



IMPACTFUL GOVERNANCE
Community Interest Company

“Creating sustainability by imbuing independence and strength into community organisations; supporting effective and efficient services.”

Whistleblowing Policy 2020

Introduction

Impactful Governance seeks to conduct its business honestly and with integrity at all times. However, we acknowledge that all organisations face the risk of their activities going wrong from time to time, or of unknowingly harbouring malpractice. We believe we have a duty to take appropriate measures to identify such situations and attempt to remedy them. By encouraging a culture of openness and accountability within the organisation, we believe that we can help prevent such situations occurring. We expect all staff to maintain high standards and to report any wrongdoing that falls short of these fundamental principles. It is the responsibility of all workers to raise any concerns that they might have about malpractice within the workplace.

This is not a procedure in which the employee will be asked to “prove” that their suspicions are well founded. It is not designed to replace the grievance procedure which should be used where an employee is aggrieved about their own situation.

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The aim of this policy is to ensure that our workers are confident that they can raise any matters of genuine concern without fear of reprisals, in the knowledge that they will be taken seriously and that the matter will be investigated appropriately and regarded as confidential.

The following guidance sets out the procedure by which staff can report concerns about workplace practices.

This policy is for guidance only and does not form part of the employee’s contract of employment.

1. Legal Framework

Whistleblowing is the disclosure of information by an employee or worker which relates to some danger, fraud or other illegal or unethical conduct in the workplace. The Employment Rights Act 1996 as amended by the Public Interest Disclosure Act 1998 governs the making of disclosures concerning workplace activities and is intended to protect employees who blow the whistle on bad practice from being subjected to any detriment or unfairly dismissed as a result.

2. Responsibility for implementing this policy

2.1 The Board of Directors has overall responsibility for Impactful Governance's policy on whistleblowing, but has delegated day-to-day responsibility for overseeing and implementing it to the Chief Executive. Responsibility for monitoring and reviewing the operation of the policy and any recommendations for change within the organisation resulting from investigations into complaints under the policy lies with the Chief Executive.

2.2 Managers have a specific responsibility to facilitate the operation of this policy and to ensure that workers feel able to raise concerns without fear of reprisals in accordance with the procedure set down below. To facilitate this process, managers will be given training on the relevant legal and operational framework and best practice.

2.3 All workers are responsible for the success of this policy and should ensure that they take steps to disclose any wrongdoing or malpractice of which they become aware.

3. Who is covered by this policy?

This policy applies to all individuals working for Impactful Governance at all levels and grades, whether they are senior managers, employees, contractors, trainees, or volunteers.

4. What disclosures are covered?

4.1 This policy is distinct from our Grievance Procedure. If you have a complaint relating to your personal circumstances in the workplace then you should use the Grievance Procedure. Concerns about malpractice within the organisation which falls within the categories outlined in paragraph 4.2 and affects or could affect, for example, customers, service users, members of the public or other workers should be raised using the procedure set out in paragraph 6.

4.2 You should use this policy if you have a genuine concern that there are reasonable grounds for believing that:

- (a) a criminal offence has been committed, is being committed, or is likely to be committed; or
- (b) a person has failed, is failing, or is likely to fail to comply with their legal obligations; or
- (c) a miscarriage of justice has occurred, is occurring, or is likely to occur; or
- (d) the health and safety of any individual has been, is being, or is likely to be endangered; or
- (e) the environment has been, is being or is likely to be damaged; or
- (f) any of the above are being, or are likely to be, deliberately concealed.

4.3 In the context of Impactful Governance's business, particular concerns which may fall within the terms of this policy include, for example, breach of our code of conduct, confidentiality policy, financial fraud, harassment occurring to others and health and safety. In general, this policy covers actions or omissions you consider are illegal, contrary to policy or established procedure or outside the scope of an individual's authority, actions which could damage Impactful Governance's reputation and conflicts of interest. However, only disclosures concerning those actions falling strictly within the categories in paragraph 4.2 will be eligible for the relevant statutory protection.

4.4 We value any concerns reported in good faith under this procedure. If you are uncertain whether the matters concerning you are within the scope of this policy (for example, if you are suspicious but uncertain as to whether the law has been broken, or whether a person is acting outside the scope of their authority), we encourage you to report the concerns to the Chief Executive in accordance with the procedure set out in paragraph 6.

5. To whom should a disclosure be made?

5.1 We recognise that you may not feel comfortable discussing concerns with your direct line manager. For the purposes of this procedure you are asked, in the first instance, to raise concerns about any form of malpractice falling within the categories outlined in paragraph 4 with the Chief Executive.

- 5.2 If the disclosure is extremely serious or in any way involves the Chief Executive, you should report it directly to the Customer Service Director.
- 5.3 We will always endeavour to handle investigations promptly and fairly, but if you have made a disclosure under the procedure outlined in paragraph 6 and you are not satisfied with the investigation or its conclusion, you should write directly to the Chief Executive detailing your concerns.
- 5.4 We envisage that disclosures will be most likely to relate to the actions of our workers, but they may also relate to the actions of a third party, such as a client. It may be appropriate for you to raise your concerns directly with the third party where you believe that the malpractice identified relates solely or mainly to their conduct or a matter which is their legal responsibility.

However, we would ask that you consult the Chief Executive before speaking to the third party.

- 5.5 The aim of this policy is to provide an internal mechanism for reporting, investigating and remedying any workplace wrongdoing. It is therefore hoped that it will not be necessary for workers to alert external organisations. However, in very serious circumstances, or following an internal report which has not been addressed, we recognise that it may be appropriate for you to report your concerns to Royal Mencap before approaching an external body, such as a regulator.

6. How should a disclosure be made?

- 6.1 You can raise your concerns with the Chief Executive orally or in writing. You must state that you are using the Whistleblowing Policy and specify whether you wish your identity to be kept confidential. The Chief Executive will ask you to formalise your concerns in writing either before or after the first meeting. The Chief Executive will acknowledge receipt of your formal written disclosure and keep a record of further action taken.
- 6.2 You are entitled to be accompanied by a workplace colleague or union representative at any meeting with the Chief Executive
- 6.3 under this procedure. Your companion will be asked to respect the confidentiality of your disclosure and any subsequent investigation.
- 6.4 We recognise that disclosures made under this policy may involve highly confidential and sensitive matters and that you may prefer to make an anonymous disclosure. However, we regret that we cannot guarantee to investigate all anonymous allegations. Proper investigation may prove impossible if the investigator cannot obtain further information from you, give you feedback, or ascertain whether your disclosure was made in good faith. It is preferable for whistleblowers to reveal their identity to the Chief Executive and measures can be taken to preserve confidentiality if appropriate (see paragraph 8 on confidentiality).

7. Investigation of disclosure

7.1 Impactful Governance is committed to investigating disclosures fully, fairly, quickly and confidentially where circumstances permit. Following your submission of a formal written disclosure, the Chief Executive will acknowledge receipt within 7 working days and make appropriate arrangements for investigation.

7.2 The length and scope of the investigation will depend on the subject matter of the disclosure. In most instances, the Chief Executive will carry out an initial assessment of the disclosure to determine whether there are grounds for a more detailed investigation to take place or whether the disclosure is, for example, based on erroneous information. In any event a report will be produced and copies will be provided to the Customer Service Director and, where appropriate, you will also receive a copy. If you are dissatisfied with the investigation or its conclusion then you should refer to paragraph 5.3.

7.3 If a longer investigation is considered necessary, we will usually appoint an investigator or investigative team including personnel with experience of operating workplace procedures or specialist knowledge of the subject matter of the disclosure. Separate personnel will be asked to make a judgment on the report submitted by the investigator (or investigative team). Recommendations for change will also be invited from the investigative team to enable us to minimise the risk of the recurrence of any malpractice or impropriety which has been uncovered. The Chief Executive will then be responsible for reviewing and implementing these recommendations.

7.4 So far as the Chief Executive considers it appropriate and practicable, you will be kept informed of the progress of the investigation. However, the need for confidentiality may prevent us giving you specific details of the investigation or actions taken. It is not normally appropriate to set a specific timeframe for completion of investigations in advance, as the diverse nature of disclosures contemplated makes this unworkable. We will, however, aim to deal with all disclosures in a timely manner and with due regard to the rights of all individuals involved.

7.5 We recognise that there may be matters that cannot be dealt with internally and in respect of which external authorities will need to be notified and become involved either during or after our investigation. We will endeavour to inform you if a referral to an external authority is about to or has taken place, although we may need to make such a referral without your knowledge or consent if we consider it appropriate.

8. Confidentiality

Every effort will be made to keep the identity of an individual who makes a disclosure under this policy confidential, at least until any formal investigation is under way. In order not to jeopardise the investigation into the alleged malpractice, you will also be expected to keep the fact that you have raised a concern, the nature of the concern and the identity of those involved confidential. There may, however, be circumstances in which, because of the nature of the investigation or disclosure, it will be necessary to disclose your identity. This may occur in connection with associated disciplinary or legal investigations or proceedings. If in our view such circumstances exist, we will make efforts to inform you that your identity is likely to be disclosed. If it is necessary for you to participate in an investigation, the fact that you made the original disclosure will, so far as is reasonably practicable, be kept confidential and all reasonable steps will be taken to protect you from any victimisation or detriment as a result of having made a disclosure. It is likely, however, that your role as the whistleblower could still become apparent to third parties during the course of an investigation.

9. Protection and support for whistleblowers

9.1 No member of staff who raises genuinely-held concerns in good faith under this procedure will be dismissed or subjected to any detriment as a result of such action. Detriment includes unwarranted disciplinary action and victimisation. If you believe that you are being subjected to a detriment within the workplace as a result of raising concerns under this procedure, you should inform the Chief Executive or other appointed person in their absence immediately. Workers who victimise or retaliate against those who have raised concerns under this policy will be subject to disciplinary action.

9.2 If an investigation under this procedure concludes that a disclosure has been made maliciously, vexatiously, in bad faith or with a view to personal gain, the whistleblower will

be subject to disciplinary action. Those choosing to make disclosures without following this procedure or anonymously may not receive the protection outlined in paragraph 9.1.

10. Recording

At the end of the procedure the Chief Executive has a responsibility to register the nature of the concern and make a record of the outcome in the Whistleblowing Record Book. The purpose of this record is to ensure that a central record is kept which can be cross-referenced with complaints or representations from people who use the service, in order to monitor any common patterns of concern.

11. Corrective action and compliance

As part of the investigation into disclosures made under this policy, recommendations for change will be invited from the investigative team to enable Impactful Governance to minimise the risk of the recurrence of any malpractice or impropriety which has been uncovered. The Chief Executive will be responsible for reviewing and implementing these recommendations in the future and for reporting on any changes required to the Executive Directors.

12. Monitoring and review of policy

12.1 This policy reflects the law and Impactful Governance's practice as at October 2020. The Chief Executive will be responsible for reviewing this policy from a legislative and operational perspective at least annually and may update it in between routine intervals.

12.2 The Chief Executive has responsibility for ensuring that any personnel who may be involved with administration or investigations carried out under this policy receive regular and appropriate training to assist them with these duties.

12.3 Staff are invited to comment on this policy and suggest ways in which it might be improved by contacting the Chief Executive.

This policy and the consequential procedures have been adopted by:
"Impactful Governance - Community Interest Company" (the organisation) by its Directors.

Date of last review	October 2020
Date of next review	August 2021
Date it was first implemented	August 2017
Author(s)	Directors
Audience	All Employees, Volunteers and work placements
Other relevant policies and/or procedures	All Policies & Procedures
Where it is saved	www.ig-cic.org.uk

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