

Reusing IT's Whistleblowing Policy

Key Points

The Whistleblowing Procedure sets out the framework for dealing with allegations of illegal and improper conduct.

Reusing IT is committed to the highest standards of transparency, probity, integrity and accountability.

This procedure is intended to provide a means of making serious allegations about standards, conduct, financial irregularity or possible unlawful action in a way that will ensure confidentiality and protect those making such allegations in the reasonable belief that it is in the public interest to do so from being victimised, discriminated against or disadvantaged.

This procedure does not replace other policies and procedures such as the complaints procedure and other specifically laid down statutory reporting procedures. For example, if a member of staff has a complaint about their working conditions, they should use the Reusing IT Complaints Policy. Similarly if an employee has a concern about the conduct of a fellow employee in the working environment (e.g. that they are not treating colleagues with respect) they should raise these with their line manager, or if that is not possible, with the CEO, or Trustees or through the Office of the Scottish Charity Regulator whistle blowing policy <https://www.oscr.org.uk/raise-a-concern/whistleblowing/>

This procedure is intended to ensure that Reusing IT complies with its duty under the Public Interest Disclosure Act 1998.

Scope

This procedure applies to all Reusing IT staff and volunteers.

This procedure applies to, but is not limited to, allegations about any of the following:

- Conduct which is an offence or breach of the law
- Alleged miscarriage of justice
- Serious Health and Safety risks
- The unauthorised use of public funds
- Possible fraud and corruption
- Sexual, physical or verbal abuse, or bullying or intimidation of employees, customers or service users
- Abuse of authority
- Other unethical conduct

Confidentiality

All allegations will be treated in confidence and every effort will be made not to reveal a whistleblower's identity unless the whistleblower otherwise requests.

Potentially, due to the nature of the investigation or disclosure, it may be necessary to disclose the whistleblower's identity. This may occur in connection with associated disciplinary or legal investigations or

proceedings. If such circumstances exist, the whistleblower will be informed that their identity is likely to be disclosed.

Reusing IT will not, without the whistleblower's consent, disclose the identity of a whistleblower to anyone other than a person involved in the investigation/allegation.

There is an expectation that the whistleblower will not share with others that they have raised a concern, the nature and the details of the concern or the identity of those involved.

Reusing IT will take appropriate action to protect a whistleblower who makes a serious allegation in the reasonable belief that it is in the public interest to do so from any reprisals, harassment or victimisation.

Anonymous Allegations

This procedure encourages whistleblowers to put their name to an allegation wherever possible as anonymous allegations may often be difficult to substantiate/prove. Allegations made anonymously are much less powerful but anonymous allegations will be considered at the discretion of the CEO or Board of Trustees.

In exercising discretion to accept an anonymous allegation the factors to be taken into account:

- The seriousness of the issue raised
- The credibility of the allegation; and
- Whether the allegation can realistically be investigated from factors or sources other than the complainant

Untrue Allegations

No disciplinary or other action will be taken against a whistleblower who makes an allegation in the reasonable belief that it is in the public interest to do so even if the allegation is not substantiated by an investigation. However, disciplinary action may be taken against a whistleblower who makes an allegation without reasonable belief that it is in the public interest to do so (e.g. making an allegation frivolously, maliciously or for personal gain where there is no element of public interest).

Procedure for Making an Allegation

It is preferable for allegations to be made to an employee's immediate manager to whom they report. However, this may depend on the seriousness and sensitivity of the issues involved and who is suspected of the malpractice. For example, if the whistleblower believes that management is involved it would be inappropriate to raise it directly with them. The whistleblower may then make an allegation direct to any of the following:

- The CEO
- Board of Trustees

If either of the above receive an allegation he/she will consider the allegation and may discuss with either the CEO or other Trustees. The line manager (or either/or both) of the above, after consideration, will discuss with the whistleblower and if they wish to proceed with the allegation will be investigated.

Allegation

Whether a written or oral report is made it is important that relevant information is provided including:

- The name of the person making the allegation and a contact point.
- The background and history of the allegation (giving relevant dates and names and positions of those who may be in a position to have contributed to the allegation);
- The specific reason for the allegation. Although someone making an allegation will not be expected to prove the truth of any allegations, they will need to provide information to the person they have



reported to, to establish that there are reasonable grounds for the allegation. Someone making an allegation may be accompanied by another person of their choosing during any meetings or interviews in connection with the allegation. However, if the matter is subsequently dealt with through another procedure the right to be accompanied will at that stage be in accordance with the relevant procedure.

Action on receipt of an Allegation

The line manager will record details of the allegation gathering as much information as possible, (within 5 working days of receipt of the allegation) including:

- The record of the allegation;
- The acknowledgement of the allegation;
- Any documents supplied by the whistleblower

The investigator will ask the whistleblower for his/her preferred means of communication and contact details and use these for all communications with the whistleblower in order to preserve confidentiality.

If the allegation relates to fraud, potential fraud or other financial irregularity the CEO will be informed within 5 working days of receipt of the allegation. The CEO will determine whether the allegation should be investigated and the method of investigation.

If the allegation discloses evidence of a criminal offence it will immediately be reported to the Board of Trustees and a decision will be made as to whether to inform the Police. If the allegation concerns suspected harm to children the appropriate authorities will be informed immediately.

If the issue is around suspected harm to vulnerable adults, the Safeguarding policy should be referred to.

Timetable

- An acknowledge the allegation in writing within 10 working days with
 - An indication of how the Board of Trustees propose to deal with the matter
 - An estimate of how long it will take to provide a final response
 - An indication of whether any initial enquiries have been made
 - Information on whistleblower support mechanisms
 - Indication whether further investigations will take place and if not, why not

Where the allegation has been made internally and anonymously, obviously Reusing IT will be unable to communicate what action has been taken.

Support

Reusing IT will take steps to minimise any difficulties which may be experienced as a result of making an allegation. For instance, if a whistleblower is required to give evidence in criminal or disciplinary proceedings the CEO will arrange for them to receive advice about the procedure and advise on the support mechanisms that are available.

Reusing IT accepts that whistleblowers need to be assured that the matter has been properly addressed. Thus, subject to legal constraints, we will inform those making allegations of the outcome of any investigation.

Responsibility for the Procedure

The CEO and the Board of Trustees have overall responsibility for the operation of this Procedure and for determining the administrative processes to be followed and the format of the records to be kept.

Monitoring

A Register will record the following details:

- The name and status (e.g. employee) of the whistleblower
- The date on which the allegation was received
- The nature of the allegation
- Details of the person who received the allegation



for Digital Inclusion

- Whether the allegation is to be investigated and, if yes, by whom
- The outcome of the investigation
- Any other relevant details

The Register will be confidential and only available for inspection by the Board of Trustees.

The CEO will report annually to the Board of Trustees on the operation of the Procedure and on the whistleblowing allegations made during the period covered by the report. The report will be in a form which does not identify whistleblowers.