

## **YOUR RIGHT TO RAISE A CONCERN (WHISTLEBLOWING)**

### **PCC FRAMEWORK & MODEL POLICY**

Date policy was recommended by G&A to Board	March 2018
Date PCC Board last approved policy	June 2018
Date policy was equality screened	March 2018
Name of responsible party	Jackie McNeill

## 1. Introduction

All of us at one time or another may have concerns about what is happening at work. The Patient and Client Council (PCC) 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 PCC itself, it can be difficult to know what to do.

The PCC 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. **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 PCC 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

The PCC 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 PCC;
- assists in the prevention of fraud and mismanagement;
- demonstrates to all staff and the public that the Patient and Client Council 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 PCC roles and responsibilities in the implementation of this policy are set out at **Appendix A.**

### 3. Scope

The PCC 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, Fraud Policy 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 PCC, including permanent, temporary and staff in training working within the PCC, 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 PCC 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 PCC'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, the PCC has a number of avenues available to report your concern. These are included in more detail in the PCC Fraud Policy, Fraud Response Plan and Bribery Policy and are summarised below.

Suspensions 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:

- Head of Operations;
- Head of Development and Corporate Services or
- Whistleblowing Champion – Mrs Joan McEwan (PCC Board Member).

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](http://www.repporthealthfraud.hscni.net) These avenues are managed by Counter Fraud and Probitiy Services (CFPS) on behalf of the HSC and reports can be made on a confidential basis.

The PCC 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 PCC or under its control. The PCC expects all staff and third parties to perform their duties impartially, honestly, and with the highest integrity.

## **5 PCC commitment to you**

### **5.1 Your safety**

The PCC, 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 PCC will not tolerate the harassment or victimisation of anyone who raises a genuine concern.

The PCC 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 PCC reserves the right to take disciplinary action if appropriate.

### **5.2 Confidentiality**

With these assurances, the PCC hopes that you will raise concerns openly.

The PCC 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 below 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, or from one of the external 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. But where you do not think it is appropriate to do this, you can communicate with any of the named people below. Or after raising it with your line manager, you do not feel the matter is resolved, you can also contact one of the following people:

- The Head of Development and Corporate Services
- The Head of Operations
- The Chief Executive
- The Whistleblowing champion – Joan McEwan (Chair of G&A Committee and PCC Board member). Contact should be my email in the first instance – PCC-Whistleblowing@hscni.net

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

If exceptionally, the concern is about the Chief Executive, then it should be made (in the first instance) to the Chair of the PCC, 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 PCC 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 PCC 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 PCC recognises that there may be circumstances where you can raise a concern with an outside body including those listed below:

DHSSPS Fraud Hotline 08000 96 33 96

Public Concern at Work 020 7404 6609 or [www.pcaw.co.uk](http://www.pcaw.co.uk)

Commissioner for Complaints

Progressive House

33 Wellington Place

Belfast

BT1 6HN

0800 343424

Equality Commission

Equality House

7-9 Shaftesbury Square

Belfast

BT2 7DP

028 9050 0600

N.I. Audit Office

106 University Street

Belfast

BT7 1EU

028 9025 1000 or

[whistleblowing@niauditoffice.gov.uk](mailto:whistleblowing@niauditoffice.gov.uk)

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. Conclusion**

While the PCC 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 PCC 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. Equality, Human Rights & DDA**

This policy has been drawn up and reviewed in the light of Section 75 of the Northern Ireland Act (1998) which requires the PCC to have due regard to the need to promote equality of opportunity.

## **11. 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.

## **12. Appendices**

Appendix A – Roles and Responsibilities

Appendix B – Procedure

Appendix C – Advice for Managers

## **APPENDIX A**

### **Roles and Responsibilities**

#### **The Patient and Client Council**

- 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

#### **Chief Executive**

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

#### **Head of Corporate Services**

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

#### **Head of Operations**

- 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

## **Non-Executive Board Member – Whistleblowing Champion**

The RQIA published a review of Whistleblowing arrangements for HSC in September 2016, <https://www.rqia.org.uk/RQIA/files/c6/c6574fa7-2e51-4491-b35b-38de13493a17.pdf>

The report recommended that HSC bodies appoint a non-executive board member with responsibility for oversight of the culture of raising concerns within their organisation. The PCC have acted on this recommendation and the Chair of the G&A Committee is currently our Whistleblowing Champion – Mrs Joan McEwan (Email address: PCC-Whistleblowing@hscni.net).

The Non-Executive Board Member responsible should provide assurance to the Board on the culture promoted in the organisation for staff to raise concerns in an open, no blame culture.

The whistleblowing champion should:

1. Learn about the whistleblowing arrangements in the organisation.
2. Learn about how whistleblowing is promoted to staff in the organisation.
3. Seek assurance on the integrity, independence and effectiveness of relevant policies, training and awareness, processes and assurance, and the protection of whistleblowers.
4. Be made aware of any instance of whistleblowing in the organisation
5. To act as a voice for whistleblowing management and related issues at Board meetings and ensure that any implications arising from items discussed have been considered and appropriately addressed.
6. To work closely with the Head of Development and Corporate Services with regard to monitoring whistleblowing.
7. To be recognised as one of the channels for members of staff to raise their concern with.

The role includes:

- 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 PCC 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 PCC 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.

## **APPENDIX B**

### **THE PROCEDURE FOR RAISING A CONCERN INTERNALLY**

The procedures for raising a concern internally are covered in detail in the following paragraphs:

1. If an individual has a concern about malpractice, they should consider raising it initially with their line manager. This may be done orally or in writing. The individual should specify from the outset if they wish the matter to be dealt with in confidence so that appropriate arrangements can be made. The line manager should raise the concern with their Head of Function, who will notify the Chief Executive of the matter.
2. If an individual feels that they are unable to raise a particular matter with their line manager, for whatever reason, they should raise the matter with the Head of Function directly. Again, the Chief Executive should be informed.

3. If these steps have been followed and the individual still has concerns, or if they feel the matter is so serious that they cannot discuss it with anyone in their office, they should then consider discussing it directly with the Chief Executive or the Whistleblowing Champion - Joan McEwan (PCC Board member).

### **What will the PCC do?**

The PCC is 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 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 service user/client 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 PCC 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 PCC 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 Head of Function.

### **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 our Audit Committee on our whistleblowing caseload and an annual return to the Department of Health setting out the actions and outcomes.

You can raise your concerns formally with the external bodies listed with section 7.

## **APPENDIX C**

### **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.

