Whistleblowing Policy
Version Number 4.0

Effective from February 2022

Author: General Counsel
Legal and Compliance Services
## Document Control Information

### Revision History incl. Authorisation: (most recent first)

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<td>A Hartley</td>
<td>Updates to Government website links</td>
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<td>A Hartley</td>
<td>Cessation of Expolink Hotline reporting and introduction of Whistleblowing reports via functional email address</td>
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<td>22/10/20 General Counsel 24/09/20 G NEC 22/09/20 ARC</td>
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<td>C Price</td>
<td>General review and minor changes. Amendment of annual reporting responsibility from ARC to G NEC</td>
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<td>C Price</td>
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<td>HR</td>
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### Policy Management and Responsibilities:

**Owner:** This Policy is issued by the General Counsel, who has the authority to issue and communicate policy on 22 October 2020 and has delegated day to day management and communication of the policy to all University staff.

**Others with responsibilities (please specify):** All subjects of the Policy will be responsible for engaging with and adhering to this policy.

### Author to complete formal assessment with the following advisory teams:

1. **Equality Analysis (E&D, HR)**
   *Submitted March 2017.*
   *Click Here to access form*

2. **Legal implications (LPG)**
   *Discussed with University Secretary and Head of Quality and Enhancement.*

3. **Information Governance (LPG)**
   *N/A*

4. **Student facing procedures (QEO)**
   *N/A*

5. **UKVI Compliance (Student Admin)**
   *N/A*

### Consultation:

- **Staff Trades Unions via HR**
- **Students via USSU**
- **Relevant external bodies (specify)**
  *N/A*

### Review:

- **Review due:** October 2022

- **Document location:** [https://testlivesalford.ac.sharepoint.com/sites/Legal](https://testlivesalford.ac.sharepoint.com/sites/Legal)
Document Control Information

The owner and author are responsible for publicising this policy document.
1.0 Purpose

The purpose of this policy is to specify the University Whistleblowing Policy (sometimes known as ‘making a disclosure in the Public Interest’ or ‘Public Interest Disclosure Policy’) for all Members of the University Community.

Whistleblowing is the process by which an employee in an organisation raises concerns about possible unethical behaviour, fraud, crime, danger or other serious risk that could threaten students, customers, colleagues, stakeholders, the public or the University’s own reputation. Essentially whistleblowing is the raising of a concern about a danger or risk so that it may be investigated.

This policy has been developed in the context of the following legislation:

➢ Employment Rights Act 1996
➢ Public Interest Disclosure Act 1998 (PIDA)
➢ Bribery Act 2010
➢ Enterprise and Regulatory Reform Act 2013

2.0 Scope

This policy applies to all Staff, Associates and all members of University Council (and its Committees) hereafter known as ‘Members of the University Community’. This policy does not apply to students, the Students’ Union, conference delegates or visitors, unless they are deemed employees of the University. Staff at affiliated or accredited organisations should usually follow their own whistleblowing policy and procedure. Where disclosures from an affiliated or accredited partner are received by the designated officer, he / she will determine whether any action is required by the University (action may be required for example in situations where there is potential impact on the reputation of the University of Salford).

The policy is designed to enable Members of the University Community to raise concerns at a high level and/or disclose information which the individual believes to show serious malpractice and/or impropriety within the organisation. The disclosure should be in the ‘public interest’ and, therefore, the policy cannot be used to raise purely private matters (e.g. relating to a member’s individual contract) or in relation to a grievance which seeks to redress a wrong done to oneself.

The policy is not designed to provide an avenue for Members of the University Community to question financial or business decisions taken by the University and it cannot be used as an avenue to reconsider matters which should or have already been addressed under other associated policies (see Related Documentation)

3.0 Policy Statements

3.1 Protected Disclosure

The University is committed to the highest standards of ethics, openness, probity and accountability. It seeks to conduct its affairs in a responsible manner, taking into account the requirements of the funding bodies and the standards in public life set out in the reports of the Nolan Committee and the associated legislation (see Purpose).
It requires all employees and other members of the University Community to conduct themselves in a manner consistent with these values.

Within the UK, there is legal protection to employees against being unfairly dismissed; penalised by their employer; or harassed by their colleagues if they make a disclosure (that is in the public interest) about wrongdoing / malpractice in their organisation.

All Members of the University Community are protected from unfair dismissal or being penalised or harassed as a Whistleblower if they:

- Reasonably believe that malpractice (Section 3.2) in the workplace is happening, has happened in the past or is likely to happen in the future;
- Are making the disclosure in the public interest; and
- Follow the whistleblowing procedure (Section 3.3)

### 3.2 Qualifying Disclosure

A ‘qualifying disclosure’ means any disclosure of information where the Member of the University Community reasonably believes (and it is in the public interest to report it) that one or more of the following matters is either happening, has taken place or is likely to happen in the future

- A criminal offence;
- The breach of a legal obligation;
- A miscarriage of justice;
- A danger to the health and safety of any individual (includes risks to the general public as well as other employees or students of the University);
- Damage to the environment;
- Deliberate attempt to conceal any of the above.

### 3.3 Whistleblowing Procedure – how to make a disclosure

A flowchart outlining the whistleblowing procedure is at Appendix 1. Disclosures or ‘blowing the whistle’ on malpractice should be made as specified below:

I. Where Members of the University Community are able, they should make the disclosure in writing to the General Counsel (as the designated officer). Where that individual is the subject of the disclosure it should be made to the Chair of the University Council’s Governance, Nominations & Ethics Committee (GNEC). The disclosure should be submitted by email to: whistleblowingreports@salford.ac.uk.

II. Where Members of the University Community feel the University:

- Would cover up the alleged malpractice;
- Would treat them unfairly if they complained; or
- If they have previously made the disclosure to their employer (including a disclosure to the designated officer, or as appropriate to the Chair of GNEC) and they have not acted upon it.

they should tell an independent prescribed person or body about the malpractice. It must be the correct prescribed person or body for the issue.
Below is a link to the list of the prescribed people and bodies to whom a disclosure can be made

https://www.gov.uk/whistleblowing/who-to-tell-what-to-expect

3.4 PRINCIPLES FOR HANDLING A DISCLOSURE (and any subsequent investigation)

- All concerns raised by an individual will be treated fairly and properly;
- Disclosures will be treated in a confidential and sensitive manner and all related material will be stored securely;
- The information produced when handling a disclosure will be kept confidential, limiting access to those people relevant to the investigation. This includes the identity of the individual making a disclosure (where the identity is known);
- Request and investigation of ICT activity logs will be processed via the IT Security Emergency Response Team (ITSERT) (see Related Documentation section for further information);
- Official written records will be kept at each stage of the whistle-blowing investigation process;
- Any individual making a disclosure can retain their anonymity unless they agree otherwise. It must be noted that anonymous concerns carry less credibility and the University will have discretion whether to continue with an anonymous disclosure. In exercising discretion, consideration will be given to:
  - The seriousness of the issues raised
  - The degree of credibility of the concern
  - The likelihood of confirming the allegation from alternative credible sources.
- Disclosures will be investigated as sensitively and quickly as possible.
- The University will not tolerate reprisals against, or harassment or victimisation of any individual raising a genuine concern that is in the public interest.
- On receipt of the disclosure, the designated officer will consider the disclosure and the information made available to him/her and decide whether prima facie (on the face of it) the disclosure falls within the scope of this policy or whether it would be more appropriately considered through another policy.
- The designated officer will issue an acknowledgement of receipt of the disclosure to the individual making the disclosure (where their identity is known).
- Where the disclosure falls within the scope of the Whistleblowing Policy, the designated officer will decide whether to:
  - Appoint someone internal to the University to lead an investigation
  - Appoint someone external to the University to lead an independent inquiry, or
  - Refer the matter to the police for investigation.
- Where the matter is to be investigated internally within the University, the investigator will normally be a member of the University Management Team independent of the area in which the malpractice or impropriety is
alleged to have occurred.

Where reasonably practicable the investigation should be completed within 20 working days.

3.5 **Untrue Allegations**

If an individual makes an allegation in good faith, which is not confirmed by subsequent investigation, no action will be taken against the individual.

If an individual makes malicious or vexatious allegations, and particularly if that individual persists in making malicious or vexatious allegations, disciplinary action may be taken against the individual concerned.

3.6 **Action Following Investigation of Disclosure**

Once an investigation (whether internal or independent inquiry) has been completed, a written report will be submitted to the designated officer who will determine what action, if any, should be taken in the circumstances. This might include invoking other University Policies or reference to an external agency as appropriate. These may include:

- Police
- Office for Students
- HM Revenue and Customs;
- Health and safety Executive;
- Office of Fair Trading;
- Environment Agency;
- Serious Fraud Office;
- Director of Public Prosecutions.

3.7 **Summary Reporting of Outcomes**

The individual who made the disclosure will, where their identity is known, be informed of the outcome of the investigation of the disclosure. If no action is to be taken, the individual will be informed of the reason for this and advised that, if they are dissatisfied with this outcome, they may escalate the disclosure to the Chair of the Governance, Nominations and Ethics Committee (GNEC). If the original disclosure was made to that individual, the disclosure can be made to the Chair of the University Council. This person will either confirm the decision that no further action be taken or will determine what further action is to be taken and the process by which that action will be taken.

The designated officer will produce an annual summary of all disclosures and their subsequent investigation, determination and resolution for GNEC (which will in turn report to the University Council). Summary reports will not identify the individuals who made the disclosures or the subject of the disclosures. Information relating to whistleblowing disclosures will be retained for a minimum period of six years.
4.0 **What happens when the Policy is not followed?**

The General Counsel is responsible for overseeing and enforcing this policy. Failure to comply with this policy may lead to:

➢ Reputational damage to the University;

➢ Staff loss of confidence and belief in the integrity of senior officers of the University; and

➢ Risk of disclosures being reported to an external regulator or statutory body leading to possible civil or criminal action against the University.

5.0 **Related Documentation**

Policies listed below can be found on the University Home page: [https://www.salford.ac.uk/](https://www.salford.ac.uk/)

- Anti-Bribery Policy (Financial Management)
- ITSERT Terms of Reference (Information Technology)

The below listed policies can be found on the HR site: [www.salford.ac.uk/hr](http://www.salford.ac.uk/hr)

- Staff Grievance Policy
- Staff Disciplinary Policy
- Dignity at Work and Study Policy

Members of the University Community can also contact Public Concern at Work, an independent whistleblowing charity that provides independent advice and guidance on whistleblowing [https://protect-advice.org.uk/](https://protect-advice.org.uk/) or telephone **020 3117 2520.**

6.0 **Appendices**

Appendix 1: Whistle Blowing Procedure (flowchart)