PHSSL CARE LIMITED

CONTROLLED POLICY

B03 – WHISTLEBLOWING / SPEAKING UP POLICY

Policy Reference	B03
Version	1.0
Policy Owner	PHSSL Care Limited
Approved By	Lade Awosika, Director
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Status	Controlled Document
Applies To	All PHSSL Care Limited staff, workers and relevant contractors
Supersedes	New policy

1. Purpose

This policy provides a safe and clear route for staff and workers to speak up about suspected wrongdoing, unsafe practice, abuse, neglect, fraud, legal or regulatory breaches, concealment or other serious concerns connected with PHSSL Care Limited.

2. Scope

This policy applies to employees, workers, agency staff engaged by PHSSL Care Limited, contractors, volunteers where applicable, and others working on behalf of the service. It is intended for concerns in the public interest rather than individual employment grievances, which should normally be managed through the appropriate employment procedure.

3. Policy Statement

PHSSL Care Limited encourages staff to raise genuine concerns at the earliest opportunity. A person who raises a concern honestly and in good faith will be treated respectfully and must not be subjected to retaliation, bullying, harassment or disadvantage for speaking up.

4. Legal and Regulatory Framework

This policy will be applied with regard to the Employment Rights Act 1996 as amended by the Public Interest Disclosure Act 1998; the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, including Regulations 13 and 17 where relevant; safeguarding legislation and guidance; and current CQC expectations relating to safe, open and well-led services.

5. What May Be Raised

Concerns may include suspected criminal activity; abuse or neglect; unsafe care; risks to health or safety; medication or record falsification; fraud or financial wrongdoing; unlawful discrimination; breaches of legal or regulatory duties; serious professional misconduct; environmental harm; deliberate concealment of wrongdoing; or attempts to prevent staff from raising legitimate concerns.

6. Whistleblowing and Personal Grievances

A concern about wrongdoing affecting others or the public interest may fall within whistleblowing arrangements. A complaint primarily about an individual's own employment circumstances will normally be handled under grievance or other HR procedures unless it also raises a wider public-interest concern.

7. Raising a Concern Internally

Staff should normally raise concerns promptly with their line manager, Registered Manager or another appropriate senior person. If the concern involves that person, or the staff member reasonably believes that route is inappropriate, the concern should be escalated to another senior manager or the Director.

8. Safeguarding Concerns

Concerns that an adult or child is being abused, neglected or exploited must be reported immediately under safeguarding procedures. Whistleblowing arrangements support, but do not replace, urgent safeguarding action.

9. Immediate Danger or Criminal Activity

Where there is immediate danger, staff should take appropriate emergency action and contact emergency services where necessary. Suspected serious criminal activity may require police involvement. Staff should not delay urgent protective action while waiting for an internal whistleblowing response.

10. How a Concern May Be Raised

Concerns may be raised verbally or in writing. The staff member should provide as much factual information as reasonably possible, including what happened, when and where it occurred, who may be involved, any witnesses and why the matter causes concern.

11. Anonymous Concerns

Anonymous concerns will be considered where sufficient information is available, although anonymity may make investigation or feedback more difficult. Staff are encouraged to identify themselves where they feel able so that concerns can be explored fully and support can be offered.

12. Confidentiality

PHSSL Care Limited will seek to protect the identity of a person who raises a concern as far as reasonably possible. Complete confidentiality cannot always be guaranteed where disclosure is legally required, necessary for safeguarding, or essential to a fair investigation.

13. Protection From Detriment

Retaliation against a person for raising a genuine concern is unacceptable. Any allegation of victimisation, bullying, threats, reduced opportunities or other detriment connected with speaking up will be taken seriously and may result in management action.

14. Malicious or Knowingly False Allegations

A concern raised honestly will not result in action against the person simply because it is not substantiated. Deliberately making allegations known to be false or malicious may, however, be addressed under appropriate conduct procedures.

15. Management Response

The person receiving a concern must take it seriously, consider immediate safety, make an appropriate record, preserve relevant evidence and escalate the matter. Management will decide what safeguarding, investigation, regulatory, employment or external action is required.

16. Investigation

Investigations will be proportionate, objective and conducted by a person with suitable authority and independence from the matter where practicable. Staff must cooperate honestly and must not destroy, alter or conceal relevant information.

17. Feedback to the Person Raising the Concern

Where appropriate and lawful, PHSSL Care Limited will acknowledge the concern and provide reasonable feedback about how it has been handled. Confidentiality, data protection, safeguarding and employment rights may limit the detail that can be shared.

18. External Speaking Up

Where internal routes are inappropriate, have failed to address a serious concern, or where the law otherwise permits, staff may raise concerns with an appropriate prescribed or authorised external body. Depending on the issue, this may include CQC, a local safeguarding authority, the police, a professional regulator or another prescribed person.

19. CQC and Safeguarding Authorities

Staff may contact CQC or relevant safeguarding authorities about concerns within their remit. PHSSL Care Limited will not require staff to conceal unsafe or abusive practice from regulators or statutory safeguarding bodies.

20. Professional Duties

Registered professionals and other staff with professional obligations must also comply with relevant codes of conduct and professional reporting duties. This policy does not prevent a person from fulfilling a lawful professional obligation.

21. Record Keeping

Whistleblowing records will be factual, confidential and securely stored. Records should document the concern, risk assessment, decisions, investigation or referral, outcome and improvement actions while protecting personal information appropriately.

22. Learning and Improvement

Concerns will be reviewed for wider learning. Where shortcomings are identified, PHSSL Care Limited may revise care plans, risk controls, staffing, training, supervision, recruitment, governance systems or policies and will monitor actions to completion.

23. Staff Responsibilities

Staff must raise genuine concerns promptly; provide truthful information; preserve confidentiality; cooperate with safeguarding or investigation processes; avoid knowingly false allegations; and report any retaliation or attempt to suppress a legitimate concern.

24. Management Responsibilities

Managers must create a culture in which staff can speak up; respond promptly and objectively; protect people from immediate harm; support staff raising concerns; prevent retaliation; make necessary referrals or notifications; maintain records; and ensure learning is implemented.

25. Monitoring and Governance

PHSSL Care Limited will monitor speaking-up concerns, themes, response quality, outcomes, retaliation allegations and improvement actions through governance arrangements. Information will be handled in a way that protects confidentiality.

26. Related PHSSL Policies

- A01 Governance and Quality Assurance Policy
- A04 Records Management, Confidentiality and Data Protection Policy
- A05 Complaints, Concerns and Compliments Policy
- A06 Duty of Candour Policy
- B01 Safeguarding Adults Policy
- B02 Safeguarding Children and Young People Policy
- C03 Staff Conduct, Capability and Disciplinary Arrangements Policy
- E01 Health and Safety Policy
- E02 Accident, Incident and Near-Miss Reporting Policy
- F01 Information Sharing and Communication Policy

27. Review and Document Control

This policy will be reviewed at least annually and sooner following significant legal or regulatory change, a serious speaking-up concern, inspection findings, audit findings or identified weaknesses. The current approved electronic version is the controlled master. Printed or locally saved copies are uncontrolled unless specifically issued and recorded as controlled copies.

Approved by	Lade Awosika

Position	Director
Approval method	Approved electronically
Approval date	September 2026
Next review date	September 2027