board, will be consulted and kept up to date of the progress.

9.3 The investigating manager will take whatever action is necessary to ensure a comprehensive investigation is undertaken into the area of concern. This may involve interviewing our staff and other relevant people, checking documentation and records and visiting our premises. It should be noted that the completion of an internal investigation does not prevent a separate disciplinary hearing, external enquiry or referral to another statutory body – for example, the Information Commissioner.

9.4 The report of the investigating manager will be returned to the originating senior manager who will refer it to the ET with any recommendations for action. Additionally, the report may be referred to the Board of Management.

9.5 Any whistleblowing alert will be dealt with as quickly as practically possible.

9.10 You will be kept informed of progress during the investigation. You will be given a summary of the investigation, an outline of its findings and any action taken.
9.11 A summary of concerns raised under this policy and whether substantiated or not will be submitted routinely to the Board of Management.

Retraction of allegation

10.1 Once the disclosure has been made you can retract it at any time but the organisation reserves the right to go ahead with the investigation, even if you do not wish to go ahead.

Things to consider

11.1 This policy should only be used as outlined above. Careful thought should be given as to whether other procedures – such as those for grievances or complaints – are more appropriate for resolving the matter before the whistleblowing process is invoked.

11.2 Where the person raising the concern considers the senior manager or the investigating manager to be implicated or to have not addressed the concern appropriately, they should contact the chair of the Board or the chair of the Group Audit Committee. (See appendix 1: List of contacts.) In such cases, the principles of this procedure would be followed with appropriate adjustments.

11.3 It is recognised that there may be occasions when, for various reasons, it will not be possible to fully substantiate the information you provide. Such cases will be treated with extreme sensitivity and special consideration will be given to supporting you within the workplace.

11.4 If during the course of the investigation the investigating manager feels that the policy has been deliberately misused or used maliciously, then they will decide whether to undertake further enquiries to establish if any action should be taken against you. There would need to be very clear evidence to substantiate this belief as it is not our intention to discourage any member of staff from raising their concerns. Specialist advice would be sought either internally or externally about the most reasonable course of action.

Relevant legislation, guidance & related policies & templates

Legislation

12.1 Public interest disclosure Act 1998
Guidance

13.1 **Dimensions Whistleblowing intranet page**

13.2 Safecall confidential Whistleblowing telephone number: 0800 915 1571

13.3 Safecall confidential reporting website page: [www.safecall.co.uk/report](http://www.safecall.co.uk/report)

13.4 Safecall confidential email address: dimensions@safecall.co.uk

13.5 **Dimensions Employees Assistance Programme intranet page**

13.6 Employees Assistance Programme telephone number: 0800 030 5182

Group policies

14.1 Concerns, complaints & compliments

14.2 Disciplinary

14.3 Grievance policy

Related procedures, decision flowcharts, forms and so on

15.1 **Appendix 1: List of contacts**

15.2 **Appendix 2: Whistleblowing poster**

15.3 **Appendix 3: Modern slavery & human trafficking statement**

Equalities statement

16.1 This policy applies to all employees whatever their age, gender, ethnicity, faith, disability, sexual orientation and marital status.

16.2 The equality impact analysis (EIA) is in the intranet’s Document library. To see it, click here: [Whistleblowing – version 7 EIA](#).

Review

17.1 We will review this policy every year from its original publication. But if changes in legislation, regulation or best practice mean we need to, we will review sooner.

17.2 If the changes are big, we will equality impact analyse (EIA) the policy again and send out to consultation in line with our Policy development & consultation policy.

17.3 For smaller changes, we will update this same version. We will record this in the Version control section below.
Glossary

18.1 Disclosure – the name of the complaint.

18.2 Protected disclosure – under the law, there are provisions whereby the person raising the disclosure are protected.

People & groups involved in writing & approving this policy

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<tr>
<th>Policy owner:</th>
<th>Carol Tubbs, HR Services Manager</th>
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<td>Policy author/reviewer:</td>
<td>Karen Williams, HR Officer</td>
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<tr>
<td>People &amp; groups consulted:</td>
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Version control

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Next full review due: November 2020