



Whistle blowing policy

Unique reference number: GOV-P-001

Document Owner: Marianne Millard - Association Secretary

Version: 4.2

Purpose of Policy

We are committed to conducting our business with honesty and integrity, and we expect all employees and volunteers to maintain high standards in accordance with our Code of Conduct.

This policy covers all employees, officers, consultants, contractors, volunteers, interns, casual workers and agency workers (“relevant person(s)”).

The aims of this policy are:

- a) To encourage employees, officers, consultants, contractors, volunteers, interns, casual workers and agency workers, to report suspected wrongdoing as soon as possible, in the knowledge that their concerns will be taken seriously and investigated as appropriate, and that their confidentiality will be respected.
- b) To provide employees, officers, consultants, contractors, volunteers, interns, casual workers, and agency workers with guidance as to how to raise those concerns.
- c) To reassure employees, officers, consultants, contractors, volunteers, interns, casual workers, and agency workers that they should be able to raise genuine concerns without fear of reprisals, even if they turn out to be mistaken.

This policy takes account of the Whistleblowing Arrangements Code of Practice issued by the British Standards Institute and Public Concern at Work.

This policy does not form part of any employee’s contract of employment and the Charity may amend it at any time.

Definitions:

Whistleblowing is the disclosure of information which relates to suspected wrongdoing or dangers at work.

A whistleblower is a person who raises a genuine concern relating to any of the above. If you have any genuine concerns related to suspected wrongdoing or danger affecting any of our activities (a whistleblowing concern) you should report it under this policy.

Policy Statements

Disclosures may include, but are not limited to:

- a) criminal activity;
- b) failure to comply with any legal or professional obligation or regulatory requirements;
- c) miscarriages of justice;
- d) danger to health and safety;
- e) damage to the environment;
- f) bribery under our Anti-corruption and Bribery Policy;
- g) facilitating tax evasion
- h) financial fraud or mismanagement;
- i) breach of our internal policies and procedures, including our Code of Conduct and Dignity at Work policy;
- j) Any abuse or harassment including of a sexual nature
- k) conduct likely to damage our reputation or financial wellbeing;
- l) unauthorised disclosure of confidential information;
- m) negligence;
- n) animal abuse;
- o) the deliberate concealment of any of the above matters.

If you are uncertain whether something is within the scope of this policy you should seek advice from the Whistleblowing Officer: Marianne Millard, Association Secretary via email at

speakoutatguidedogs@guidedogs.org.uk or via telephone at 07501 625061.

This policy should not be used for complaints relating to your own personal circumstances, such as the way you have been treated at work. In those cases, you should use the Grievance Procedure or The Dignity at Work Policy as appropriate.

Roles and Responsibilities

The Risk Committee (formerly Audit & Risk Committee) has overall responsibility for this policy and reviewing the effectiveness of actions taken in response to concerns raised under this policy.

The Whistleblowing Officer has day-to-day operational responsibility for this policy and must ensure that all managers and other staff who may deal with concerns or investigations under this policy receive regular and appropriate training.

The Whistleblowing Officer, in conjunction with the Risk Committee should review this policy from a legal and operational perspective at least once a year.

All relevant persons are responsible for the success of this policy and should ensure that they use it to disclose any suspected danger or wrongdoing. Relevant persons are invited to comment on this policy and suggest ways in which it might be improved. Comments, suggestions and queries should be addressed to the Whistleblowing Officer.

All whistleblowing incidents are monitored and reported to the Chairman of the Risk Committee and CEO, subject to him/ her not being conflicted, and, where appropriate, to the Risk Committee and Board of Trustees.

Permissible exceptions:

None.

Related policies, processes, or procedures:

Whistle blowing Procedure

Whistle blowing Investigation Procedure

Grievance Policy

Grievance Procedure

Dignity and Respect at Work Policy

Governance Information. Please do not remove.

Governance Review & Approval Table*:

The table below contains 2 rows and 6 columns. Headings in row and column 1.

Governance Area:	H&S	Safeguarding	Insurance	Legal	Data Protection
Approved by (date & initial):				16/02/2018	

Board Approval Table:

The table below contains 2 rows and 6 columns. Headings in row and column 1.

Board / Committee:	Audit & Risk (ARC)	Finance Reporting & Investment (FRIC)	Trustee Board (GDBA)	Remuneration & People (RP)	Other (enter name)
Date Approved:					

Review Frequency:

Reviews should be done in accordance with relevant regulation or legislation changes, or as a result of ad hoc activity, such as continuous improvement initiatives, and internal audit findings.

Policy: Every 2 years as a minimum unless otherwise agreed between owner and Knowledge Hub team.

Version control table:

Only the original approval date and the most recent amendment should be included in the table. The table below contains 3 rows and 4 columns. Headings are in row 1.

Date	Version	Status	Details of Change
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16/02/2018	1.0	Approved	New document
20/02/2025	4.2	Updated	Content reviewed and transferred to updated policy template.

***Please see below when a document must be reviewed by Governance**

Safeguarding - All documents with any reference to safeguarding, recruitment and training, working with clients (Adult and CYPF).

Legal - All documents with any reference to agreements or contracts, third party partnerships, potential reputational risk, reference to compliance with any statutory or regulatory obligation.

Health and Safety - All documents where an activity could cause harm to a member of staff, service user, volunteer, or third party or where there is reputational risk.

Insurance - An introduction of new, or a change to the way we deliver our, services.

Data Protection - If we are gathering any personal information on volunteers or service users.

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