

DORSET & WILTSHIRE FIRE AND RESCUE SERVICE CG 4 - Whistleblowing (Confidential Reporting)

To be used in conjunction with the <u>Corporate Governance Policy Statement</u>

Corporate Governance (CG)

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1. Purpose & Definition

- 1.1. Dorset & Wiltshire Fire and Rescue Service (DWFRS) is committed to the highest standards of openness and accountability. In line with that commitment, we want members of staff, who have serious concerns about any aspect of our work to have the confidence to come forward and voice those concerns so that their concerns can be appropriately investigated.
- 1.2. This procedure supports the anti-fraud and corruption and bribery procedure and encourages members of staff and volunteers to raise serious concerns about the Service that they might have.
- 1.3. Members of staff are often the first to realise that there may be something seriously wrong in the workplace. However, they may not feel comfortable to raise their concerns because they feel that speaking up would be disloyal to their colleagues or to the Service. They may also fear harassment or victimisation and feel that it may be easier to ignore the concerns rather than to report it.

- 1.4. This procedure considers the requirements of the Public Interest Disclosure Act 1998, as amended by the Enterprise and Regulatory Reform Act 2013. It is unlawful for the Service to dismiss anyone or allow them to be victimised on the basis that they have made an appropriate lawful disclosure in accordance with the Act.
- 1.5. This procedure aims to:
 - encourage you to feel confident and supported to raise concerns about potential malpractice
 - inform you how to raise a concern and to who
 - ensure you receive a response setting out the action to be taken and to agree how you will be kept informed
 - reassure you that disclosures made in good faith will be protected from reprisals, harassment, or victimisation.
- 1.6. This applies to all members of staff, agency workers and independent contractors. It should also be applied where there are perceived malpractices by contractors working for us, such as agency staff, suppliers, builders, and drivers or those providing services under a contract.

2. Procedure Principles

2.1. What should be reported?

- 2.1.1. This procedure covers the process on how to raise concerns that fall outside of the scope of existing procedures and reporting arrangements, for example, the Grievance procedure or Complaints procedure.
- 2.1.2. A 'qualifying' disclosure is defined as any disclosure of information about something that you 'reasonably believe' has occurred, is occurring or is likely to occur, relating to one or more of the following:
 - A criminal offence
 - Failure to comply with a legal obligation
 - A miscarriage of justice
 - Endangering the health and safety of any individual (including risks to members of staff, volunteers, contractors, visitors, customers, and members of the public)
 - Damage to the environment
 - Unauthorised use of public funds
 - Possible fraud and corruption, including bribery (whether related to the offer or promise of a financial or other advantage, or whether related to the receiving of a bribe)
 - Other unethical conduct
 - The cover up of any of the above.

- 2.1.3. In addition, under this procedure you can report any serious concerns held about any aspect of Service provision, the conduct of other members of the Service or others acting on behalf of the Fire and Rescue Authority.
- 2.1.4. The disclosure may be something that:
 - makes you feel uncomfortable in terms of known standards, your experience in the Service or the standards you believe the Service subscribes to
 - is against the Service's policies or processes or the Authority's standing orders and financial regulations
 - falls below existing established standards of practice
 - amounts to improper conduct
 - Is a criminal offence.

2.2. **Confidentiality**

2.2.1. All matters reported will be treated in confidence and every effort will be made not to reveal your identity if you so wish. However, there may be times when this becomes necessary (e.g., resultant formal or criminal proceedings) but you will be advised if this is likely to happen.

2.3. Anonymous disclosures

- 2.3.1. This procedure encourages you to put your name to a disclosure whenever possible. It is your right to submit a concern anonymously, however, this may limit the scope of any investigation if we are unable to contact you to follow up the initial concern and establish more facts.
- 2.3.2. Anonymous disclosures will be considered at the discretion of the Service. The factors taken into account when exercising this discretion include the:
 - seriousness of the issues raised
 - credibility of the concern
 - likelihood of confirming the allegation from attributable sources.

2.4. Untrue allegations

2.4.1. If you make an allegation in good faith, but it is not confirmed by an investigation, no action will be taken against you. However, disciplinary action may be taken if a disclosure is proven to be frivolous, malicious or for personal gain.

2.5. How to raise a concern

- 2.5.1. There are a number of options available if you wish to raise a concern, dependent upon the seriousness and sensitivity of the issue involved and who is suspected of malpractice.
- 2.5.2. If you wish to raise the matter directly then as a first step, you should normally raise a concern with your line manager.
- 2.5.3. If your concern relates to your line manager or you would prefer an alternative contact, or the matter is perceived as being of such a serious nature, then you should raise it with one of the available internal or external contacts as outlined below.

- 2.5.4. Any Member of the Strategic Leadership Team
- 2.5.5. The Head of Service Improvement
- 2.5.6. you wish to report a concern to someone independent of the strategic management team you can approach the Fire & Rescue Authority Clerk & Monitoring Officer, who is accountable for the Fire & Rescue Authority. Contact Jonathan Mair, Corporate Director Legal & Democratic, Dorset Council email <u>Jonathan.mair@dorsetcouncil.gov.uk</u>, telephone 01305 224181.
- 2.5.7. If your concern relates to a Member of the Fire & Rescue Authority, then you should raise it with the Head of Service Improvement or the Clerk & Monitoring Officer.
- 2.5.8. If you wish to raise your concern with someone independent of the Service, you can report it to our internal auditors, SWAP Internal Audit Services, email:_ <u>confidential@swapaudit.co.uk</u>, telephone: 020 8142 8462.
- 2.5.9. Alternatively, you can also raise your concern independent of the Service through our external auditors, Bishop Fleming. Contact Nathan Coughlin, email NCoughlin@bishopfleming.co.uk, telephone 01752 234333, Mobile 07974 213567
- 2.5.10. You can also raise concerns externally by using the Crimestoppers 'FRS speak up' option. This is an entirely independent and anonymous service provided by Crimestoppers. You can either use their online form https://forms.theiline.co.uk/frs-speak-up or speak to one of their call agents on 0800 022 3818. Phone calls are not recorded or traced, and all information submitted online is via an encrypted connection. If you are prepared to provide your details, Crimestoppers can pass this on for us to get in touch with you and keep you updated with the outcome of the investigation. Otherwise, you will remain completely anonymous.
- 2.5.11. You can raise a concern through the <u>Whistleblowing page</u> on the Corporate Assurance CONNECT Site where you can submit your concern to your choice from the above contacts.
- 2.5.12. Advice on what to do and who to speak to may also be sought from 'Protect' who are an independent organisation who offer free confidential whistleblowing advice <u>https://protect-advice.org.uk/</u> Contact on 0203 117 2520 or via their contact form available on the following link address <u>protect-advice.org.uk/contact-protect-advice-line/</u>
- 2.5.13. The earlier you express your concern, the easier it is to take action. Concerns should be raised in writing (anonymously where required) and should clearly make reference to the Whistleblowing procedure.
- 2.5.14. Reports of Incidents must be supported by sufficient information and evidence to enable a proper investigation. All concerns should state the:
 - the date(s) of the incident(s)
 - the identity of individuals and witnesses involved
 - a description of the specific actions or omissions that constitute the incident
 - how the reporter became aware of the incident

- any steps taken by the reporter to date with respect to the incident
- any materials or documents relevant to support or evidence the incident.
- 2.5.15. Although you are not expected to prove beyond doubt the truth of an allegation, you will need to demonstrate that there are reasonable grounds for your concern.

2.6. How the Service will respond

- 2.6.1. The course and direction of the Investigation will depend on the nature of your concerns and the information you disclose.
- 2.6.2. An appropriate investigating officer will be appointed to deal with the concern and be confirmed as your single point of contact.
- 2.6.3. To protect individuals and those accused of misdeeds or possible malpractice, initial enquiries will be made to decide if an investigation is appropriate and what form it should take, if necessary. Investigations will not usually be conducted by staff working in the department about which the allegation has been made, nor by anyone in your line management structure.
- 2.6.4. Some concerns may be resolved or agreed without the need for investigation. If urgent action is required, this will be taken before any investigation is conducted.
- 2.6.5. Where appropriate, the matters raised may need to be:
 - investigated by senior managers,
 - referred to HR to be dealt with via a HR procedure (grievance/discipline)
 - referred to the Clerk & Monitoring Officer
 - referred to the Police
 - referred to the auditors
 - the subject of an independent inquiry
- 2.6.6. The person appointed to deal with the concern will contact you within seven working days, to confirm their appointment and acknowledge your concern.
- 2.6.7. They will also confirm a mutually agreeable communication method with you, and ensure that you are advised, in a timely manner, with:
 - an indication of how we propose to deal with the matter
 - an estimate of how long it will take to provide a final response
 - updates on initial enquiries
 - information on support, if appropriate
 - confirmation as to whether further investigations will take place and if not, why not.

- 2.6.8. Where necessary, the appointed investigating officer may seek further information from you in order to help progress the investigation (if one is required).
- 2.6.9. Where any meeting is arranged you can be accompanied by a union representative, colleague, or friend. This can be off site if you so wish at a location of your choice.
- 2.6.10. Where appropriate and to help prove or disprove any allegations made, the Service will attempt to identify any other persons who may have information that relates to the investigation.
- 2.6.11. Witnesses will be approached by the appointed investigating officer and asked if they would be willing to provide their support to the investigation and provide an account of what they have seen/heard in relation to the allegation.
- 2.6.12. All efforts will be made to ensure that witness confidentiality is maintained and that any meetings are conducted at a location that is convenient for the witness. However, witnesses must be aware that if the whistleblowing investigation forms part of any other legal proceedings, the personal details of the witness may be disclosed in the course of those proceedings.
- 2.6.13. Steps will be taken to minimise any difficulties that you may experience as a result of raising a concern. For example, if you are asked to give evidence in disciplinary or criminal proceedings, the Service will arrange for you to receive appropriate advice and support.
- 2.6.14. If you believe that you may be victimised as a result of the disclosure that you are making you must raise this with the appointed person and discussing why you believe this is so. This will help to ensure that the right support is given to you during and after the process.
- 2.6.15. The Service will provide access and support via occupational health, where required, where, for example, counselling support can be arranged.
- 2.6.16. The appointed officer will write a report based on their findings and this report will be subject to review and approval by the ACO Director of Service Support (unless it is inappropriate for them to do so, in which an alternative person must be nominated in conjunction between the appointed officer and the Head of Service improvement.
- 2.6.17. The Service accepts that you will need to be assured that the matter has been properly addressed. Therefore, subject to legal constraints, you will be informed of the outcome of any investigation.
- 2.6.18. You will be given the opportunity to feed back any issues or problems you may have experienced as a result. This will take place outside of your line management structure. The purpose of this is to ensure that the person who has raised concerns in the public interest do not suffer as a result.

2.7. **Post investigation**

2.7.1. Following the review and approval of the final report the actions required will depend on the nature of the allegations and the evidence gathered during the course of the investigation

- 2.7.2. Options available post investigation include, but are not limited to
 - Referral to HR for a disciplinary process
 - Referral to the Police
 - No Further action to be taken
- 2.7.3. Whilst there is no formal route of appeal for Whistleblowing investigations, if you have any concerns about how the investigation was conducted you may raise these concerns with any of the following listed below.
 - Any member of the Strategic leadership Team
 - The Clerk & Monitoring Officer (Corporate Director Legal & Democratic, Dorset Council)
 - The Head of Service Improvement
 - Internal or external Auditors
 - Your Union
 - The Police
 - Relevant professional bodies or regulatory organisations
 - External or Internal Auditors
 - 'Protect', which is an independent charity offering free confidential advice. They can be contacted on 020 3117 2520.
- 2.7.4. If this is raised internally, the person you approach will listen to your concern and clarify with you the actions that need to be taken depending on the concerns you have raised about the process.
- 2.7.5. If you do feel that you need to take the matter outside the Service, you should make sure you do not disclose any confidential information or breach the Data Protection Act.

3. **Responsibilities**

3.1. All Staff

- 3.1.1. From April 2024, all staff are required to complete the mandatory Whistleblowing E-Learning, available on GROW, every 3 years. This will ensure that all members of staff have an understanding of the Services approach to managing confidential disclosures and how they can raise concerns and to who.
- 3.1.2. (new starters) Must appraise themselves of this procedure as part of the Service induction process

3.2. Line managers

- 3.2.1. A member of staff or volunteer may come to you with concerns, and it is important that you are able to identify whether they are "whistle blowing".
- 3.2.2. Is responsible for notifying one of the following, who will determine how the concern will be dealt with and appoint an investigating officer, as appropriate.
 - Any member of the Strategic Leadership Team
 - Head of Service Improvement
 - The Clerk & Monitoring Officer (Corporate Director Legal & Democratic, Dorset Council)
 - Internal Auditor.
 - External Auditor
- 3.2.3. Raises awareness of the Whistleblowing procedure throughout departments and teams, creating an understanding at all levels of the organisation support and encourage whistleblowing.
- 3.2.4. Ensures that all team members complete Whistleblowing E-Learning on the internal GROW platform to support staff development and understanding.
- 3.2.5. Provides support to the individual raising concern when applicable

3.3. Appointed Investigating Officer

- 3.3.1. Is responsible for contacting the notifier within seven working days, to confirm appointment and acknowledge the concern.
- 3.3.2. Has overall responsibility for confirming a mutually agreeable communication method with the notifier and ensuring that they are updated in a timely manner. See 2.6.7
- 3.3.3. Considers the needs of the notifier throughout the investigation.
- 3.3.4. Must follow the Appointed Officer Whistleblowing Checklist and returning a completed version to Corporate Assurance Officer on completion of the investigation.
- 3.3.5. Must ensure that their final report is reviewed and approved by an appropriate person. In most cases this will be the ACO – Director of Service support unless the content of the notification means that this is not appropriate. If there is any uncertainty on this, the Appointed Investigating officer should seek guidance from the Head of Service Improvement.

3.4. Head of Service Improvement

- 3.4.1. The Head of Service Improvement has overall responsibility for the maintenance and operation of this procedure.
- 3.4.2. You will maintain a record of concerns raised and outcomes (but in a form which does not endanger employee confidentiality) for five years.

- 3.4.3. Report any areas of noncompliance to the Fire & Rescue Authority, via the Finance & Audit Committee, where required, identifying, and monitoring the delivery of short-term action plans for resolve.
- 3.4.4. Consider any feedback on the completion of an investigation

3.5. Standards and Assurance Manager

- 3.5.1. Review any completed investigation Assurance checklists
- 3.5.2. Ensure that any investigations have been reviewed and approved by the appropriate person and that this is documented
- 3.5.3. Escalate any concerns to the Head of Service Improvement
- 3.5.4. Monitor compliance rates against the Confidential reporting elearning as advised by the Corporate Assurance officer

3.6. Corporate Assurance Officer

- 3.6.1. Is responsible for completing the Corporate Assurance Checklist Section on receipt of the Appointed Officer Whistleblowing Checklist.
- 3.6.2. Review any points of concern with the Standards and Assurance Manager
- 3.6.3. Has overall responsibility for the completion and monitoring of the Whistleblowing Register.
- 3.6.4. Monitors compliance of the E-Learning completion and highlighting dept managers where gaps exist.
- 3.6.5. Completes quarterly and annual whistleblowing notification updates on Sycle.
- 3.6.6. Sends out Biennial emails to those who may receive a concern to receive updates on whether any whistleblowing notifications have been received so that the nature and outcomes of these can be recorded for monitoring.

4. Monitoring & Assurance

4.1. **Procedure Management**

4.1.1. We will monitor the number and type of cases which arise and make subsequent alterations to practice and procedure from these findings where necessary.

4.2. Learning and Development

- 4.2.1. A mandatory E-learning Package (3 year refresh) is available to all members of Staff on the GROW platform.
- 4.2.2. Advice and guidance can also be sought directly with the Head of Service Improvement or the Standards and Assurance Manager.

4.3. Annual Review

4.3.1. The Standards and Assurance Manager will complete an annual review of the whistle blowing register to identify any trend and areas of concerns in relation to protected characteristics.

5. Document Reference

5.1. **Document References**

FM 5 – Anti Fraud, Corruption & Anti Bribery

Code of conduct

5.2. **Forms**

C004 - Appointed Officer Whistleblowing Checklist <u>C032 – Whistleblowing Register</u>

6. Document Management

Policy Statement Reference: Corporate Governance				
Owner	Review Date	Author	Status	
Jill McCrae	27/02/2024	Jill McCrae	Published	

6.1. Version Control:

Version	Page & Par Ref	Date	Changes Made	Authorised By
V11.1	Page 6 - 2.6.16 Page 8 - 3.3.5 & 3.5	20/03/2024	Clarity of the investigation review process to align to the checklist	Jill McCrae
	Page 4 – 2.5.14		Standards and Assurance Manager responsibilities	
			Content of concerns required	
V11	Page 4 / Section 2.5.8 & 2.5.10 Page 7 / Section 3.1, 3.2.2 & 3.3 Page 8 / Section 3.4 & 5.2	27/02/2024	Addition of new Whistleblowing contact, Whistleblowing CONNECT Page, E-Learning Requirement, Appointed Investigating Officer responsibilities and Corporate Assurance Officer Responsibilities, Whistleblowing Checklist, Minor wording updates.	Jill McCrae
V10.0	Page 4	30/10/2023	Information re the availability of Crimestoppers FRS Speak up referenced. Removal of	

		CG 4 – Wh	istleblowing (Confidentia	al Reporting)
			reporting Via SoA removed as not included in this process	
V9.0	Page 1 & 8	21.10.2021	Review date extended to 2024 in line to review every 3 years. No other changes made.	Gemma Edmunds
V8.0	Page 3 / Section 2.5.3, Page 4 / Section 2.5.6, Page 6 / Section 2.71 & 2.8.2 and Page 7 / Section 3.12	09.09.2021	Head of Strategic planning and Corporate Assurance changed to Head of Service improvement. No other changes made.	Jill McCrae
V7.0	Entire document	27.02.2021	Additional narrative to reflect the inclusion of 3^{rd} party witnesses (2.6.14 – 2.6.16)	Jill McCrae
V6.0		28.02.2020	Update 'public concern at work' to Protect (2.5, 2.8) 2.5.5/3.1.2 – change to clerk and monitoring officer details 4.2 – reference to E- learning added and removal of induction training 3.14 – responsibility for line manager to ensure elearning is signposted.	Jill McCrae
			Responsible Officer section removed.	
V5.0	Pages 1, 3-7	26/3/2019	Updated titles of positions, contact numbers and change of information for Internal Auditors	Jill McCrae
V4.0	Page 1 & 7	21/06/2018	Updated Policy reference in accordance to new framework.	Tonya Saben
V3.0	Entire document	16/04/2018 / 24/05/2018	Updates to Responsible Officer. Minor wording updates	Jill McCrae / Tonya Saben
			Response timeframe to complainant updated from 10 working days to	

			7 working days.	
			Update to line managers responsibilities to ensure the promotion & awareness of the procedure.	
			Include the annual reporting via the Statement of Assurance to the Finance & Governance committee.	
			(TS) Removed Policy Statement text on page 1 as this is no longer required.	
			Removed section 5.1 as it is no longer required If the following references have links to them, they are available within the DWFRS P&P databas.	
			Changed reference to staff to members of staff in two places.	
			Added section 5.2 for the new whistleblowing register form.	
V2.0	Page 1	16/06/2016	Added link to CG policy.	Tonya Saben
	Page 7		Added section 5.1 and completed link in 5.2	
V1.0		29/3/2016	Document ready for publication	Lisa Smith

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