

Whistleblowing Policy

Policy implemented: December 2018
Last reviewed: November 2018
Next review due: November 2020

1. Summary

The Public Interest Disclosure Act (PIDA) is known as the Whistleblowing law. Under PIDA, employers cannot victimise any worker who reports bad practice in good faith.

The purpose of this policy is to create an environment across all Salutem services where staff and volunteers are encouraged to challenge and report bad practice and can do so without fear.

This policy sets out the values, principles and policies underpinning Salutem's approach to whistleblowing. Salutem understands "whistleblowing" to refer to actions taken by an employee or employees to raise concerns about:

- alleged, suspected or observed malpractice
- assessed, identified or perceived risks (e.g. to the safety of service users)
- unethical conduct or possible illegal acts.

Any of the above could harm, or create a risk of harm, to service users, colleagues or the general public.

The policy is created in line with Care Quality Commission recommendations and guidance and the law as stated in the Public Disclosure Act 1998 (and as amended under the Enterprise and Regulatory Reform Act (ERRA) 2013).

The policy should be read and used to complement Salutem's complaints procedure. Salutem recognises that "whistleblowing" is distinct from a complaint in that "whistleblowers" raise their concerns as employees. Complaints about a service are raised by people we support, others acting on their behalf or members of the public. However, it is recognised that similar procedures are followed to respond to complaints and whistleblowing.

2. Document Control

Initial purpose and scope of the new policy/procedure agreed by:	Director of Quality, Governance and Health and Safety
Technical review carried out:	Quality Performance Manager, November 2018
Final quality check carried out:	Quality Performance Manager, November 2018
Date signed off by the Quality Assurance and Risk Management Group (QARM):	November 2018 (Gary Laville)
Date implemented:	December 2018
Version Number:	1.0
Date of the next review:	November 2020
Department responsible:	Quality
Job Title of Lead Person:	Director of Quality, Governance and Health and Safety
Author / Main Contact, including their job title (if different from above):	Quality Performance Manager

In addition to this policy, local authorities and other commissioners may have their own policies, procedures and guidance which Services must comply with. These policies should complement this policy.

However, there may be additional requirements put in place by local authorities and other commissioners and these must be adhered to. Changes must not be made to Saluitem's policies and procedures without corporate approval but, where needed, local procedures should be developed to accompany these.

EQUALITY AND DIVERSITY STATEMENT

The Saluitem Group is committed to the fair treatment of all in line with the Equality Act 2010. An equality impact assessment has been completed on this policy to ensure that it can be implemented consistently regardless of any such factors and all will be treated with dignity and respect.

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This policy must be brought to the attention of all employees.

The controlled version of this policy and its associated documents are available on the eLFY bookshelf.
Printed or downloaded copies are uncontrolled and may not be up to date.

4. Definitions

Whistleblower

A worker that reports certain types of wrongdoing. This is usually something one has seen at work but not always. The wrongdoing disclosed must be in the public interest. This means it must affect others, e.g. the public.

As a whistleblower you are protected by law. You shouldn't be treated unfairly or lose your job because you 'blow the whistle'.

One can raise their concern at any time about an incident that happened in the past, is happening now, or when one believes will happen in the future.

5. Principles

"Whistleblowing" principles can be summarised as follows:

- services should be promoting open, transparent cultures, which encourage staff to act on and report any concerns about practices that fall below acceptable standards
- staff members are the people most likely to observe and be in a position to report on bad practice
- staff members, who raise genuine concerns about harmful practices, which they come across in their work (as described above) must be taken seriously and seen to be acting correctly
- staff members must not be regarded as "troublemakers" to be penalised in some way by their employing organisation
- the employing organisation must listen to and thoroughly investigate every concern raised by a staff member as they would if the matter was raised as a complaint by a service user or others acting on their behalf

6. Areas of Governance

This policy and its associated guidance has been written with expert contribution from appropriate stakeholders. The Quality Assurance and Risk Management Group (QARM) will monitor, reflect on and gain organisational learning from the implementation of this policy. This policy will be reviewed and updated two years from implementation by QARM unless legal changes demand a more timely amendment.

The application of this policy and its associated guidance is mandatory for all services staff, volunteers, agency staff and all other Salutem representatives. Staff understanding of this policy and associated guidance will be assured through training, assessment of competency and supervision.

7. Areas of Responsibility

All members of staff, volunteers and contractors working for Salutem are responsible for reporting any bad practice they come into contact with. Staff members have a duty of care, moral and legal obligations to report all incidents where they consider vulnerable adults or colleagues to have been harmed or are at serious risk of being injured or harmed during their work.

Salutem considers that these obligations to report such incidents, which include suspected breaches of care or staff's professional codes of conduct, override any other considerations such as loyalty to colleagues.

Any member of staff who witnesses or suspects abuse by another member of staff should report the matter without delay to their supervisor or manager. The manager will accept responsibility for the actions that follow and will assure the "whistleblower" that they have acted correctly by reporting the matter, will not be victimised and their confidentiality assured unless there are overriding legal reasons for disclosing their identity.

It is recognised that there may be occasions when the staff member does not feel confident or able to report in the first instance to the manager. In these circumstances the "whistleblower" might need to take their concerns to a more senior manager or the registered person.

Salutem accepts the right and obligation of any staff member who thinks that their concerns are not being or might not be properly responded to or addressed, to report their concerns to an outside authority. This could be the Police, the Local Safeguarding Adults Authority or the Care Quality Commission. Each of these organisations can be expected to respond in line with their respective procedures. Again, in line with its Public Disclosure Interest Act responsibilities, Salutem will not penalise or victimise any staff member who responsibly reports their concerns in any of these ways.

8. Learning and Development

Salutem is committed to ensuring that all staff are aware of what is expected of them so that everyone is appropriately supported. Staff should speak to their line manager in relation to their learning needs using supervision and the Performance and Development Process (PDP).

9. Associated Documents

Whistleblowing Guidance

Complaints Policy and Procedure

Safeguarding Policy, Procedure and Guidance

Disciplinary Policy and Procedure

Code of Conduct

10. Useful Links

Whistleblowing Helpline for NHS and Social Care Staff:

Tel. 08000 724 725);

email: enquiries@wbhelpline.org.uk

How to Contact the CQC:

Tel. 03000 616161

email: enquiries@cqc.org.uk

<http://www.cqc.org.uk/content/report-concern-if-you-are-member-staff>

Care Quality Commission Leaflet Raising a Concern with CQC: available from www.cqc.org.uk

How to Contact CSSIW

Phone us: 0300 7900 126

Email us: CIW@gov.wales

Contact Ofsted about Concerns

Email CIE@ofsted.gov.uk

Contact Ofsted about concerns

0300 123 4666

Public Concern at Work:

Tel. 020 7404 6609

www.pcaw.org.uk (for advice and guidance on ways forward).

11. Version Control

This is a controlled document. As a controlled document, any printed copies of this document, or saved onto local or network drives should be actively monitored to ensure the latest version is always available.

Version Number	Date	Status	Changes
V0.1	7 Nov 2018	Draft	Update
V1.0	3 Dec 2018	Final	Completion of Document Control and addition of Equality Impact Assessment Tool

12. Equality Impact Assessment Tool

To be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

		Yes/No	Comments
1.	Does the document/guidance affect one group less or more favourably than another on the basis of:	No	
	• Race	No	
	• Ethnic origins (including gypsies and travellers)	No	
	• Nationality	No	
	• Gender (including gender reassignment)	No	
	• Culture	No	
	• Religion or belief	No	
	• Sexual orientation	No	
	• Age	No	
	• Disability - learning disabilities, physical disability, sensory impairment and mental health problems	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are there any valid exceptions, legal and/or justifiable?	No	
4.	Is the impact of the document/guidance likely to be negative?	No	
5.	If so, can the impact be avoided?	-	
6.	What alternative is there to achieving the document/guidance without the impact?	-	
7.	Can we reduce the impact by taking different action?	-	

If you have identified a potential discriminatory impact of this procedural document, please refer it to the author of this document, together with any suggestions as to the action required to avoid/reduce this impact.

For advice in respect of answering the above questions, please contact Human Resources