**FREEDOM TO SPEAK UP:**

**Raising Concerns (Whistleblowing) Policy**

# Introduction

The University is committed to the highest standards of openness, probity and accountability. This policy is designed to encourage staff and other members of the University to speak up if they have any concerns at work as this will help the University to address any issues, improve the way we operate and the services we provide to students and other stakeholders.

The guidance below is designed to give reassurance to staff that they should not feel worried or concerned about speaking up or raising concerns. The University’s Senior Management Team and Court are committed to an open and honest culture.

The principles in the policy are supported by the Public Interest Disclosure Act 1998 which gives legal protection to employees against being unfairly dismissed or penalised by their employers as a result of publicly disclosing certain serious concerns. Employees are required not to disclose confidential information about the employer’s affairs, however, where an individual discovers information which he/she believes shows malpractice or wrongdoing within the organisation, the legislation ensures that this information can be disclosed without fear of reprisal and that it may be raised independently of line management.

# Who is covered by this Policy?

This policy applies to all individuals working at all levels in the University including the Principal, Deputy Principals, Lecturers, Managers, Consultants, Part time and Fixed Term workers, casual staff, agency staff and other members of the University including students as defined by Ordinance 64 such as members of Court (collectively referred to as “staff and other members of the University” in this Policy).

# Scope of Policy

A number of policies and procedures are already in place whereby members can seek redress of personal concerns such grievance, complaints, harassment and discipline procedures. This policy is intended to cover concerns which are in the public interest rather than questioning financial or business decisions properly taken by the University.

 This policy is designed to allow staff or other members of the University to raise, at a high level, concerns and/or disclose information which the individual believes shows malpractice or wrongdoing (“a public interest disclosure”). Such acts might include:

* financial malpractice or impropriety or fraud
* dangers to health and safety or the environment
* criminal activity
* academic or professional malpractice
* improper conduct or unethical behaviour
* failure to comply with a legal obligation or with the Statutes and Ordinances of the University
* attempts to conceal any of the above.

If you are unsure as to whether something is within the scope of this Policy you should raise the matter anyway. It does not matter if it turns out to be a mistake as long as you are genuinely concerned.

# Safeguards

## 4.1 Protection

This policy is designed to offer protection to staff and other members of the University who raise a concern:

i. in good faith, and

ii. in the reasonable belief of the individual raising the concern that it tends to show malpractice.

It is understandable that people speaking up may be worried about possible repercussions. We aim to encourage openness and will support staff or other members of the University who raise genuine concerns in good faith under this policy, even if they turn out to be mistaken.

Staff or other members of the University will not suffer any detrimental treatment as a result of raising a concern in good faith. Detrimental treatment such as dismissal, disciplinary action, threats or other unfavourable treatment connected with raising a concern will not be tolerated. If any member of staff or other member of the University believes that they have suffered any such treatment, they should inform the Designated Person immediately. If the matter is not remedied they should raise it formally using the University’s Grievance Procedure.

Staff or other member of the University must not threaten or retaliate against people raising concerns in any way. Anyone involved in such conduct will be subject to disciplinary action.

The individual will also be protected if they make the disclosure to an appropriate person/body under paragraph 5.5 below. However, it is reasonable for the University to expect staff and other members of the University in the first instance to use this Policy to raise concerns of malpractice or wrongdoing rather than air their complaints outside the University.

## 4.2 Confidentiality

The University hopes that staff or other members of the University will feel able to voice concerns openly under this Policy. The University will, as far as reasonably practicable, treat such disclosures in a confidential and sensitive manner. The University will endeavour to keep the identity of the individual making the allegation confidential so long as it does not hinder or frustrate any investigation. However, if required as part of the investigation process the source of the information may have to be revealed and the individual making the disclosure may need to provide a statement as part of the evidence required. If it is necessary for anyone to know the identity of the person making the allegation we will discuss it with the individual concerned.

## 4.3 Anonymous Allegations

The University encourages individuals to put their name to any disclosures they make and does not encourage staff or other member of the University to make disclosures anonymously. Concerns expressed anonymously are much less powerful and proper investigations may be more difficult or impossible if the University cannot obtain further information from the person making the allegation. However, anonymous allegations will still be considered by the University and acted upon at the University’s discretion.

In exercising this discretion, the factors to be taken into account will include:

* the seriousness of the issues raised;
* the credibility of the concern; and
* the likelihood of being able to confirm the allegation from attributable sources.

## 4.4 Untrue Allegations

If an individual makes an allegation in good faith, which is not confirmed by subsequent investigation, no action will be taken against that individual. If, however, an individual makes malicious or vexatious allegations (and particularly if he or she persists in making them), disciplinary action may be taken against him or her.

# Procedures for Making a Disclosure

## 5.1 Initial Step

The individual should make the disclosure to the Designated Person who will normally be the University Secretary. The Designated Person should also be contacted if the individual would like to discuss the matter informally in the first instance. As soon as a matter of concern is formally raised the Designated Person should immediately inform the Principal and the Chair of Court unless requested not to do so by the person making the disclosure.

In cases involving financial malpractice, the University Secretary should act throughout in close consultation with the Principal, as the Designated Accounting Officer for the University’s public funding. If the disclosure is about the University Secretary then the disclosure should be made to the Principal.

If the individual does not wish to raise the matter with either the University Secretary or the Principal, then he or she may raise it with the Chair of the Audit Committee if the issue falls within the purview of that Committee or with the Chair of Court. The contact details for each of the contacts referred to are at the end of this Policy.

## 5.2 Process

The Designated Person will consider the information made available to him/her and decide on the scope and form of investigation to be undertaken. This may be:

* to investigate the matter internally;

or

* to refer the matter to the police;

or

* to call for an independent inquiry.

If the decision is that an investigation should be conducted by more than one of these means, the Designated Person should satisfy him/herself that such a course of action is warranted, the possibility of double jeopardy notwithstanding.

Where the matter is to be the subject of an internal inquiry, the Designated Person will then consider how to establish whether there is a prima facie case to answer. This consideration will include determining:

* who should undertake the investigation;
* the procedure to be followed; and
* the scope of the resulting report.

## 5.3 Investigation

Normally an independent officer of the University will undertake this investigation and will report his/her findings to the Designated Person. Investigations should not be carried out by the person who will have to reach a decision on the matter. Any investigation will be conducted as sensitively and speedily as possible.

Where a disclosure is made, the person or persons against whom the disclosure is made will be told of it, the evidence supporting it and will be allowed to comment before any investigation or other action is concluded.

As a result of this investigation other internal procedures may be invoked, including:

* disciplinary;
* grievance;
* harassment;

or it may form the basis of a special investigation.

In some instances it might be necessary to refer the matter to an external authority for further investigation.

## 5.4 Feedback and Review

The Designated Person will aim to keep the person making the disclosure informed of what action, if any, is to be taken and the progress of any investigation and its likely timescales. However, the need for confidentiality may prevent the University giving specific details of the investigation or any disciplinary action taken as a result.

If no action is to be taken then the individual concerned should be informed of the reason for this and allowed the opportunity to make the disclosure again to another appropriate person. For example, if the initial disclosure was made to an Officer of the University then the subsequent disclosure might be made to the Chair of the Audit Committee or Chair of Court. This other person will consider all the information presented, the procedures that were followed and the reason for not taking any further action. The outcome of this will be either to confirm that no further action is required or that further investigation is required and will follow the procedures referred to in 5.2 and 5.3 above.

## 5.5 External Disclosures

The aim of this policy is to provide an internal mechanism for reporting, investigating and remedying any wrongdoing in the University. In most cases members of staff or other member of the University should not find it necessary to alert anyone externally. The law does recognise that in some circumstances it may be appropriate for concerns to be reported to an external body such as a regulator. This includes bodies such as;

* the University’s External Auditors
* the Scottish Ministers through the Office of the Scottish Charity Regulator (OSCR)
* the Office of the Scottish Information Commissioner (OSIC)
* the Information Commissioner’s Officer (ICO)
* Scottish Public Services Ombudsman (SPSO)

It will very rarely if ever be appropriate to alert the media. The University strongly encourages you to seek advice before reporting a concern to anyone external. The independent whistleblowing charity, Public Concern at Work, operates a confidential helpline. They also have a list of prescribed regulators for reporting certain types of concern. Their contact details are at the end of this policy.

## 5.6 Reporting of Outcomes

A report of all disclosures and any subsequent actions taken will be made by the Designated Person who will retain such reports for a period of three years. A detailed report of the investigation and any outcomes will be made to the Audit Committee where the issue falls within its purview, and, in other cases, a report in summary form will be provided as a means of allowing the Committee to monitor the effectiveness of this procedure.

# Responsibility for success

The Audit Committee has overall responsibility for this policy, and for reviewing the effectiveness of actions taken in response to concerns raised under this policy.

The Designated Person has day-to-day operational responsibility for this policy and must ensure that all managers and other staff are familiar with it.

All staff are responsible for the success of this policy and should ensure that they use it to disclose any suspected danger or wrongdoing.

| Authors | Policy & Planning and HR&OD |
| --- | --- |
| Originally approved by Court | 25 June 2012 |
| Revision approved by Court | 17 June 2019 |
| Next review due | June 2024 |

**Appendix 1**

**Contacts Details**

| **Key people/bodies** | **Contact details** |
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| Designated Person:University Secretary | 01786 467018/Extn. 7018 or university.secretary@stir.ac.uk |
| Or in the absence of the University Secretary: | 01786 467030/Extn. 7030 or deputy.secretary@stir.ac.uk |
| Principal  | 01786 467012/Extn. 7012 or principal@stir.ac.uk |
| Chair of Court | courtchair@stir.ac.uk |
| Chair of the Audit Committee | auditchair@stir.ac.uk |
| Public Concern at Work  | **020 3117 2520** or whistle@protect-advice.org.uk  |