

## **Whistle-blowing policy**

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## Policy control sheet

Policy title	Whistle-blowing policy		
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Last reviewed by	Claire Lasko, Senior Adviser: Internal Audit		
Next review due	TBC		
Team responsible	Internal Audit		
Policy owner	Head: Internal Audit		
Officer responsible	Head: Internal Audit		
<b>Version history</b>			
Version	Date	Approved by	Amendments
1.0	23/04/10	Board	
2.0	25/04/14	Board	Additional paragraphs on purpose and application.
2.1	21/11/14	NvS	Deleted the word 'most' from 'most reports...' (page 4, last para, first sentence)
2.2	19/3/18	NvS	Update reporting section to reflect changes in organisational structure
2.3	31/7/19	JG, Head: OCP	Update to reflect new name and change in staffing, to reflect the Code of Conduct (inclusive of misconduct as well as malpractice and misconduct), to reference malpractice and misconduct or misconduct towards partners or "beneficiaries" and to ensure a consistent reporting framework across all policies.

# Whistle-Blowing Policy

## Purpose of this Policy?

This policy aims to:

- encourage you to feel confident to make a disclosure of concerns about issues that fall under this policy
- provide avenues for you to raise those concerns
- reassure you that you will be protected.

Whistle-blowing is a term used to describe a situation in which an employee, trustee, volunteer or any other individual linked or associated with Frontline AIDS raises a concern about possible illegal or dangerous activities or forms of malpractice or misconduct that could threaten donors, colleagues, the public, partner organisations, “beneficiaries”<sup>1</sup>, or Frontline AIDS integrity and reputation.

This Whistleblowing Policy is designed to ensure that concerns about possible illegal or dangerous activities or forms of malpractice or misconduct are brought swiftly to management’s attention.

The difference between a whistle-blowing issue and an employee grievance is that in the case of whistle-blowing, the concern is about a danger or illegality that has a public interest to it; a grievance or private complaint, by contrast, is a dispute about the employee’s own employment position and has no additional public interest dimension. There is a separate policy for raising a grievance.

It is often easy to ignore malpractice or misconduct (as defined below); employees can sometimes feel disloyal to their colleagues or employer if they report malpractice and misconduct. The purpose of this policy is to provide a framework in which individuals can raise concerns in a supportive atmosphere.

## Who does this policy apply to?

This policy applies to all Frontline AIDS employees, interns, volunteers and trustees.

It also applies to consultants, temporary staff and contractors (third parties, agents and suppliers) who are commissioned by Frontline AIDS.

## What kind of concerns would I disclose under this policy?

Any serious concerns you may have about any aspect of the activities of Frontline AIDS or those who work within it can be reported under this policy. Examples of malpractice which you should report include, but are not limited to, the following:

- Corruption, bribery or blackmail;
- Other criminal offences;
- Fraud and financial irregularity;

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<sup>1</sup> Where the Policy refers to “beneficiaries”, we mean anyone that is in receipt of Frontline AIDS support or assistance, including employees of civil society partner organisations, and people that our programming directly supports.

- Failure to comply with legal or regulatory obligations;
- Endangering the health and safety of any individual;
- Endangering or abusing (either physically or mentally) children or vulnerable adults with whom Frontline AIDS is working;
- Gross injustice; and
- Concealing any of the above.

For examples of misconduct (behaviours and actions that Frontline AIDS will always deem to be unacceptable), see the Code of Conduct which can be downloaded from PeopleHR or from the website.

Malpractice and misconduct should be reported when it happens or is reasonably likely to occur. Harm to Frontline AIDS can happen if malpractice and misconduct is unchecked or unaddressed. Importantly, in deciding whether to report malpractice and misconduct, do not think about harm simply in terms of funds lost, or damage to a particular programme or initiative. Harm may also be done to the integrity and reputation of Frontline AIDS itself, on which a programme depends for its support and survival.

### **Who should blow the whistle?**

Any individual who becomes aware of malpractice and misconduct in any part of Frontline AIDS has an *obligation* to report that conduct, and should do so as described using the procedure below. Anyone can report conduct under this policy: staff members, trustees, volunteers or anyone else who is concerned, including members of the general public.

### **What is confidential whistle-blowing?**

A whistle-blower may choose to reveal his or her identity when a report or disclosure is made. In this case, Frontline AIDS will respect and protect the confidentiality of the whistle-blower, and gives an assurance that it will not reveal the identity of the whistle-blower to any third-party insofar as it is possible to do so (sometimes it is not possible to achieve this; for example, if something is being investigated by the police, or the court orders disclosure). An advantage for Frontline AIDS of a confidential (as opposed to anonymous) report is that it is easier to investigate the report. Importantly, Frontline AIDS assurance of confidentiality can only be effective if the whistle-blower also maintains confidentiality.

### **What is anonymous whistle-blowing?**

As an alternative to confidential reporting, a whistle-blower may choose not to reveal his or her identity. Although the whistle-blower is then sure about anonymity, this does make it harder for Frontline AIDS to investigate fully. An anonymous whistle-blower should be careful not to reveal his or her identity to a third party.

### **Protecting a whistle-blower**

Frontline AIDS' systems to protect confidentiality and offer anonymity aim to keep a whistle-blower safe. To ensure the safety of whistle-blowers Frontline AIDS undertakes to treat all whistle-blowing reports as either confidential or anonymous. The choice between confidential or anonymous whistle-blowing is entirely that of the whistle-blower.

Safety is a concern because anyone who is benefiting from misconduct might try to retaliate against or victimise a whistle-blower. But this can only happen if the identity of the whistle-

blower becomes known through a breach of confidentiality. An anonymous whistle-blower cannot be victimised, provided that the whistle-blower also protects his or her identity.

Providing a matter of concern is raised in good faith (see the definition below), no action will be taken against the whistle-blower even if the concern turns out to be unfounded. However, reports which are malicious, knowingly untrue or made for personal gain are viewed as serious matters. An employee who makes a report in respect of which bad faith is proven, is liable to disciplinary action, which may include dismissal.

To be protected, reports must be made in good faith. Essentially, this means that the report must be made honestly for the purpose of allowing the concern to be addressed. A report may not be treated as being in good faith when it is made mainly for some other improper motive.

### **Whistle-blowing procedure**

There will always be disagreements about the best way of doing something, and challenges will often be made to practices and decisions in working life. This does not mean that all such matters should be reported. In addition to the types of areas of concern outlined at the beginning of this policy, Frontline AIDS has a number of specific documents which you can turn to for guidance about what counts as malpractice and misconduct. Frontline AIDS policies give specific examples of matters which are of serious concern and which should be reported. These documents are not exhaustive and, if you cannot find the guidance you need, or if you remain unsure, it may be helpful to go through the following questions:

- Does this feel right to me?
- Does it appear reasonable?
- Would I feel comfortable justifying this to public scrutiny?

If you answer 'no' to these questions, you should report the concerns.

### **How to report malpractice and misconduct**

If you believe that you have information about actual or potential malpractice and misconduct you should disclose those concerns (in the strictest of confidence) as detailed overleaf.

If you wish to discuss the situation independently with someone on a confidential basis, you can:

- a) use the employee assistance programme (EAP) confidential advice line (details on PeopleHR), where a qualified counsellor will be able to give you more information.
- b) call [Protect](#)'s free and confidential advice line: 0800 055 7214 (in the UK). Protect is a specialist whistleblowing charity that can help explain:
  - what types of wrongdoing you can report
  - your legal rights
  - next steps if you decide to report something.
- c) get advice from your trade union or from [Citizens Advice](#) (in the UK).

## REPORTING MALPRACTICE & MISCONDUCT

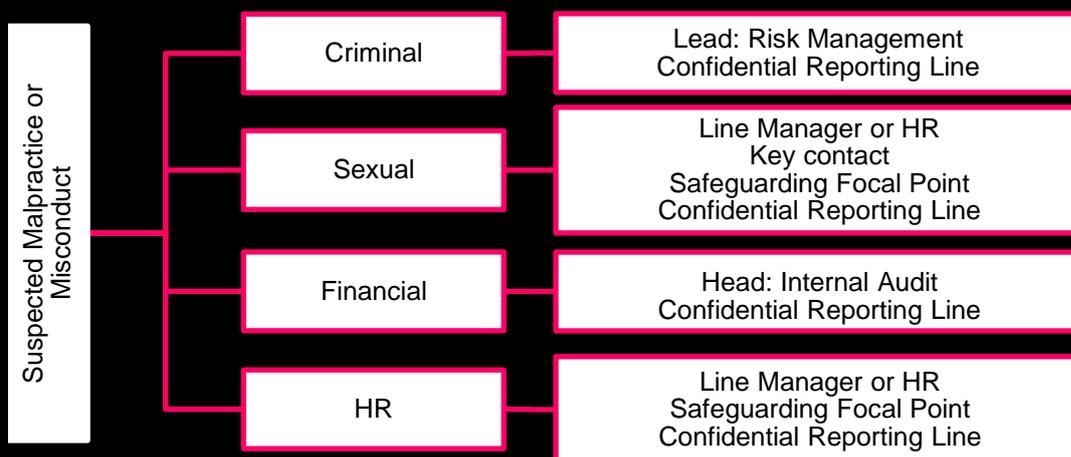
Frontline AIDS has a zero tolerance approach to malpractice and misconduct and we take all reports seriously. We are committed to providing a clear and straightforward reporting system and we handle all information relating to malpractice and misconduct appropriately and responsibly. Malpractice and misconduct could be criminal, financial, sexual or HR-related and it can be brought to our attention by anybody.

All Frontline AIDS representatives have a specific responsibility to raise any concerns they have, or those that are reported to them, in a confidential and timely manner. It is not the responsibility of individuals to decide whether or not malpractice or misconduct has occurred.

Frontline AIDS has a defined reporting journey, which reflects our accountability to the people we work with and to donors and legal bodies. We prioritise the safety of the complainant, the integrity and confidentiality of the investigation, and compliance with relevant legislation and donor contractual requirements.

Anyone with any concerns regarding malpractice or misconduct should contact [confidentialreporting@frontlineaids.org](mailto:confidentialreporting@frontlineaids.org)

Cases will be referred to the appropriate team to investigate:



When reporting suspected malpractice or misconduct, please include as much detail as possible, including:

- What occurred?
- When and where did it occur?
- Who was involved (including name, position and organisation)?

*You can, if you wish, use the incident reporting form in the Safeguarding Children, Young People and Vulnerable Adults Policy (Appendix 2).*

Any information received will be treated in confidence, in line with our [Whistle-blowing policy](#), and the situation will be investigated thoroughly and fairly. We will inform the complainant of the outcome of the investigation and any actions proposed.

If you ask us not to disclose your identity, insofar as possible, we will not do so. If for any reason, such as a requirement by law, your identity would be disclosed, we will discuss this with you at an appropriate time.

## **Investigating malpractice and misconduct**

Frontline AIDS will follow this procedure:

- On receiving a report, an appropriate investigator will be appointed.
- The identity of the investigator will usually depend on the nature of the reported malpractice and misconduct: for example, a health and safety matter will likely be investigated by a senior manager with health and safety experience; and a financial irregularity by a senior finance manager.
- The person reporting the malpractice and misconduct will be told the name of the investigator, how to make contact with him or her, and whether further help will be needed.
- Frontline AIDS will respect the confidentiality of the person raising the concern insofar as it is possible to do so; it may not be possible to preserve confidentiality in all instances (as explained above).
- Frontline AIDS will brief the person making the report about the outcome of the investigation and any action proposed.
- The person(s) accused of the malpractice and misconduct will be informed of the accusation and, if necessary (if there appears to be some validity to the allegation) will be given the opportunity to respond. If a decision is taken to move into a disciplinary process, the normal provisions of the disciplinary procedure, including the rights to a hearing and to appeal, will apply.
- If disciplinary action results from the investigation, the person who raised the concern may be asked to participate in the process. Frontline AIDS will support the whistleblower and take steps to protect him or her from reprisals and victimisation. Victimising someone because they have raised a concern, or to deter them from doing so, is a serious disciplinary offence which, if proven, will be considered an act of gross misconduct and may result in summary dismissal.
- Frontline AIDS may consider providing independent external support to the whistleblower if the concern is of a complex nature, or if the investigation is likely to be protracted or of a very sensitive nature.
- Where the person raising the concern is him- or herself involved in the malpractice and misconduct, the fact that she or he has brought the matter to light will be taken into account in determining any subsequent disciplinary action.

## **Responsibility of person receiving a report**

Every staff member, volunteer and trustee has an obligation to report instances of suspected malpractice and misconduct. However, a specific obligation rests on the person to whom such a report is made to take the matter upwards to Senior Management Team level (or as otherwise required by this policy). The Senior Management Team must be aware of all such allegations and must be satisfied that they have been adequately dealt with. In the case of trustees, instances of malpractice and misconduct should be reported to the Chair of the Board.

## **Support for anyone raising concerns about malpractice and misconduct**

If you raise a concern and are then victimised (or feel victimised), you can seek support through line management or from another senior manager, or from a Safeguarding Focal Point.

## **Responsibility for policy**

The Internal Audit team is responsible for the review of this policy.