

Whistleblowing

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Section 1: Overview

1.1 Purpose

- 1.1.1 Frontline is committed to delivering the best possible service and maintaining high ethical standards. We want to know if something is wrong and this policy and procedure enables individuals to raise serious concerns and matters of public interest in a way that protects both the individual and Frontline.

1.2 Scope

- 1.2.1 This policy and procedure applies to Frontline staff (including employees, contractors and volunteers) and participants on the Frontline programme. Other individuals, such as applicants, fellows and members of the public are encouraged to make use of the policy
- 1.2.2 The policy and procedure covers both disclosure of serious concerns and those of public interest. These are defined as:
- **Serious concern:** a concern raised with the belief that, if unaddressed, the matter could have a serious negative impact on Frontline but would not have wider public repercussions.
 - **Public interest disclosure:** defined in the Public Interest Disclosures Act (1998, modified 2013) as a disclosure that to someone's reasonable belief:
 - a criminal offence has been committed, is being committed or is likely to be committed;
 - a person has failed, is failing or is likely to fail to comply with any legal obligation to which they are subject;
 - a miscarriage of justice has occurred, is occurring or is likely to occur;
 - the health or safety of any individual has been, is being or is likely to be endangered;
 - information tending to show any matter falling within any one of the preceding bullet points has been, is being or is likely to be deliberately concealed.
- 1.2.3 Any serious concerns or public interest disclosures should be in relation to Frontline activity.



- 1.2.4 Where a participant wishes to make a report about an activity in their local authority for which Frontline is not responsible the matter should be raised through the local authority’s whistleblowing procedures.
- 1.2.5 The policy and procedures are not intended to manage personal grievances, internal regulatory breaches or other matters that are better managed through other Frontline policies and procedures.

1.3 Responsibilities

- 1.3.1 The Legal & Compliance manager is responsible for the oversight of this policy and ensuring it is communicated to all staff. Everyone is responsible for ensuring this policy and procedures are adhered to in the response to a disclosure.

1.4 Definitions

- 1.4.1
 - Discloser/whistleblower** means the person raising a serious concern or making a public interest disclosure
 - Whistleblowing** means the act of raising a serious concern or making a public interest disclosure

Section 2: Policy and procedures

2.1 General principles

- 2.1.1 When someone makes a disclosure or whistleblows, Frontline will respect their right to confidentiality. The information disclosed will only be shared with those who have a legitimate interest in the matter or with those whose involvement is necessary to secure a resolution. While anonymous reporting is allowed someone disclosing a concern is encouraged to provide their details.



- 2.1.2 There may be situations where despite receiving a request for confidentiality, Frontline might need to act on information provided in order to prevent harm.
- 2.1.3 Frontline is committed to ensuring that no report made in good faith results in negative reprisal. It will take all reasonable steps to protect any individual who makes such a report from all forms of retaliation and take disciplinary action against any staff member or participant proven to retaliate against or victimise a whistleblower.
- 2.1.4 While a whistleblower will be protected from reprisal, they will not be provided with immunity from wrongdoing. If the whistleblower is involved in the matter being reported Frontline will still take reasonable actions against the individual. It will take into account the fact it was the whistleblower who raised the matter.
- 2.1.5 Frontline is confident that most matters can be considered and addressed internally, but recognises that for legal reasons some public interest concerns may need to be raised outside the organisation. It is not considered reasonable that the first disclosure of an issue would be via the media or social media and staff should be aware that they have a duty to retain the confidentiality of Frontline information unless disclosure is in the public interest.
- 2.1.6 Where a report is made that is not in good faith, and where Frontline suspects that a report is malicious or vexatious or its process is being intentionally misused, it will consider taking disciplinary action.
- 2.1.7 This policy and procedure will be applied fairly and in accordance with the equality, diversity and inclusion policy.

2.2 Making a disclosure

- 2.2.1 When someone thinks that something might be wrong, they should raise it in the first instance with someone who is in a position to address the issue. They may be a line manager, head of team, practice tutor or any other Frontline staff member. It may be possible to resolve the issue quickly and informally this way.
- 2.2.2 Where a person:



- feels uncomfortable or unable to speak to someone identified in 2.2.1 (including in order to protect anonymity); or
- has spoken to someone identified in 2.2.1 but is not satisfied with the outcome; or
- considers or has been told that the matter is more serious.

then they should make a disclosure to Frontline's Chief Social Worker either by post to Frontline's registered address or by emailing complaints@thefrontline.org.uk. If a person does not feel able to raise the matter with a Frontline staff member, then they should make a disclosure to the chair of the board safeguarding, policy and complaints committee, via the LCM, either by post to Frontline's registered address or by emailing complaints@thefrontline.org.uk.

2.2.3 Where the matter is escalated to the attention of the Frontline Board, the Board member with chef oversight of safeguarding complaints reserves the right to refer the disclosure to a Frontline staff member for continuation of the procedure as appropriate. In such cases the usual care must be taken to maintain impartiality and independence in the investigation of the matter.

2.2.4 In all cases disclosure / whistleblowing correspondence is expected to outline the concern clearly and evidence must be provided.

2.3 Responding to a disclosure

2.3.1 The individual appointed to proceed with a disclosure will review the material submitted and make an initial determination on the case. In order for it to be taken further it must meet the following criteria:

- it must be something for which Frontline is responsible;
- it must meet the definition of a serious concern or public interest matter as defined in 1.2.2;
- there must be evidence provided or a clear indication of where evidence could be sourced (Frontline would only very exceptionally act on hearsay);
- it must be an issue which is best considered through this process (see 1.2.5);
- it should not be something that has been or is currently being considered through another process internally or externally.



2.3.2 Where contact details have been provided by the disclosure, the recipient will contact them to confirm that either:

- no further action is to be taken and provide an explanation as to why;
- further action will be taken but through an alternative process and provide an explanation as to why and details of that process; or
- the case will be considered under this procedure and detail who will be conducting the preliminary investigation.

2.3.3 Where the case is to be considered further, the discloser will be asked which of the four reporting routes they wish to follow. The reporting routes are:

- **Fully disclosed reporting:** The whistleblower allows full information, as relevant to the matter, to be disclosed to all parties involved. E.g. name, role, location. There are no limitations to the process under this kind of reporting and it will always be Frontline's preferred arrangement.
- **Limited disclosure:** the whistleblower allows some information, such as role or location, to be disclosed, but only the person to whom the disclosure is made knows the identity of the discloser. Under this arrangement action can only be taken where there is a clear case presented by the whistleblower that a) warrants the investigation and b) it is clear that evidence can be provided that either does not contain the personal information of the whistleblower or can be redacted so that the personal information cannot be identified without compromise of the evidence.
- **No disclosure:** in this reporting only the person to whom the disclosure is made knows any of the personal information of the discloser. Under this arrangement the same limitations as in limited disclosure apply, but with a higher amount of redaction likely to be required that could further compromise the evidence.
- **Fully anonymous:** No one knows the identity of the discloser. Frontline will consider such disclosures, but will only take them forward where there is a compelling rationale to do so.

2.3.4 Anyone disclosing under the limited disclosure, no disclosure or fully anonymous routes can agree a more open reporting arrangement at any time, but is under no obligation to do so. These routes of restricted disclosure may limit the actions that Frontline can take and where this is the



case, it will be discussed with the discloser (except where they remain anonymous).

- 2.3.5 The recipient should notify the Director of Finance and Compliance that a disclosure has been received prior to investigation. If the Director of Finance and Compliance is not independent to the matter, then they should notify an independent member of the Senior Leadership Team.

2.4 Investigation

Preliminary investigation

- 2.4.1 Where the decision has been taken to take the case further, the recipient will either conduct a preliminary investigation themselves or appoint an investigating officer to do so. The investigating officer will be independent of the issues involved and, where they are not the recipient, materials provided to them will be redacted according to the reporting route. Staff may refer to the compliance team for advice on who would be most suitable to conduct the investigation.
- 2.4.2 The preliminary investigation should in most cases be carried out within 21 days of the date of disclosure. Where this is not possible due to the complexity of the case or other reason, the recipient will inform the whistleblower of the reasons and give them a timeframe for completion.
- 2.4.3 Anyone subject to an allegation will not normally be contacted at this stage. The investigating officer may however offer to meet with the whistleblower when the reporting route allows, in the presence of an independent note-taker from Frontline's compliance or HR teams. The whistleblower may be accompanied or represented by a friend or Union representative, so long as this person agrees to respect the confidentiality of the process.
- 2.4.4 The investigating officer will produce a report for the recipient. The report will include:
- details of the allegation;
 - the facts of the case as best the initial investigation is able to gather;
 - relevant evidence;
 - notes of the meeting with the whistleblower when applicable;
 - where accountability for this area sits in Frontline; and
 - recommendations.



2.4.5 Recommendations might include, but are not limited to:

- a) no further action to be taken;
- b) adjustments to practice, but no further formal actions;
- c) a formal investigation of the allegations;
- d) reporting the matter to the police, with any further Frontline processes suspended until any police or judicial matters are completed.

2.4.6 The recipient will then either accept the recommendation or decide on an alternative approach, provided they can justify why the proposed approach was not suitable. The final approach must be approved by a member of the Senior Leadership Team or, where no member of the SLT is independent to the matter and if the recipient is not the chair of the board safeguarding, policy and complaints committee then they should seek the chair's advice as part of the decision-making process.

2.4.7 Where the recipient decides on either a) or b), the whistleblower will be informed and feedback will be provided.

2.4.8 The grounds on which no further action is to be taken may include that:

- the recipient is satisfied, on the balance of probabilities, that there is no evidence to support the concern;
- the recipient is satisfied that the discloser is not acting in good faith;
- the matter is already (or has been) the subject of procedures under one of Frontline's other policies and procedures and has been sufficiently dealt with (including appeals processes exhausted where applicable); or
- the matter concerned is already the subject of legal proceedings or has already been referred to the relevant external body.

2.4.9 Where the recipient decides on c) a formal investigation will take place.

2.4.10 Where the recipient decides on d) they will be responsible for reporting the matter and monitoring its progress as appropriate.

Formal investigation



- 2.4.11 The recipient will appoint an investigatory panel of no more than 3 people, each of whom are independent to the matter under investigation.
- 2.4.12 The panel members may be Frontline staff and/or external professionals with relevant expertise.
- 2.4.13 The subject(s) of the investigation will be informed prior to commencement of the formal investigation and will be provided with the evidence (redacted as required). Unless legally required, the anonymity of the whistleblower does not change at this stage except through their consent.
- 2.4.14 The panel will conduct its investigation as sensitively and quickly as possible.
- 2.4.15 Both the whistleblower and person(s) facing the allegations will be offered a meeting with the panel and each can bring a friend or representative.
- 2.4.16 The panel will produce a report in the same format as outlined in 2.4.4. The recipient will then make a determination that might include, but is not limited to:
- a) no further action to be taken, save to inform those involved of the outcome and provide feedback as allowed;
 - b) to refer individuals for appropriate action within existing Frontline policies and procedures;
 - c) to refer systemic issues to the Frontline board for consideration;
 - d) to report matters to an external body;
 - e) to report matters to the police.
- 2.4.17 The whistleblower will not be entitled to be provided with any additional materials gathered either as part of the initial investigation or as part of the formal investigation.
- 2.4.18 A written record of all meetings forming part of an investigation at either stage will be kept by the recipient.
- 2.4.19 The whistleblower will be informed in writing:
- if an investigation was conducted;
 - if that investigation led to action being taken; and



- details of any actions taken that can be shared without breaching data protection requirements.

2.5 Internal review

- 2.5.1 If the whistleblower remains dissatisfied once the above process has been exhausted, they can request a final internal review.
- 2.5.2 The internal review will be undertaken or overseen by the chair of the board safeguarding, policies and complaints committee, unless they were the recipient in the earlier stages. Where this is the case, the chair of the board will nominate another board member to undertake or oversee the review.
- 2.5.3 The review will be a paper-based review of process and will comment only on:
- whether due process was followed; and
 - whether the outcome could have been reached by a reasonable person in receipt of the materials formally considered.
- 2.5.4 The decision of the internal review will be final.

2.6 Reporting and retention

- 2.6.1 The board safeguarding, policy and complaints committee will receive a report of all disclosures and their outcomes once they have been concluded.
- 2.6.2 Records of the process and outcomes will be retained in accordance with Frontline's data retention policy.
- 2.6.3 Records of disclosure will not be kept on formal staff or participant records.

2.7 External disclosure



- 2.7.1 The aim of this policy is to give people both assurance and a mechanism to handle issues internally. As such, external disclosures should not be necessary in most cases. However, the law recognises that in some circumstances it may be appropriate to go to an external body such as a 'prescribed person' as defined under the Public Interest Disclosures Act. The government maintains an up to date [list of prescribed persons](#) and the circumstances under which it would be reasonable to approach them.
- 2.7.2 Frontline recognises no valid reason why a person should disclose via the media or social media without first having given Frontline the opportunity to address the issue through its internal processes or through the external prescribed person route. To do so is to assume culpability without due process and would, in most cases, forfeit legal protection under the Public Interest Disclosure Act. Frontline also reserves the right to consider the matter, particularly if the allegation proves to be false, as an attempt to bring the organisation into disrepute.

Section 4: Annexes

4.1 Advice and support for whistleblowers using the process

- 4.1.1 The Legal & Compliance Manager can provide impartial advice on the implementation of this policy and procedure but cannot provide case specific advice or advocacy support.
- 4.1.2 Participants on the Frontline programme can seek advice and support from the students' union advice team or the NUS.
- 4.1.3 There is an independent charity, Protect, that offers confidential advice around whistleblowing. Contact details can be found on its [website](#).