



Policy	Whistleblowing Policy
Effective Date	24 th June 2021
Date Last Reviewed	June 2021
Scheduled Review Date	June 2022
Supersedes	<i>Whistleblowing policy 2017</i>
Owned by	NEBDN Executive
Monitored by	NEBDN Governance Committee
Approved by	Governance Committee on 28 th January 2021 and NEBDN Board of Trustees on 24 th June 2021

N.B. Any reference in red italics refers to the Ofqual General Conditions of Recognition (GCOR)

Purpose

The purpose of this policy is to ensure that NEBDN staff, associates, trustees, committee members, centres, and learners:

- Allow NEBDN to maintain a culture of openness and transparency so issues can be raised which concern them in relation to the delivery of NEBDN qualifications and services
- NEBDN stakeholders know how they should act when they have issues and are enabled to do so
- NEBDN stakeholders can raise their issue if they believe that a serious issue is not receiving the attention it should.
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This policy gives guidelines on what to do when an individual is concerned about a matter which must relate to the following:

- involves a danger to learners, centres, colleagues, or the public, or
- professional misconduct, or
- financial or educational malpractice

so that issues of this nature are addressed at an early stage and in the right way.

Scope

This policy applies to:

- everyone who works for the organisation, on a paid or unpaid basis, including any temporary staff, contractors or consultants who may provide services to NEBDN
- centres and their staff
- learners for NEBDN exams
- suppliers of products or services to NEBDN.

Individuals can raise an issue with NEBDN under the arrangements outlined in this policy if they have a reasonable belief that malpractice and/or a wrongdoing is occurring or is likely to occur relating to one or more of the categories as set out in the Public Interest Disclosure Act 1998 – PIDA (www.legislation.gov.uk) but an individual raising an allegation under these whistle-blowing arrangements should have a reasonable belief that the disclosure is in the public interest.

There are alternative policies for other issues and the appropriate one should be used.



Grievance Policy	For staff with concerns relating to issues between their employer and themselves – see your employer’s policy
Complaints Policy	For raising concerns as to NEBDN staff or organisational decisions and or actions. Complaints about Centres may only be referred to NEBDN once the local complaint process has been exhausted; evidence of outcomes should be shared with NEBDN
Raising a Concern Process	This specifically relates to patient safety under the ‘Standards for the Dental team’ (section 8). GDC guidance and support may be appropriate before making a disclosure
Malpractice and Maladministration	This relates to alleged Learner/centre malpractice/maladministration; i.e. non-compliance with NEBDN/regulator rules either through oversight or active disregard.

Please note that this policy does not relieve an individual of the requirement to report any treatment or behaviour which might pose a risk to patients or colleagues under the GDC’s Raising Concerns Policy.

Examples of whistleblowing disclosures that could be made to us include:

- A member of staff at a centre making a disclosure about actual or possible malpractice at the centre and/or failure to comply with the terms of the centre’s centre-recognition agreement with us (see our Malpractice and Maladministration Policy for examples);
- Making a disclosure about possible malpractice being carried out by a member of the NEBDN
- a learner or parent/guardian making a disclosure about possible malpractice at one of our centres

Policy statement

This document sets out our whistle-blowing arrangements which are aligned with the Public Interest Disclosure Act 1998 (PIDA). This legislation protects workers who make a protected disclosure of information, concerning certain types of matters relating to their employment, from being dismissed or penalised by their employers because of the disclosure. The Act also has the effect of making confidentiality clauses unenforceable where a protected disclosure is made.

NEBDN welcomes genuine issues or concerns and is committed to dealing with them responsibly, promptly, openly, and professionally. NEBDN trusts that this policy gives the reassurance needed to raise issues. However, it is recognised that an individual may still wish or need to whistle blow to the appropriate regulator. In which case their contact details are provided at the end of this policy.

Individuals may be reluctant about whistle blowing, perhaps feeling that it is none of their business or that it is only a suspicion. They may also feel that raising the matter would be disloyal to colleagues, to managers or to the organisation. The policy provides a route to raising genuine issues and concerns in the right way.

The organisation will protect any individual who whistle blows under this policy. If an individual reasonably believes that information disclosed is substantially true, and follows the procedures laid out in this policy (see Appendix 1 for the procedure), that individual may be protected by legislation



(see qualifying disclosures below). It does not matter if they turn out to be mistaken. The dismissal of any member of staff directly because of them having raised a complaint under the guidelines of this policy will be viewed by the organisation as automatically unfair (see policy related to dismissals).

Any member of staff victimising an individual because they have raised an issue under this policy, will be subject to disciplinary action. Any associate, trustee, committee member centre, contractor supplier victimising an individual because they have raised an issue under this policy, will be subject to review and possibly have their involvement with NEBDN terminated.

All issues raised under this policy will be treated as confidential, if circumstances allow, and in a sensitive manner. The identity of the individual raising the issue will be kept confidential so long as this does not hinder or frustrate any investigation. The nature of the accusations and resultant investigation may result in the ability to identify the Whistle Blower.

Issues and concerns expressed anonymously are less credible but will nevertheless be considered. The decision to consider them will review factors such as the seriousness of the issue raised, the credibility of the issue and the likelihood of confirming the issue with attributable sources.

NEBDN will review the policy regularly but at minimum every 2 years as part of the self-evaluation arrangements and revise the policy as and when necessary, in response to external feedback, trends from internal monitoring arrangements, changes in practices, actions from the regulatory authorities or external agencies or changes in legislation.

Definitions

'Whistleblowing' is defined as 'raising a wrongdoing within an organisation when there is a genuine issue or concern about a crime, criminal offence, miscarriage of justice, dangers to health and safety and of the environment – and of the cover up of these'.

'A whistle-blower' is a person who raises an issue or concern about wrongdoing in their workplace'.

A qualifying disclosure is 'any disclosure of information which, in the reasonable belief of the person making the disclosure tends to show one or more of the following:

- a criminal offence has been committed, is being committed or is likely to be committed
- a person has failed, is failing or is likely to fail to comply with any legal obligation to which he or she is subject
- a miscarriage of justice has occurred, is occurring or is likely to occur
- the health and safety of an individual has been endangered, is being endangered or is likely to be endangered
- the environment has been damaged, is being damaged or is likely to be damaged
- there has been improper conduct or unethical behaviour in the setting, conduct or marking of examinations
- there has been professional malpractice
- information tending to show any matter falling within any one of the above has been, is being or is likely to be deliberately concealed.'

Complaints tend to be an expression of personal dissatisfaction and should be taken forward with the arrangements outlined in the NEBDN Complaints Policy



Employment disputes should be managed through appropriate Human Resources policies, including the Grievance Policy.

Ofqual is a regulator for:

- matters relating to the development, delivery, and award of regulated qualifications
- other matters likely to be of relevance or interest to their role as the regulator of qualifications, examinations, and assessments in England and of vocational qualifications in Northern Ireland.

A whistleblower providing a relevant disclosure to Ofqual is protected under PIDA 1998 where matters fall within its scope.

Ofqual has a public Whistleblowing policy. This states that if an individual works for a Centre, which is delivering regulated qualifications, and they wish to make a whistleblowing disclosure to someone outside of their organisation, they should normally consider making the disclosure to the relevant awarding organisation that has approved their centre to deliver the qualification(s) in question (i.e. NEBDN).

The General Dental Council provide Raising Concerns Guidance which aims to provide an effective, clear, safe, and where appropriate, confidential process for dealing with reported professional behaviour breaches. Everyone has a right and responsibility to report concerns about conduct or professional behaviour, especially where there is a risk to patient safety. Issues relating to a GDC registrant may also be reported to the GDC Fitness to Practise team.

The GDC can also investigate concerns about the quality of a dental or DCP education or training programme, especially if there might be risks to patients' safety or graduates' fitness to practise. This could include, for example, concerns about the quality of practice placements, or education or training providers not providing their students with sufficient practical experience of treating patients – please see GDC guidance: *'Making a complaint or raising a concern about an education or training provider'* and the *'NEBDN Raising a Concern Policy'*.

Responsibilities

Everyone who works for or with NEBDN

It is important that anyone who is employed by or engages with NEBDN is fully aware of this policy and its contents as well as any other relevant NEBDN policies for their role in the organisation. That is, all members of staff, associates, trustees, centres, learners, contractors, consultants, and suppliers. These individuals also have a duty of confidentiality to NEBDN.

Whistle-blowers

Individuals are recommended to take advice before making a whistleblowing allegation to ascertain their rights under the Public Interest Disclosure Act 1998. If an individual wants independent advice at any stage about rights and protection, NEBDN recommends that they contact [Protect \(formerly Public Concern at Work\)](#) as it is a registered charity and is the independent authority on public interest whistleblowing. Protect:

- advises individuals with whistleblowing dilemmas at work
- supports organisations with their whistleblowing arrangements, and
- seeks to inform public policy and legislative change.

Contact details are given in the procedure attached to this policy.



If an individual is considering making a disclosure of confidential nature, they are advised to seek advice from the Chief Executive or the Chair of the Board (whichever is most appropriate) or any other appropriate person.

A whistleblower should be aware that they may be identifiable by others due to the nature or circumstances of the disclosure (e.g. the party which the allegation is made against may manage to identify possible sources of disclosure without such details being disclosed to them).

Once a concern has been raised NEBDN has a duty to pursue the matter. It will not be possible to prevent the matter being investigated by subsequently withdrawing their concern as we are obliged by the regulators to follow-up and investigate allegations of malpractice or maladministration. *(Ofqual GCoR A8.2)*

Depending upon the nature of the allegation NEBDN will appoint someone to investigate the allegation who has the appropriate level of training and competence and who has not had any previous involvement or personal interest in the matter. *(Ofqual GCoR A8.3b and G4.6)*

Details of all issues raised, and the subsequent investigation will be retained for the relevant period of time (See information management policy), unless the investigation proved the issue to be groundless.

If members of the public have genuine issues or concerns about NEBDN or someone within the organisation, then they should raise such concerns with the relevant regulatory authority.

NEBDN Responsible Officer (RO)

The RO will investigate any issues raised under this policy and will appoint an Investigator to review and plan how it will be managed (see appendices 1 and 2). NEBDN will protect a whistleblower's identity where possible although NEBDN cannot guarantee this and may need to disclose an identity to:

- the police, fraud prevention agencies or other law enforcement agencies (to investigate or prevent crime, including fraud)
- the courts (in connection with court proceedings)
- another person to whom we are required by law to disclose your identity
- other third parties where we consider it necessary to do so (e.g. the regulator Ofqual).

The investigator(s) assigned to explore the allegation will not reveal an identity unless the whistleblower agrees or it is absolutely necessary for the purposes of the investigation (as noted above). The investigator will advise the individual if it becomes necessary to reveal an identity.

References

NEBDN Bullying and Harassment policy
NEBDN Complaints Policy
NEBDN Conflict of Interest Policy
NEBDN Disciplinary policy
NEBDN Equality and diversity policy
NEBDN Information management policy
NEBDN Grievance policy



NEBDN Malpractice and Maladministration Policy

NEBDN Recruitment, selection, induction, and probation staff policy

NEBDN Recruitment, selection, development, appraisal, and removals of Trustees policy

NEBDN Social media policy

NEBDN Recruitment and management of Examiners

NEBDN Recruitment and management of Committee Members

The Public Interest Disclosure Act 1998.

GDC website 'Advice for dental professionals on raising concerns' -

Ofqual – the Awarding Organisation regulator in England

Ofqual General Conditions of Recognition (<http://ofqual.gov.uk/>)

Questions

If you have any questions about this policy, please email NEBDN at info@nebdn.org and your enquiry will be directed to an appropriate member of staff or committee.



Appendix 1: Procedure for handling issues under the Whistleblowing Policy

To ensure that there is no confusion about the nature of the issue or concern being raised, you should refer to the Whistleblowing Policy and related procedure in all correspondence. Annex 1 to this appendix contains a template letter that individuals may wish to use.

Examples of matters which may give cause to an issue under this policy include:

- fraud
- financial irregularities
- corruption
- bribery
- dishonesty
- acting contrary to NEBDN's codes of conduct
- criminal activities
- creating or ignoring a risk to health and safety or the environment
- failure to adhere to recognised professional standards
- failure to adhere to recognised academic standards
- unethical behaviour or improper conduct.

Guidance for individuals tasked with handling investigations is set out in Appendix 2.

It is recognised that there may be matters that cannot be dealt with internally and external authorities may need to become involved. Where this is necessary, NEBDN reserves the right to make this referral themselves without the individual's consent. The police will be informed in all instances where a criminal offence may have occurred.

An instruction to cover up wrongdoing is itself a disciplinary offence. If told not to raise or pursue an issue or concern, even by a line manager or other individual in a more senior position, individuals should not agree to remain silent. They should report the matter to the most appropriate senior person in the organisation.

If it becomes clear that the procedure set out in this policy has not been invoked in good faith (for example, for malicious reasons or to pursue a personal grudge against another individual), this will constitute misconduct and will be dealt with accordingly.

Individuals must raise the matter as soon as possible, rather than wait for proof or investigate the matter themselves.

Individuals should seek advice from an appropriate person in cases where they are unsure of whether this policy is the correct one to pursue in the circumstances (see annex 2).

Where an individual considers that the normal procedure cannot be used (i.e. through their normal management chain), they should report the issue or concern to someone who is not within this direct line of management control – see Annex 2.

Individuals are entitled to be accompanied by a colleague at any meeting to discuss the issue or concern at any stage of the procedure.



How issues will be handled

Once an individual has formally raised an issue, NEBDN will log the information into the CRM/The Hub or other systems as required. The issue will be assigned to an appropriate person such as a Manager or Trustee to look into it through an informal investigation process to assess what action should be taken. A responsible person – a manager or trustee tasked with taking this forward - will respond to the individual to let them know:

- who is handling the matter
- how the employee can contact them
- whether further assistance may be needed.

When an individual has raised an issue or concern, they may be asked how they think the matter might be best resolved. If they do not have any personal interest in the matter, they will be asked to make that clear at the outset. If the issue falls more properly within the Grievance Policy, Complaints policy or Raising concerns policy, they will be advised of this.

While the purpose of this Whistleblowing Policy is to enable NEBDN to investigate possible malpractice and take appropriate steps to deal with it, it may not be possible to give the person raising the issue details of the action that will be taken where this may infringe a duty of confidentiality that is owed to someone else.

Step 1: How to raise an issue internally

If an individual has an issue, it is hoped that they will feel able to raise it in the first instance with their line manager or a lead for that part of the organisation (e.g. a committee chair). Annex 2 sets out who should be contacted in different parts of the organisation. If the issue is justified under the policy, this person will:

- recognise that this may be a difficult step for an individual and treat the matter as confidentially as possible
- clarify the issue
- seek advice from an appropriate person (including, if necessary, an external HR advisor) and assess what action should be taken
- refer the matter on to Step 2 if they feel it more appropriate
- keep a written record of details of the investigation securely with restricted access on the CRM/The Hub or other systems as needed, including the outcome and reasons for the outcome; ensuring due care is taken in respect of confidentiality.

Under normal circumstances, an investigation should be commenced within 5 working days of the complaint being formally notified and completed within an appropriate time frame. The person with whom the issue has been raised will provide as much feedback to the individual who raised the issue as they reasonably can under the circumstances. A verbal response will be given to the individual within 5 working days and a written response within one calendar month, outlining the action underway, where possible. If following investigation, the issue is found not to be justified, the individual who raised it will be informed in writing of the reasons for this.

If an individual is aware that others have the same issue or concern, they are advised to raise them individually and not to discuss the issue with the other person(s), in order to prevent any conflict of interest or contamination of evidence during an investigation.



Step 2 - How to raise an issue internally with someone who is not the line manager or lead

There may be instances where it is not appropriate to raise the issue with the line manager or lead because:

- the issue is very serious
- it involves the line manager or lead.

There may also be instances where the individual has continuing concerns following the response given at Step 1. In either case, they should prepare a written statement outlining the details. This should be forwarded, together with the line manager's / lead's response if Step 1 was pursued, to the Chief Executive or Chair of the Board. A copy of the statement should be securely retained.

Similarly, if the line manager / lead with whom the issue has been raised believes that the issue is serious enough to move directly to Step 2, they should ensure that a detailed written statement of their concerns is prepared by the individual and it is forwarded to the Chief Executive or Chair of the Board, following advice from HR consultant, as necessary. Again, a copy of the statement should be securely retained.

The person receiving the report will acknowledge receipt of the issues raised and give further consideration, meeting with the individual if necessary. A verbal response will be given to the individual raising the issue within 5 working days and a written response within one calendar month, outlining the action underway, where possible. If the issue is found not to be justified, the individual will be informed in writing of the reasons for this.

Step 3 - How to raise an issue at a higher level

There may be occasions where it is appropriate to raise the matter at a higher level because:

- the individual considers that the response at Step 2 was inadequate
- the matter involves a senior manager, the Chief Executive, or a Board Member.

In this case, the matter should be raised as appropriate with both:

- the Chair of the Board.
- the Chair of the Governance Committee

The individual should put their issue in writing (including copies of all previous correspondence) and write to the Chair of the Governance Committee / Board in the first instance if the issue involves a Head of Department, the Chief Executive, or a Board Member, within 5 days of receiving the response from Step 2 if that step was pursued.

The individual will have their written issue acknowledged and an opportunity to discuss their issues with an HR consultant who provides services to NEBDN within 5 working days from receipt of the written statement.

The HR consultant will provide the employee/worker with a written statement of the Board's intended actions, the likely timescales for any further investigations and the person leading these, normally within 10 working days of this meeting.

The decision following this step will be the final stage of any internal process.



Step 4 – Raising an issue with external agencies – wider disclosures

Wider disclosures are protected if the disclosure is made in good faith, the individual reasonably believes that the information and any allegation in it are substantially true, the disclosure was reasonable in all the circumstances and they meet one or more of the following conditions:

- at the time of making the disclosure, the individual reasonably believes that they will be subject to a detriment by the Board by making the disclosure to the Board
- the individual reasonably believes that it is likely that evidence relating to the relevant failure will be concealed or destroyed if they make the disclosure to the Board
- the individual has previously made a disclosure of substantially the same information to the Board and the action that has been taken has not, in their reasonable belief, been adequate.

In order to remain protected under law, disclosure other than to individuals within the Board must be made to selected bodies or persons. These include:

- The General Dental Council
- Ofqual
- The Charity Commission
- The Department of Health
- HM Revenue and Customs
- The National Fraud Authority
- The Health and Safety Executive
- The Equalities and Human Rights Commission
- The Police

If an individual is concerned about undertaking the steps within this procedure or wishes to receive advice on whistleblowing, they are advised to contact the independent charity, Protect (formerly known as Public Concern at Work), for advice:

Protect
The Green House
244-254 Cambridge Heath Road
London E2 9DA
Tel: 020 3117 2520
Email: whistle@protect-advice.org.uk
Website: [Protect - Speak up stop harm The Whistleblowing Charity \(protect-advice.org.uk\)](http://www.protect-advice.org.uk)
or ACAS - <http://www.acas.org.uk/index.aspx?articleid=1461> - before taking further action.

Individuals are advised not to resort to the press or media (including social media) as such a route may lead to defamation proceedings if allegations are unfounded. Individuals may take their own legal advice if desired.

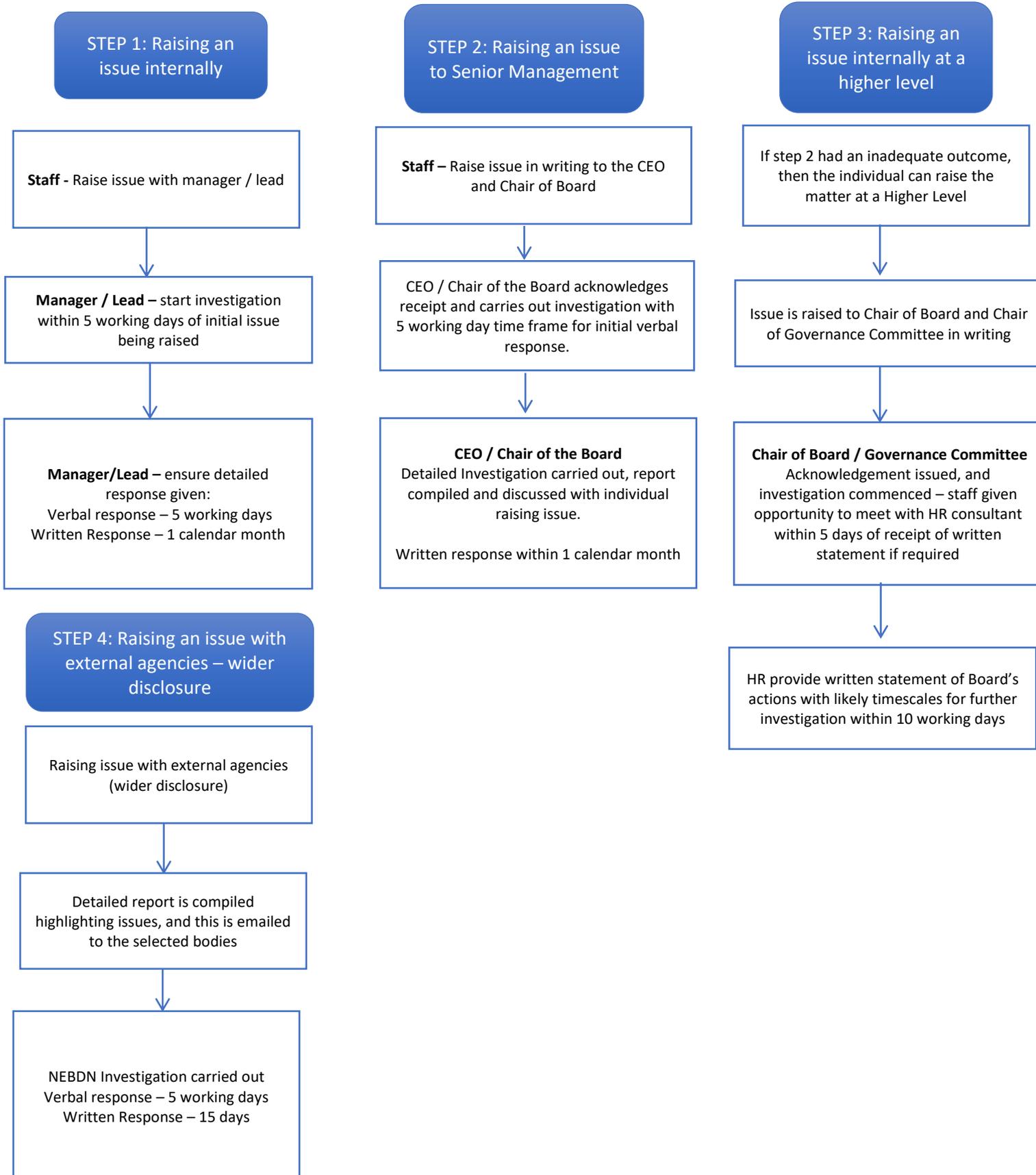


Annex 1 to Appendix 1: Whistleblowing Letter Template

To: (Individual to whom the letter is addressed)	
From: (Name and contact details of whistleblower)	
Date:	
Nature of issue or concern: <ul style="list-style-type: none">• an outline of the known or suspected wrongdoing• details to the best of your knowledge about when, where, and how it occurred• a list of the names of those suspected of being involved (both within NERBDN and externally)• a list of the names of anyone who may have relevant information• details of how you came to know about the suspected activities• what, if any, do you estimate to be the value of the loss to NERBDN or other parties• what, if any, breaches of internal controls, policy, procedure, or other requirements you believe took place• the names of anyone who you have discussed the incident with or reported it to• your name and contact details - these will be kept confidential as far as is reasonably practical• the date and time of making the report.	
Details of any earlier attempts to raise issue/concern: (what, who with - if this applies)	
Outcome of any earlier investigations: (if this applies)	
Comments/suggestions for remedial action: (if appropriate)	



Annex 2 to Appendix 1: Contacts to be used when raising issues in distinct parts of the organisation





Appendix 2: Management of Investigations – Guidance Notes

An investigating manager¹ will be appointed to lead the investigation into the allegations. The investigating manager may, dependent on the circumstances, be one of the senior management team or a staff lead. Training on how to undertake this role will need to be undertaken.

The investigating manager will have the following responsibilities:

- arrange individual interviews with relevant witnesses or individuals and inform them of their right to be accompanied at the meeting by a legal advisor / trade union representative / work colleague
- establish the facts/obtain statements/collect documentary evidence
- maintain detailed records of the investigation process
- make any recommendations for action to be submitted to a more senior person.

The investigating manager will have the following responsibilities towards the party who raised the disclosure:

- hold a formal meeting with the individual raising the issue/concern to discuss the matter
- inform them of their right to be accompanied at any interview by a legal advisor/trade union representative/work colleague
- keep the individual up to date with progress on the matter and agree timescales for action
- notify the individual making the disclosure about the outcome of the investigation, including how the matter will be dealt with and whether they will be required to attend an investigatory interview
- give details of support mechanisms available.

The investigating manager will have the following responsibilities towards the party against whom the disclosure is raised, pending consideration of the severity of the allegations, legal counsel's advice, and safeguards to avoid alerting alleged parties.

Inform the individual/individuals about whom the disclosure is made in writing of the disclosure, the seriousness of the allegations and provide any supporting evidence.

- Advise in writing of the procedure to be followed.
- Give the person the opportunity to respond in person and in writing to the claims made and receive and consider any relevant evidence.
- Inform them of their right to be accompanied at any interview by a legal advisor / trade union representative / work colleague.
- Give details of support mechanisms available.

The investigating manager may also be required to act as a witness at any subsequent disciplinary hearing if required. Where necessary the organisation will provide support, counselling, or mediation to any team or individual subject to investigation to ensure normal working relationships are maintained as effectively as possible.

¹ The investigating manager may, dependent on the circumstances, be one of the senior management team or a staff lead. Training on how to undertake this role will need to be undertaken.



The person appointed to lead a hearing/hear an appeal will have the following responsibilities:

- Hold a formal meeting with the individual who made the disclosure with consideration as to timescales required to report on the outcome.
- Ensure all parties are informed of their right to be accompanied at any meetings by a legal adviser / trade union representative / work colleague.
- Review any investigation report/procedure followed and findings.
- Decide whether to pursue further action/uphold appeal or not.
- Initiate a new investigation if necessary.
- Report the findings in writing to the Chief Executive, if applicable.
- Communicate the outcome in writing to the individual making the disclosure and the individual (s) against whom the disclosure was made within one calendar month from the start of investigation.