

Whistleblowing

The Whistleblowing policy is about the ways in which concerns about any fraud, misconduct or wrongdoing by individuals or officers of LifeLine Projects is reported and properly dealt with.

The Public Interest Disclosure Act 1998, aims to encourage an environment by which workers can raise concerns about malpractice, so that problems can be discovered and dealt with before they reach crisis point. It aims to prevent the sort of crisis that would prompt regulatory action and promote an environment where workers feel safe to raise concerns within their organisations, rather than when they feel driven to approach the media. It is about promoting good relationships and constructive communication within organisations.

Early identification of problems allows them to be dealt with before they cause serious damage. If employees are silent when there is a threat, the cost can be great: for example, in damage to the organisation's reputation, fines, compensation, higher insurance premiums, regulatory investigation or lost jobs.

The key message to all staff is "raise your concerns, even if you are unsure".

LifeLine Projects encourages all individuals to raise any concerns that they may have about the conduct of others in the business or the way in which the business is run. This policy sets out the way in which individuals may raise any concerns that they have and how those concerns will be dealt with.

This policy applies to all staff.

1 What is a qualifying disclosure?

The Public Interest Disclosure Act 1998 provides protection for individuals who raise legitimate concerns about specified matters. These are called "qualifying disclosures". A qualifying disclosure is one made in the public interest by an individual 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
- concealment of any of the above

is being, has been, or is likely to be, committed. It is not necessary for the individual to have proof that such an act is being, has been, or is likely to be, committed - a reasonable belief is sufficient. The individual has no responsibility for investigating the matter - it is LifeLine Projects' responsibility to ensure that an investigation takes place.

An individual who makes such a protected disclosure has the right not to be dismissed, subjected to any other detriment, or victimised, because he/she has made a disclosure.



2 Principles of whistleblowing

- 2.1 Everyone should be aware of the importance of preventing and eliminating wrongdoing at work. Individuals should be watchful for illegal or unethical conduct and report anything of that nature that they become aware of.
- 2.2 Any matter raised under this procedure will be investigated thoroughly, promptly and confidentially, and the outcome of the investigation reported back to the individual who raised the issue.
- 2.3 No individual will be victimised for raising a matter under this procedure. This means that the continued employment and opportunities for future promotion or training of the individual will not be prejudiced because he/she has raised a legitimate concern.
- 2.4 Victimisation of an individual for raising a qualified disclosure will be a disciplinary offence.
- 2.5 If misconduct is discovered as a result of any investigation under this procedure LifeLine Projects' disciplinary procedure will be used, in addition to any appropriate external measures.
- 2.6 The policy does not allow those who have participated in any malpractice to secure or negotiate immunity from disciplinary action. This policy does not guarantee protection for any substantive misconduct the whistleblower owns up to. It is at the discretion of LifeLine Projects, through the disciplinary procedure, to decide what penalty (if any) to apply for his or her misconduct.
- 2.7 Whistleblowing arrangements are not designed to allow those who defraud or damage the organisation to escape punishment.
- 2.8 Maliciously making a false allegation is a disciplinary offence.
- 2.9 An instruction to cover up wrongdoing is itself a disciplinary offence. If told not to raise or pursue any concern, even by a person in authority such as a manager, individuals should not agree to remain silent. They should report the matter to a senior manager.
- 2.10 **Open whistleblowing:** It is best that those who have a whistleblowing concern feel safe to raise the concern. Openness makes it easier for the organisation to assess the issues, to work out how to investigate the matter, to get more information, to understand any hidden agendas, to avoid witch hunts and to encourage trust. LifeLine Projects supports an open approach to whistleblowing.
- 2.11 **Confidential whistleblowing:** Sometimes, employees may feel anxious about identifying themselves at the outset and may request to make a confidential disclosure (i.e. that their name will not be revealed without their consent unless required by law). In these circumstances, the person receiving the report should make clear to the employee/volunteer that, others may deduce (correctly or otherwise) their identity, especially if they have already mentioned the concern to others. Often when an employee/volunteer understands this, they are often prepared to raise the concern openly. Nevertheless, employees may still ask to make a confidential disclosure and this will be considered by the manager to whom the disclosure is reported.

2.12 **Anonymous whistleblowing:** it is difficult to investigate and deter misuse about concerns raised anonymously (when the employee/volunteer does not identify themselves at any stage). For these reasons, LifeLine Projects does not encourage anonymous reporting.

3 Grievances

Where an employee or volunteer claims s/he is being bullied or discriminated against and/or there is a breach of contract then the grievance procedure should be followed.

4 Procedure for whistleblowing

Any investigation will be carried out in accordance with the principles set out above.

| | |
|-----------------------|---|
| <p>Stage 1</p> | <p>In the first instance any concerns should be raised with the individual's line manager unless the individual reasonably believes his/her line manager to be involved in the wrongdoing, or if the individual does not wish to approach their line manager. If an individual believes that their manager is involved or does not wish to approach their manager, they should go to stage 2 of this procedure.</p> <p>If an investigation is required, this may involve the worker and other individuals involved giving a written statement. The individual's statement will be taken into account, and he/she will be asked to comment on any additional evidence obtained.</p> |
| <p>Stage 2</p> | <p>If for any other reason the individual does not wish to approach his/her line manager, he/she should in the first instance contact the Director covering their area. The member of staff may request that their concern is treated in confidence.</p> <p>If the worker is concerned that his/her line manager is involved in the wrongdoing, has failed to make a proper investigation or has failed to report the outcome of the investigations to the board (see below), he/she should inform the director covering their area, who will arrange for another manager to review the investigation carried out, make any necessary enquiries and make his/her own report to the board as in stage 1 above.</p> |
| <p>Stage 3</p> | <p>If an individual reasonably believes a director to be involved in the wrongdoing, or if for any other reason the individual does not wish to approach a director, any concerns should be raised with the Chief Executive Officer. The Chief Executive Officer will undertake an investigation of the matter as detailed above.</p> <p>If an individual believes the Chief Executive Officer to be involved, or for any reason does not wish to approach the Chief Executive, then they should raise their concerns with the Board of Trustees.</p> |
| <p>Stage 4</p> | <p>The line manager (or the person who carried out the investigation) will then report to the board of trustees, which will take any necessary action, including reporting the matter to any appropriate government department or regulatory agency. If disciplinary action is required, the line manager (or the person who carried out the investigation) will report the matter to the human resources department and start the disciplinary procedure. On conclusion of any investigation, the worker will be told the outcome of the investigation and what the board has done, or proposes to do, about it. If no action is to be taken, the reason for this will be explained.</p> |



| | |
|----------------|--|
| Stage 5 | If on conclusion of stages 1, 2 and 3 the individual reasonably believes that the appropriate action has not been taken, he/she should report the matter to the proper authority. The legislation sets out a number of bodies to which qualifying disclosures may be made. These include: HM Revenue & Customs Financial Services Authority Office of Fair Trading Health and Safety Executive Environment Agency Director of Public Prosecutions Serious Fraud Office. |
|----------------|--|

5 Auditors

The Charities Act 2011 section 156, places a duty on the auditors of both a non-company charity and a company charity to report matters of “material significance” to the Charity Commission. This is a separate report from the auditor’s report on the accounts. Auditors are under a duty to report even if it relates to activities in previous years. Auditors are required to report central to the integrity of a charity, including suspected fraud, failures in internal controls causing significant loss, evidence suggesting the charities beneficiaries have been or were put at significant risk of abuse or mistreatment. This duty to report is not covered in detail here, as the duty falls on a third party (the auditors). However, the board of trustees would need to respond to any such report – by undertaking an investigation and monitoring the action plan until completion. The trustees would appoint a suitable person to oversee this investigation.

6 Independent advice and support

Where a member of staff or volunteer wishes to access independent support, they may wish to consider approaching Public Concern at Work (PCAW) who provide independent, confidential advice to workers who are unsure whether or how to raise a public interest concern. PCAWs contact details are:

Whistleblowing helpline number is 020 7404 6609
Advice line email is whistle@pcaw.org.uk

7 Responsibilities

An overview of board and committee duties are given below followed by individual job holder’s responsibilities.

7.1 Board of trustees

Trustees are responsible for directing the affairs of a charity, and ensuring that it is solvent, well-run, and meeting the needs for which it has been set up. Trustees receive a report at least annually (as part of the HR report) about any Whistleblowing investigations. Trustees also receive the fraud log and a report about serious incidents at least annually.



7.2 Senior Management Team meeting (SMT)

The SMT approve this policy. SMT receive a report at least annually (as part of the HR report) about any Whistleblowing investigations; they also receive the fraud log and a report about serious incidents at least annually.

7.3 Chief Executive Officer (CEO)

Has delegated authority from the Trustees for the day-to-day operation of LifeLine Projects. The CEO has responsibility to ensure that the Whistleblowing Policy is implemented throughout the organisation.

7.4 Directors

Ensure that this policy is adhered to in their business areas. They create a culture which encourages early reporting of problems and that continuous improvement is encouraged and rewarded.

7.5 HR Manager

Is the 'designated officer' for logging Whistleblowing allegations. The HR Manager will be responsible for producing reports to the SMT in line with section 8 below, Implementation and Monitoring. The HR manager ensures that there are systems to log who needs to be trained, in what areas and that reports are provided about attendance.

7.6 All managers

Ensure that they are aware of the provisions of this policy and that it is implemented in their work areas. In particular, that staff they manage are:

- aware of the policy and how to report;
- participate in training; and
- encouraged and rewarded for reporting problems early and continually improving what they do.

7.7 All staff

All staff must ensure they comply with this policy. Staff should be aware of the importance of preventing and eliminating wrongdoing at work. Individuals should be watchful for illegal or unethical conduct and report anything of that nature that they become aware of.

8 Implementation and monitoring

8.1 Implementation

All staff will have access to this policy on SharePoint. Training is available from the HR Manager, on request.



8.2 Monitoring

For this policy, the following monitoring processes are in place.

| Standard | Monitoring process |
|--|--|
| Monitoring arrangements for compliance and effectiveness | A report will be provided to SMT whenever an investigation is initiated under this policy. |
| Responsibilities for conducting the monitoring/audit | The HR manager will provide this report, in collaboration with the Director of Finance/Finance Manager (where the auditors have made a report to the Charity Commission under section 156 of The Charities Act 2011). |
| Methodology to be used for monitoring/audit | <p>A summary of each case should be given including:</p> <ul style="list-style-type: none"> • The date, the section of the business, the risk(s) involved and whether they are ongoing • A summary of the concern and its background, the response proposed and any action taken • whether confidentiality was requested/explained/promised • whether the concern was raised with line management • whether feedback was given and any response from the employee • any general observations. <p>The report will form part of the HR report.</p> |
| Frequency of monitoring/audit | <p>If no investigations are undertaken in any one year, a brief, written report stating this (a 'nil return') will be provided to SMT annually, in line with the agenda planner.</p> <p>The annual report should include a completed checklist from the British Standards Institute's (BSi) Whistleblowing Arrangements Code of Practice.</p> |
| Process for reviewing results and ensuring improvements in performance occur | <p>Any investigation reports will include an action plan. SMT will monitor the action plan (at least every 6 months) until it is completed.</p> <p>The completed BSi checklist will note any actions that are proposed to improve compliance.</p> |

8.3 References

British Standards (2008) *Whistleblowing Arrangements Code of Practice* PAS1998/2008. Available at: <http://www.pcaw.org.uk/bsi>

Charity Commission (March 2012) *The Essential Trustee: What you need to know (CC3)*. Available at: <http://www.charitycommission.gov.uk/media/94159/cc3text.pdf>

Charity Commission (July 2012) *Internal Financial Controls for Charities (CC8) – F7 Whistle-blowing Policy*. Available at: <http://www.charitycommission.gov.uk/media/94159/cc3text.pdf>



Charity Commission (March 2012) Guidance for auditors and independent examiners, the duty of auditors to report matters of 'material significance' to the Charity Commission and OSCR. Available at: <http://www.charitycommission.gov.uk/detailed-guidance/protecting-your-charity/guidance-for-auditors-and-independent-examiners/>

Committee on Standards in Public Life (1996) *Third Report*. Available at: <http://www.brad.ac.uk/governance/media/governance/committees/2013-14/Nolan3rdInquiryReport.pdf>

The Charities Act 2011 section 156. Available at: <http://www.legislation.gov.uk/ukpga/2011/25/part/8/chapter/3/crossheading/duty-of-auditors-etc-to-report-matters-to-commission?view=plain>

The Code Steering Group (2010) Good Governance, A Code for the Voluntary and Community Sector. Available at: <http://www.governancecode.org/wp-content/uploads/2012/06/Code-of-Governance-Full1.pdf>

Public Concern at Work. Available at: <http://www.pcaw.org.uk/>

The Public Interest Disclosure Act 1998. Available at: <http://www.legislation.gov.uk/ukpga/1998/23/contents>

9 Related documents

- Disciplinary Policy
- Fraud Policy
- Grievance Policy
- Health and Safety Policy
- Risk Management Strategy
- Safeguarding and Child Protection
- Safeguarding Vulnerable Adults

10 Definitions

The following are a list and description of the meaning of key terms used in this policy.

| Term | Description of Term |
|-----------------------------|--|
| Anonymous whistleblowing | Where the employee/volunteer does not identify him or herself at any stage to anyone. These are the most difficult types of allegations to investigate as impossible to liaise with the employee/volunteer (to seek clarification or more information, to assure them or to give them feedback). It is also difficult to deter misuse. |
| Confidential whistleblowing | When an employee requests, and it is agreed, that their name will not be revealed without their consent unless required by law. |
| Designated officer | Senior officer whom the organization designates to receive whistleblowing concerns. |



| | |
|------------------------|--|
| Grievance procedure | This procedure applies to staff who wish to raise concerns about their own contract of employment. If an employee is concerned that his/her own contract has been, or is likely to be, broken, he/she should use LifeLine Projects' grievance procedure. |
| Public Concern at Work | The independent authority on public interest whistleblowing. |
| Open whistleblowing | Where the employee or volunteer openly raises the whistleblowing concern and does not request confidentiality. This makes it easier for the organisation to assess the concern, gather information and build trust. |
| Whistleblowing | When a member of staff or volunteer raises a concern about a possible fraud, crime, danger or other serious risk that could threaten customers, colleagues, shareholders, the public or the organization's reputation (BSi, 2008). |

This policy meets the requirements of the Statutory Framework for the EYFS 4TH January 2024

| | | | |
|-----------------------------------|-----------|-------------|--------------------------------------|
| Date policy last reviewed/updated | June 2024 | Reviewed by | Julia Ward, Head of Support Services |
| Date of next review/update | June 2025 | | |

