



LIVERPOOL  
HOPE  
UNIVERSITY

Est. 1844

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# Whistleblowing Policy and Procedure

Responsibility for Policy:	Head of Legal Services, Governance & Risk
Approved by and date:	University Council 6 <sup>th</sup> July 2021
Frequency of Review:	Every Five Years
Next Review date:	2026
Related Policies:	Anti-Bribery and Corruption Policy Declaration of Interests Policy Fraud Policy Staff Grievance Policy Public Interest Disclosure Act 1998
Minor Revisions:	
EIA:	

## 1. Purpose and scope

- 1.1. Liverpool Hope University, like other public bodies, has a duty to conduct its affairs in a responsible and transparent way and to take into account both the requirements of funding bodies, the Office for Students and the standards in public life enunciated in Lord Nolan's reports. In addition, it is committed to the principles of academic freedom.
- 1.2. This policy is in compliance with the Public Interest Disclosure Act 1998 which introduced legal protection to employees against being dismissed or penalised as a result of disclosing to their employer certain serious concerns.
- 1.3. The University is committed to a culture of openness, probity and accountability and will support staff who raise genuine concerns under this policy, even if they turn out to be mistaken. At the same time the University has the obligation to protect those accused.
- 1.4. This Policy describes procedures at Liverpool Hope University for whistleblowing. Matters which may be raised under this policy which could potentially be considered as a protected disclosure include:
  - 1.4.1. conduct likely to prejudice the standing of the University
  - 1.4.2. financial and non-financial irregularities,
  - 1.4.3. corruption, bribery, dishonesty, breaches of internal rules and regulations,
  - 1.4.4. criminal activities
  - 1.4.5. ignoring a serious risk to health and safety
  - 1.4.6. environmental damage
  - 1.4.7. the deliberate concealment of any malpractice.
- 1.5. Complaints outside the matters described above will be dealt with under the appropriate procedures (e.g. the staff grievance procedures, student complaints procedures). This policy is not intended to apply for personal grievances. Grievances are concerns about an individual's personal circumstances, terms and condition, complaints of bullying etc and should be addressed through the relevant Personnel policies
- 1.6. As set out above the aim of this policy is to provide an internal mechanism for reporting, investigating and remedying wrongdoing at the University. In most cases therefore an individual should not find it necessary to alert anyone externally to their concern.
- 1.7. The law recognises that in some circumstances it may be appropriate for an individual to report their concerns to an external body such as a regulator. It will rarely, if ever, be appropriate to inform the media. The University strongly advises any individual considering reporting a concern externally to seek advice. The independent charity [Protect](#) operates a confidential helpline and has a list of prescribed regulators for reporting certain types of concern.
- 1.8. Whistleblowing concerns usually relate to the conduct of the University's staff but they may sometimes relate to the actions of a third party such as a supplier or service provider. In some circumstances the law will protect individuals if they raise a concern with a third party directly. However, the University would encourage individuals per section 3.1 to report such concerns internally via this Policy first.

## 2. Policy

- 2.1. A whistleblower under this Policy is somebody who is employed as a staff member of the University; including agency and they report certain types of wrongdoing
- 2.2. Any person as defined in section 2.1 who disclose serious concerns of malpractice will be protected under this policy from dismissal or other penalty as a consequence of the disclosure provided that, in the reasonable belief of the person making the disclosure
  - 2.2.1. it is made in the public interest and not for personal gain
  - 2.2.2. it demonstrates unacceptable conduct set out in 1.4
- 2.3. For a disclosure to be protected, there must be a reasonable belief by the person making it that it is made for the public good or in the interests of society. A disclosure will not necessarily be considered as “in the public interest” merely because it conveys information which is or may be of interest to the public.
- 2.4. In view of the protection afforded to a member of staff raising a concern about matters they reasonably believe to be in the public interest, it is hoped that individuals will feel able to put his/her name to any disclosure. The identity of the person raising the matter will be kept confidential, if so requested, for as long as possible provided that this is compatible with a proper investigation. Proper investigation may be more difficult or impossible if further information cannot be obtained from the person raising the complaint. It is also more difficult to establish whether any allegations are credible. required).
- 2.5. Anonymous complaints will be investigated and acted upon as the person receiving the complaint sees fit, having regard to the seriousness of the issue raised, the credibility of the complaint, the prospects of being able to investigate the matter, and fairness to any individual mentioned in the complaint.
- 2.6. The University cannot guarantee that a Whistleblower will obtain the outcome that they were seeking however it will deal with any concern raised fairly and in an appropriate way.
- 2.7. Whistleblowers should not suffer any detriment as a result of raising a genuine concern. Detrimental treatment includes dismissal, disciplinary action, threats or other unfavourable treatment connected with raising a concern. If an individual believes that he or she has suffered any such treatment they should inform the owner of this policy immediately. If the matter is not remedied then the Whistleblower may raise it formally using the [Staff Conflict and Resolution and Grievance](#) Policy.
- 2.8. Allegations which are proven to be untrue and malicious or vexatious by any member of the university may result in disciplinary action up to and including dismissal without notice (in the case of workers) and equivalent action in the case of other members. Disclosure under this policy will not provide protection from third parties for allegations which are later proven to be defamatory.
- 2.9. This document should be read in conjunction with the University’s Fraud, Anti Bribery and Corruption and Declaration of Interests Policies.

### 3. Procedures for making a disclosure

3.1. Where an individual has reasonable grounds to believe that irregularities, as defined in section 1.4 above, are occurring or have taken place, they are able to report concerns (preferably in writing) in the following main ways:-

#### 3.1.1. Line management

If a member of staff discovers or suspects an irregularity then it must be reported to their Head of School, line manager or Director level manager in the first instance who will report to the Head of Legal Services, Governance and Risk as a matter of urgency. The Head of Legal Services, Governance and Risk will bring this to the attention of the Vice-Chancellor and Rector and the line manager will make a report to the Vice-Chancellor & Rector who will act upon all reports in the first instance following the procedures set out within this policy.

#### 3.1.2. To Head of Legal Services, Governance and Risk

In some cases a member of staff who discovers or suspects an irregularity may prefer to report their suspicion to an independent officer and in all cases other than 3.1.3. below, this would be the Head of Legal Services, Governance and Risk, who will then inform the Vice-Chancellor and Rector

#### 3.1.3. To the Chair of the Audit Committee

In cases of **extreme** concern (e.g. allegations involving the Vice-Chancellor & Rector or the Head of Legal Services, Governance and Risk) the notifying employee should report their suspicions to the Chair of Audit Committee. This must be in writing giving all necessary details. The Chair of the Audit Committee will appoint either the Clerk to University Council to lead the investigation, or in allegations involving this postholder, the Deputy Vice Chancellor or Chair of Council. In such cases, it is essential that the Chair of University Council and Internal Audit are informed at the outset.

3.2. The person to whom a disclosure is made is called the "Designated Person". This is either the Head of Legal Services, Governance and Risk (via a Head of School, Line Manager or directly) or the Chair of Audit Committee.

### 4. Consideration by Designated Person

4.1. On receipt of the initial disclosure, the Designated Person shall consider the information made available to them. Depending on the nature and circumstances of the disclosure they may:

- a) decide not to proceed with the matter;
- b) authorise an internal investigation under this procedure (section 5 and 6);
- c) refer the matter to be dealt with under a different University procedure or
- d) refer the matter to the police or other appropriate authority.

4.2. The Designated Person shall determine whether it is necessary to inform the subject(s) of an information disclosure about the disclosure and whether to share any of the supporting evidence with them. It may be appropriate to withhold information from the subject(s) of the disclosure in order to preserve evidence or prevent the investigation from being compromised. This shall be done by the Designated Person as soon as is practicable after receiving the disclosure.

4.3. A decision on how to proceed shall normally be made within four weeks of receiving the disclosure. If the decision is likely to take longer, the Designated Person shall inform in writing

both the person making the disclosure and, if appropriate, any person who may be the subject of the disclosure of the reasons for the delay.

## **5. Investigating a Disclosure**

- 5.1.** An initial investigation to assist the Designated Person to decide how to proceed may be conducted by a person nominated by the Designated Person. This may be another senior officer of the University considered suitably qualified by the Designated Person to conduct such an investigation. It may not include any person who may have a role in the decision-making process on the matter at a later stage.
- 5.2.** The nominated investigator shall report their findings to the Designated Person as soon as is practical from the date of the disclosure. If the investigation is likely to be protracted, the Designated Person shall inform in writing the person making the disclosure and, if appropriate, any person who may be the subject of the disclosure of the reasons for the delay.
- 5.3.** If during the investigation the person who made the disclosure is invited to give evidence, make representations or otherwise communicate with the investigator, they may be accompanied by their trade union official or a work colleague.
- 5.4.** Where the disclosure relates to the conduct of an individual, they shall normally be given an opportunity to make representations to the investigator and to be accompanied by their trade union official or work colleague.

## **6. Reporting the Outcome**

- 6.1.** On receipt of the investigation report, the Designated Person shall decide what action should be taken. Depending on the nature and circumstances of the disclosure, and the substance of the investigation report, the Designated Person may:
  - (a) decide not to proceed with the matter;
  - (b) refer the matter to be dealt with under a different University procedure; or
  - (c) refer the matter to the police or other appropriate authority/statutory body.
- 6.2.** The Designated Person shall inform in writing the person making the disclosure of the decision and the reasons for the decision as soon as possible after the decision has been made. At the same time, if the Designated Person considers it appropriate, they shall also inform in writing any persons to whom the disclosure relates of the decision and the reasons for the decision.
- 6.3.** Determination by the Designated Person concludes the process under this procedure. If evidence not previously available comes to light after a decision, it will be at the discretion of the Designated Person as to whether the case should be reconsidered in light of any new evidence.
- 6.4.** The decision of the Investigation will be reported to Audit Committee.
- 6.5.** The individual making the disclosure will be informed of what action is to be taken where possible although the need for confidentiality means it may not be possible to share some of the details including, for example, specific information about any disciplinary action taken against a member of staff or student. The feedback to the individual making the disclosure will

take account of data protection requirements, whether there is a criminal investigation is ongoing and may be limited to a statement that action is being taken.

- 6.6.** Individuals should treat any information about the disclosure, the investigation or its outcome as confidential.