UCQ UNIVERSITY CENTRE QUAYSIDE

Appendix H: Allegations and Whistleblowing

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1. Purpose

1.1 The purpose of this appendix is to provide a clear set of guidelines to students and staff regarding the actions they must take to raise concerns about staff, or poor or unsafe practice and potential failures to safeguarding arrangements.

2. Scope

2.1 This policy applies to all students and staff, including agency, associate and hourly paid, irrespective of anyone's position within the organisation, together with associates and any workers who are at the premises on a voluntary, placement or other professional basis.

3. Introduction

3.1 University Centre Quayside (UCQ) encourages members of the UCQ community to raise genuine concerns about malpractice at the earliest possible stage. They do not need to wait to have proof before raising a genuine concern. Malpractice within UCQ is taken very seriously.

3.2 UCQ has produced this procedure to provide protection for members of the UCQ community who want to raise concerns about malpractice in connection with UCQ. The aim is to provide a way for anyone to quickly raise genuine concerns, without fear of repercussions. UCQ also want to promote a culture of openness and a shared sense of honesty by inviting all to act responsibly to uphold our reputation and maintain the public's confidence in us.

3.3 This procedure also aims to create a balance between the need to provide protection for members of the UCQ community who raise genuine concerns about malpractice and the need to protect members of staff, students and UCQ against incorrect allegations which can cause serious difficulty to innocent people. This procedure should be read alongside UCQ's Freedom of Speech Code of Practice to ensure a consistent approach.

4. Definitions

4.1 **Whistleblowing** – is the term used when someone who works in, or for, an organisation wishes to raise concerns about malpractice, wrongdoing, illegality or risk in the organisation (e.g. neglect of safeguarding responsibilities) and/or cover up of any of these as referenced in the Public Interest Disclosure Act 1998.

5. Malpractice

5.1 For the purposes of this procedure, the following are termed as types of 'malpractice':

5.1.1 Fraud or financial irregularity
5.1.2 Corruption, bribery or blackmail
5.1.3 Failure to keep to a legal or regulatory obligation
5.1.4 Miscarriage of justice
5.1.5 Putting, or likely to put the health or safety of any person in danger
5.1.6 Putting, or likely to put the environment in danger
5.1.7 Hiding or not releasing information relating to any of the above.

6. Disclosure of information

6.1 This procedure applies to someone releasing information who is a service user, employee or a UCQ contract worker we employ or engage and who has reasonable grounds to believe that malpractice has taken place, is currently taking place or is likely to take place in connection with UCQ (whether on the part of another employee, a member of the company, or any other person). Reasonable grounds for belief means more than just a possibility or risk that malpractice has taken place, is taking place or is likely to take place. The information must be made in good faith and not motivated by personal antagonism or personal gain.

6.2 UCQ recognises that some individuals may feel unable to raise concerns openly. To support this, UCQ provides a route for anonymous reporting of malpractice, safeguarding concerns, or potential infringements of lawful freedom of speech. While anonymous reports will be given due consideration, investigations may be limited if sufficient detail is not provided. Anonymous reports may be submitted by clicking here. https://forms.office.com/e/Nz1hkxJxrs

6.3 The person with the information should release it, in confidence, as soon as possible, to a member of management with whom they are comfortable, and who they feel they can trust. The manager should then raise the issue with the Principal & CEO who will make sure that a member of staff of appropriate experience within UCQ are chosen as investigator. An investigator may refuse to become involved on reasonable grounds, including:

- a possible previous involvement or interest in the matter concerned;
- being ill;
- being unavailable; or
- an investigator is satisfied that some other investigator would be more appropriate to consider the matter.

6.4 If you pass information to an investigator under this procedure, please do so in writing. If this is not possible you can speak to the investigator. You should provide as much written evidence as possible and the reasons for your belief of malpractice.

6.5 When the investigator receives your information, they will offer you a confidential interview as soon as possible and within no more than 10 working days. The purpose of the interview will be for the investigator to gather as much information as possible about your reasons for believing malpractice has taken place and to consult you about further steps which UCQ could take. You can have a work colleague, trade-union representative or friend with you at the interview. If your friend is a lawyer, they cannot be there in their legal capacity. The investigator may have an administrative assistant with them to take notes.

7. Procedure and further steps

7.1 As soon as possible after the interview (or after you tell the investigator if no interview takes place), and within no more than 20 working days, the investigator will recommend the further steps to be taken. These recommendations may include, but are not limited to, the following:

- The matter may need to be reported to the police.
- The matter may need to be investigated by either internal or external auditors or other investigators UCQ have appointed.
- The matter may need to be reported to the appropriate Government department

- You or another individual may need to be given the opportunity to take action through the grievance or complaints procedures or by making an appeal under the appeals procedures if the concerns relate to either yours or another's own personal circumstances rather than malpractice within UCQ.

7.2 Where concerns are raised anonymously, the investigator will make every effort to assess the credibility of the concern and the evidence available. Anonymous disclosures will not be dismissed solely because of anonymity, though the ability to communicate with the reporter and gather evidence may be constrained.

7.3 The reasons when the investigator may recommend no further action are as follows:

- If the investigator is satisfied that you do not have a reasonable belief that malpractice has taken place or is likely to.
- If the investigator is satisfied that you are not acting in good faith.
- If the matter concerned is already being dealt with under legal proceedings, or has already been referred to the police, the Department for Education, the Department for Children, Schools and Families, the National Audit Office or another organisation or person covered by the Public Interest Disclosure Act 1998.
- If the matter is already being (or has already been) dealt with under one of UCQ's other procedures relating to staff, students or stakeholders.
- If the investigator is satisfied, after investigation, that the malpractice has not taken place, is not taking place, or is not likely to.

7.4 The investigator will make any recommendations under this procedure to the Principal & CEO unless it is alleged that the Principal & CEO is involved in the alleged malpractice or unless there are other good reasons for not doing so. If this is the case, the investigator will make the recommendations to the Vice Principal

7.5 The investigator will take all steps possible to make sure that the recommendations are put into practice unless there are good reasons for not doing so.

7.6 Once the Principal & CEO has decided what further steps (if any) should be taken, the investigator will let you know the decision within 10 working days. If UCQ plan to take no further action, the investigator will give you the reasons for this.

7.6 The following definitions will be used when determining the outcome of an allegation against a UCQ student, staff or another stakeholder:

- **Substantiated** – there is sufficient evidence to prove the allegation
- **Malicious** – there is sufficient evidence to disprove the allegation and there has been a deliberate act to deceive
- **False** – there is sufficient evidence to disprove the allegation
- **Unsubstantiated** – there is insufficient evidence to either prove or disprove the allegation.

8 Safeguarding: allegations about a member of staff

8.1 In order to safeguard children and vulnerable adults, UCQ undertake robust recruitment exercises. Satisfactory reference and DBS checks are required for all UCQ staff who come into contact with children and vulnerable adults. No member of staff subject to these checks are permitted to commence work until a satisfactory outcome is confirmed.

8.2 A complaint or allegation about a member of staff may arise from different sources, including:

- A child or an adult
- A parent
- A member of the public
- A disciplinary investigation

8.3 A person receiving an allegation or concern about another member of staff must do the following:

- Treat the matter seriously
- Do not make suggestions or lead the person in any way
- Take particular care in asking or interpreting responses to questions about indications of abuse as this could affect evidence put forward in any subsequent legal proceedings
- Make a written record of the information as soon as possible that includes:

    a) The name of the complainant and, where different, the name of the child who has allegedly been abused
    b) When and where the alleged incident took place, including the date and time
    c) Who was present
    d) The account of what is alleged to have happened
    e) A description of any injuries observed
    f) Your name, signature and date

- Contact the Strategic Safeguarding Lead (SSL) **immediately** to report that an allegation has been made
- If the SSL is unavailable or the allegation is being made against the SSL, contact the Designated Safeguarding Lead **immediately**.

****For emergencies call 999 immediately****

8.4 Referral to the Local Authority Designated Officer (LADO)

Where an allegation is made against a member of staff that meets the threshold for potential harm to a child or vulnerable adult, UCQ will refer the matter to the Local Authority Designated Officer (LADO) in accordance with statutory guidance. The LADO is responsible for overseeing the management of allegations against adults who work with children and vulnerable adults, ensuring that cases are dealt with fairly, quickly, and consistently. The Strategic Safeguarding Lead will make the referral and coordinate with the LADO as required.

8.5 Key safeguarding contacts

Responsibility	Name	Telephone	Email
Principal & CEO	Nick Mapletoft	03330048470	Nick.mapletoft@ucq.ac.uk
Strategic Safeguarding Lead	Michelle Elliott	07759561342	Michelle.elliott@ucq.ac.uk
Designated Safeguarding Lead	Kelly Pattison	07308231263	kelly.pattison@ucq.ac.uk
Designated Safeguarding Lead	Ben Devine	07366564165	ben.devine@ucq.ac.uk

9 Passing information outside of UCQ

9.1 If, having followed this procedure, you are not satisfied with the further steps (if any) we have decided on, or the outcome of these steps, you may raise the matter confidentially with an appropriate prescribed regulator. Where the matter concerns potential breaches of the Higher Education (Freedom of Speech) Act 2023, you may also raise the matter with the Office for Students (OfS), who act as the designated regulator. A full list of Prescribed Persons can be obtained from the investigator. Before taking this action, you must inform the investigator.

9.2 You may also raise the matter if you have good reason for believing that all of the investigators are, or were, involved in the alleged malpractice or that you may suffer as a result of releasing the information.

9.3 You may, at any time, pass the matter confidentially to a professionally qualified lawyer to get legal advice.

9.4 If an investigator believes that the circumstances of a particular situation will mean they need to get guidance, such as from a regional trade union official, they may do so. In these circumstances the investigator will have to do their best to make sure that the matter stays strictly confidential, unless:

- allowed for by this procedure; or
- this is not possible by law; or
- until such time as it becomes public knowledge.

10 Duty of Care to students and staff

10.1 UCQ is committed to dealing with any allegations or issues quickly, and in a fair and consistent way, that provides effective protection for whistle-blowers and any students/others involved, whilst at the same time supporting the individual who is the subject of an allegation.

10.2 Any report or recommendations by the investigator will not, if possible, identify you, unless you agree in writing or unless there are reasons to believe you have acted maliciously. If you do not agree, or there are no good reasons, the investigator will not reveal your identity under this procedure unless:

- they legally have to;
- the information is already public knowledge;
- it is on a strictly confidential basis to the investigator's administrative assistant;
- it is on a strictly confidential basis to a professionally qualified lawyer for the purpose of getting legal advice; or
- it is necessary as part of a proper investigation.

10.3 However, while UCQ takes all practical steps to avoid identifying you, you must accept that in some circumstances it is going to be obvious who has provided the information. As a result of this, UCQ cannot guarantee to keep your identity confidential.

8.6 The investigator will keep any documents (including electronic files) relating to the matter secure, so that as far as possible only they and their administrative assistant have access to them. As far as possible, any documents the investigator keeps will not reveal your identity.

10.5 If you involve a local trade-union representative or work colleague in this procedure, you must make sure that the representative or work colleague keeps this matter strictly confidential, unless:

- allowed for by this procedure; or
- this is not possible by law; or
- until such time as it becomes public knowledge.

10.6 UCQ may ask you to take part in any enquiry or investigation into the matter that UCQ organises, where your involvement would help ensure a fair and thorough process.

10.7 Where you take part in this enquiry or investigation, it will usually be on an open rather than a confidential basis. However, the investigator's obligations under this procedure will still apply about your identity.

10.8 UCQ will not treat you less favourably because you have provided information under this procedure. If you do receive this kind of treatment, you should complain to an investigator. If you want the investigator to take action, UCQ may ask you to give your permission in writing, revealing your identity for the purposes of any action.

10.9 UCQ will not take disciplinary action against you if you release information under this procedure. This will not prevent disciplinary action in cases where UCQ has good reason to believe that you have provided information falsely or maliciously or if you break the conditions of this procedure without good reason.

10.10 UCQ is committed to ensuring that raising concerns, including those relating to the lawful exercise of freedom of speech, does not result in detrimental treatment of the individual. This applies equally where the concern is raised anonymously.

11. Training and communication

11.1 All staff will receive annual safeguarding training. Annual training for staff will also include awareness of UCQ's duties under the Higher Education (Freedom of Speech) Act 2023, including how whistleblowing and safeguarding routes intersect with freedom of speech protections. Staff and students are invited to review the wealth of resources available on UCQ's safeguarding, Prevent and wellbeing page, available at https://ucq.ac.uk/safeguarding-and-prevent/

11.2 Ongoing support will be provided by the Safeguarding Team. This appendix will be made available on the UCQ website for all staff and stakeholders to access.

12. Review and revision

12.1 This appendix to the Safeguarding Policy will be reviewed annually, or earlier as required to ensure best practice.

13. Document history

ISSUE NO.	DATE	PAGE	REVIEWER	DETAIL OF AMENDMENT
07	02/02/2024	3, 8	Tara Henderson	Periodic review conducted. Web links checked to ensure currency. Appendix revised to fit recommended document template as specified in quality procedure QP02. Sections 2, 11, 12 & 13 added. Paragraph numbers updated accordingly.
08	31/01/2025	6	Michelle Elliott	Periodic review conducted. Web links checked to ensure currency. Contact details checked and amended accordingly.
09	24/09/2025	3, 4, 5, 7, 8	Tara Henderson	Paras 3.3, 6.2, 7.2, 7.3, 9.1, 10.10, 11.1 updated to include an anonymous reporting route, cross-reference to UCQ's Freedom of Speech CoP, explicit reference to OfS as regulator under the Higher Education (Freedom of Speech) Act 2023, updated prescribed regulators in Section 9, strengthened duty of care wording, and addition of staff training requirements on freedom of speech duties.
10	30/01/2026	All	Michelle Elliott	Periodic checks. Links checked for accuracy. Added section to 8.4 re referral to LADO

14. Initial equalities impact assessment

Department: All	**Completed by:** Michelle Elliott: Vice Principal	**Date of initial assessment:** 23/04/2021
Area to be assessed:	SA-002 Safeguarding Policy: Appendix H	
Existing or new policy/procedure:	Existing	
What evidence has been used to inform the assessment and policy? (please list only)		
External guidance and requirements: ➢ All legislation and publications identified in section 2.1 of the Safeguarding Policy ➢ **Internal guidance and requirements:** ➢ Consultation with Safeguarding Team and Head of Policy & Governance		

1. Describe the aims, objectives or purpose of the policy/procedure		University Centre Quayside (UCQ) fully recognise their responsibilities to safeguard and promote the welfare of children and vulnerable adults, including the responsibilities their Academic Council, staff and volunteers have in regard to the protection of children and vulnerable adults from abuse; and to have due regard to the need to prevent people from being drawn into terrorism. This Safeguarding Policy sets out UCQ's safeguarding arrangements. This appendix is to provide a clear set of guidelines to students and staff regarding the actions they must take to raise concerns about staff, or poor or unsafe practice and potential failures to safeguarding arrangements		
2. Which stakeholders/groups are intended to benefit from this policy/procedure?		All stakeholders		
The Equality Act 2010 requires public bodies to have 'due regard' to the need to:- (1) Eliminate unlawful discrimination, harassment and victimization (2) Advance equality of opportunity between different groups; and (3) Foster good relations between different groups		**3. Could the policy/procedure have a disproportionately negative effect impact in terms of the aims set out in (1) to (3) of the Act on any of the protected characteristics?:-** **High** **Medium** **Low** **No effect**	**4. Briefly explain how the policy/procedure furthers or prevents the aims set out in (1) to (3).**	**5. If there is a disproportionately negative impact on any protected characteristics, can it be justified on the grounds of promoting equality or any other reason? If yes, please explain.**
Protected characteri	**Age**	No effect	Not applicable	Not applicable
	Disability	No effect	Not applicable	Not applicable
	Gender	No effect	Not applicable	Not applicable
	Gender reassignment	No effect	Not applicable	Not applicable

	Marriage and Civil Partnership	No effect	Not applicable	Not applicable
	Pregnancy and Maternity	No effect	Not applicable	Not applicable
	Race	No effect	Not applicable	Not applicable
	Religion or Belief	No effect	Not applicable	Not applicable
	Sexual Orientation	No effect	Not applicable	Not applicable

6. Has there been any consultation/engagement with the appropriate protected characteristics?		Not applicable as no negative PC impact identified
7. What action(s) will you take to reduce any disproportionately negative impact, if any?		None required
8. Based on the information in sections 1 to 7, should this policy/procedure proceed to Full Impact Assessment? (recommended if one or more 'High' under section 2)		No
Assessor signature:	**Approved by:** **Michelle Elliott**	**Date approved:** 23/04/2021