

Compilation of Reports by Whistleblowing Prescribed Persons for the 2017-18 Reporting Period

Under the whistleblowing framework, found in Part IVA of the Employment Rights Act 1996 (as amended by the Public Interest Disclosure Act 1998), a worker will qualify for legal protection against detriment or unfair dismissal if they make a disclosure in the public interest which tends to show one or more types of wrongdoing.

To qualify for the protections, the worker must generally make their disclosure either to their employer, a legal adviser, Minister of the Crown or to a 'prescribed person' (as set out in the Public Interest Disclosure (Prescribed Persons) Order 2014). Prescribed persons are most often organisations with a regulatory responsibility for a sector, or for the type of wrongdoing that is being disclosed.

In a 2013 Call for Evidence, the Government found that whistleblowers did not have confidence that their reports to prescribed persons were being investigated. To address this, the Prescribed Persons (Reports on Disclosures of Information) Regulations 2017 were introduced. These require certain prescribed persons to report annually on selected information relating to the whistleblowing disclosures that they have received from 1 April 2017.

The first set of annual reports for the 12 months from 1 April 2017 to 31 March 2018 were due for publication by prescribed persons by 30 September 2018. BEIS stated that it would collate the annual reports and provide them to Parliament.

This is the first compilation of such reports under the reporting duty.

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Correspondence and Whistleblowing

Annual report 2017/18



May 2018

Audit Scotland is a statutory body set up in April 2000 under the Public Finance and Accountability (Scotland) Act 2000. We help the Auditor General for Scotland and the Accounts Commission check that organisations spending public money use it properly, efficiently and effectively.

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Introduction

1. Audit Scotland handles a wide range of correspondence from members of the public, elected representatives and organisations. Correspondence can be addressed to Audit Scotland, the Accounts Commission for Scotland, the Auditor General for Scotland, or individual auditors.
2. We consider issues of concern as part of our [Code of Audit Practice](#). As a public sector organisation, we understand that people will raise issues of concern about the bodies we audit or will enquire about our audit work. The Code states the key factor in determining whether we examine an issue of concern is the relevance of the issue to Audit Scotland's role and functions. Audit Scotland and appointed auditors use their professional and technical knowledge in determining how we deal with each issue of concern raised.
3. Audit Scotland's correspondence team responds to issues of concern, whistleblowing disclosures and audit enquiries. Auditors appointed by the Accounts Commission also have specific duties to consider formal objections to the accounts of local government bodies raised by members of the public.
4. Under the Whistleblowing Act, people can raise concerns about an organisation with 'prescribed persons' i.e. independent regulators. In October 2017 Audit Scotland was erroneously removed from the Whistleblowing prescribed persons list. The Auditor General and the Accounts Commission remain prescribed persons. This means that the auditors they appoint continue to consider whistleblowing disclosures. We are liaising with the Scottish Government and the UK Department for Business, Energy and Industrial Strategy about reinstating Audit Scotland as a prescribed person.
5. This report sets out the volume of correspondence we received during 2017/18, which sector it relates to, our performance in meeting target response times and an update on our continuous improvement programme. Statutory reporting about whistleblowing disclosures came into effect on 1 April 2017, so we have included our 2017/18 whistleblowing disclosures information in this report. Freedom of Information (FoI) requests, complaints about Audit Scotland and data subject access requests are covered in a separate annual report.

Key messages

- The volume of correspondence remains similar to the previous four years. We dealt with over 300 correspondence cases in 2017/18. This includes 136 new issues of concern. A fifth of these (27) were whistleblowing disclosures. This is a significant increase on the nine whistleblowing disclosures we received the previous year.
- Performance against our target response times has continued to improve since 2014/15. During 2017/18, we acknowledged 100 per cent of issues of concern within our target of five working days. We issued a final response within our target of 30 working days for 97 per cent. This compares favourably with our 2014/15 performance of 61 per cent acknowledged within five working days and 58 per cent final responses within 30 days.
- Public expectation about Audit Scotland's role in dealing with correspondence is increasing all the time. The issues that people raise with us are also becoming more complex. Correspondents continue to share our responses with the wider public, increasingly through social media, which often generates further correspondence.
- We are committed to using intelligence generated through correspondence to inform our audit work. We are making better use of the management information available from our correspondence database. This enables us to identify more easily 'audit risks' (high level audit areas which help with planning) and 'audit themes' (detailed audit areas which are useful to local auditors). Most issues of concern we received in 2017/18 were recorded in the audit risk category of 'Effective leadership and scrutiny'. The most common audit theme from correspondence this year was 'Governance, accountability and scrutiny'. We continue to use this intelligence to inform current audit work and to help us plan future audit work across all business groups.
- During 2017/18, we successfully delivered many improvements in how we deal with correspondence across the organisation. For example, we introduced a correspondence leaflet for the public that sets out clearly the types of issues we deal with. These improvements have led to better response times and better quality of correspondence responses.

Correspondence in 2017/18

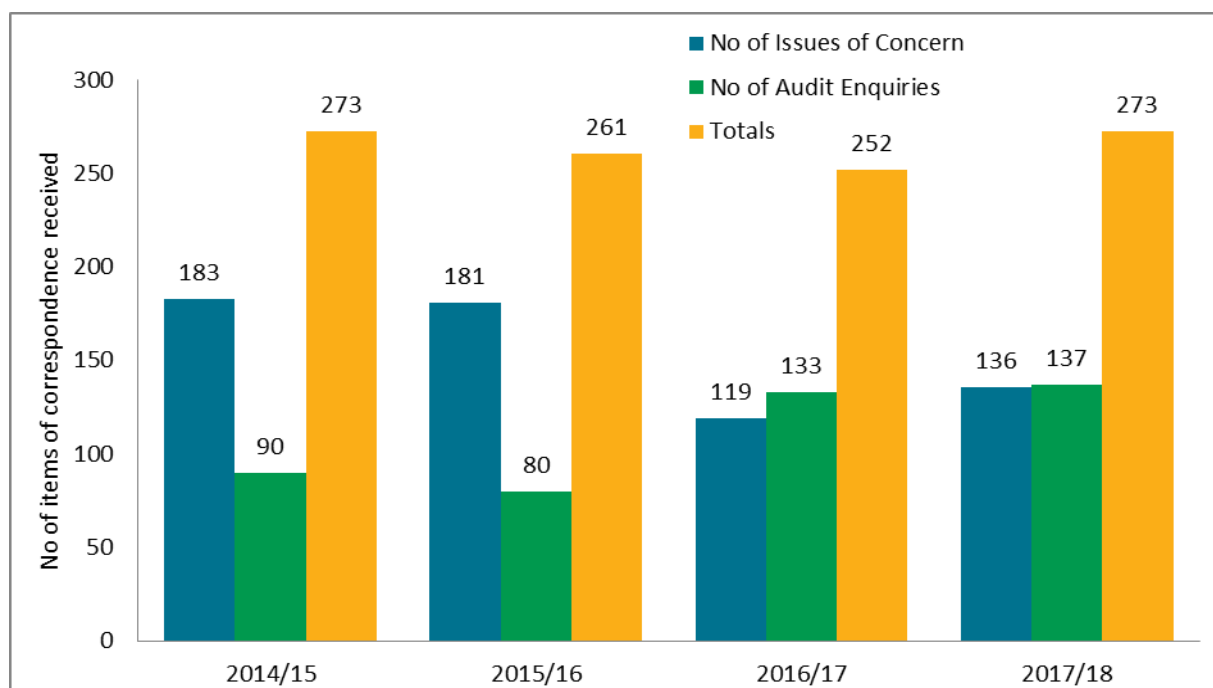
The volume of correspondence has remained consistent over the last four years

6. In 2017/18, we dealt with 315 cases of correspondence ([Exhibit 1](#)). This consists of:
- 137 enquiries about our audit work
 - 136 new issues of concern (we refer to these as concerns in rest of this report)
 - nine concerns that were awaiting a final response as at 1 April 2017 and were carried forward to this reporting year
 - 33 concerns that we reopened.

Exhibit 1

Volume of correspondence received, 2013/14 to 2017/18

The volume of correspondence we have received over the last four years remains steady



Note: The information above includes concerns, whistleblowing disclosures and audit enquiries. It does not include concerns carried forward from the previous year or reopened concerns. In 2015/16, we changed how we recorded concerns to capture those which were reopened.

Source: Audit Scotland

Audit enquiries

7. Audit enquiries include requests for further data from performance audit reports, questions about legislation and information about the role of public bodies. The level of public interest

in audit reports can affect how many audit enquiries we receive. More people are downloading our reports from the Audit Scotland website. For example, *NHS in Scotland 2017* has had 6,685 downloads since its publication in October 2017. The number of enquiries about our audit work has also increased since 2014/15. Monitoring the volume of downloads for each audit report and the number of audit enquiries generated by our work helps us to better assess the impact of Audit Scotland's work.

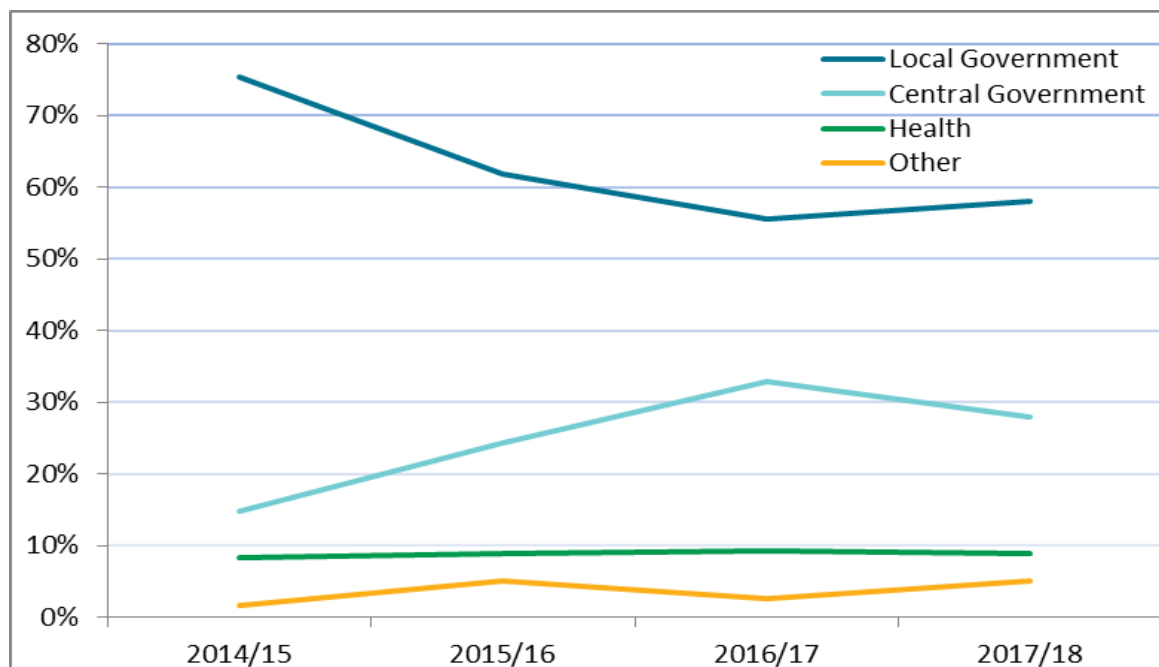
New concerns

8. The Accounts Commission and Auditor General appoint the auditors for each of the public bodies we audit. Most (95%) of the 136 concerns we received in 2017/18 were about public bodies we audit. The remaining five per cent of concerns were about bodies we do not audit.
9. 79 (58%) concerns we received in 2017/18 related to local government bodies; around a third of these were about councils. 38 concerns (28%) related to central government bodies and 12 (9%) to health bodies ([Exhibit 2](#)).
10. Most (62%) of the concerns we received in 2017/18 were by email and a fifth were by letter. Correspondents also continue to complete our online form with ten per cent using the form this year; an encouraging increase from four per cent in 2016/17. Eight per cent contacted us by other methods.
11. Members of the public raised 64 per cent of concerns. Councillors raised five per cent and MSPs raised eight per cent. This is consistent with previous years. Employees accounted for 12 per cent of concerns; a two per cent increase on 2016/17.
12. When dealing with concerns, the correspondence team works in partnership with the appointed auditor to provide the final response to the correspondent. This will include identifying how much work needs to be done and the resources we may need to review the concern. Concerns are increasing in complexity, for example many of this year's concerns involved more than one audited body. The time we spend dealing with concerns is also increasing.
13. Using our audit themes to categorise the concerns that we received in 2017/18, the most common concerns for councils related to financial management and governance, accountability and scrutiny. The most common for central government and health bodies related to governance, accountability and scrutiny.

Exhibit 2

Percentage of concerns received by sector, 2017/18

The proportion of concerns about Local Government had been falling over the previous three years but the trend has reversed this year. We've seen the opposite trend for central government concerns.



Source: Audit Scotland

We have seen a significant increase in the number of Whistleblowing disclosures

14. The Accounts Commission, the Auditor General and the auditors they appoint, are prescribed persons under the Public Interest (Prescribed Persons) Disclosure Order (2014). Workers ([as described by the guidance](#)) can raise disclosures about fraud, corruption or wrongdoing within the public bodies we audit. Our role is to provide workers with an alternative method for making a protected disclosure where they don't feel they can contact the public body directly.
15. The Accounts Commission and the Auditor General and the auditors they appoint do not have the power to issue fines or enforcements on the public bodies we audit. The guidance does not place any additional power or duty on 'prescribed persons' and we do not have a legal obligation to act on a whistleblowing disclosure.
16. We take our responsibilities under the Public Interest Disclosure Act 1998 (PIDA) very seriously. Whistleblowing disclosures tend to be more complex and therefore more time-consuming. We have a process in place to ensure these are dealt with appropriately.

17. The volume of whistleblowing disclosures has increased this year; we received 27 whistleblowing disclosures (11 of these were anonymous disclosures) compared with nine in 2016/17 (four were anonymous disclosures).
18. We treated 16 of the 27 as whistleblowing disclosures, although they did not specify they were coming to us under PIDA. The breakdown by prescribed person is as follows:
 - four disclosures were addressed to the Account Commission
 - three to the Auditor General
 - four to Audit Scotland,
19. We shared eight of the disclosures with auditors as audit intelligence and redirected nine to the appropriate body/regulator. We were unable to assist in three disclosures because there was insufficient information, no contact details and the person did not qualify as a worker under PIDA.
20. Seven of the whistleblowing disclosures were or will be actioned as part of the annual audit of the body. Auditors report any recommendations that arise from the disclosures as part of the annual audit. This helps to maintain the anonymity of the whistleblower.

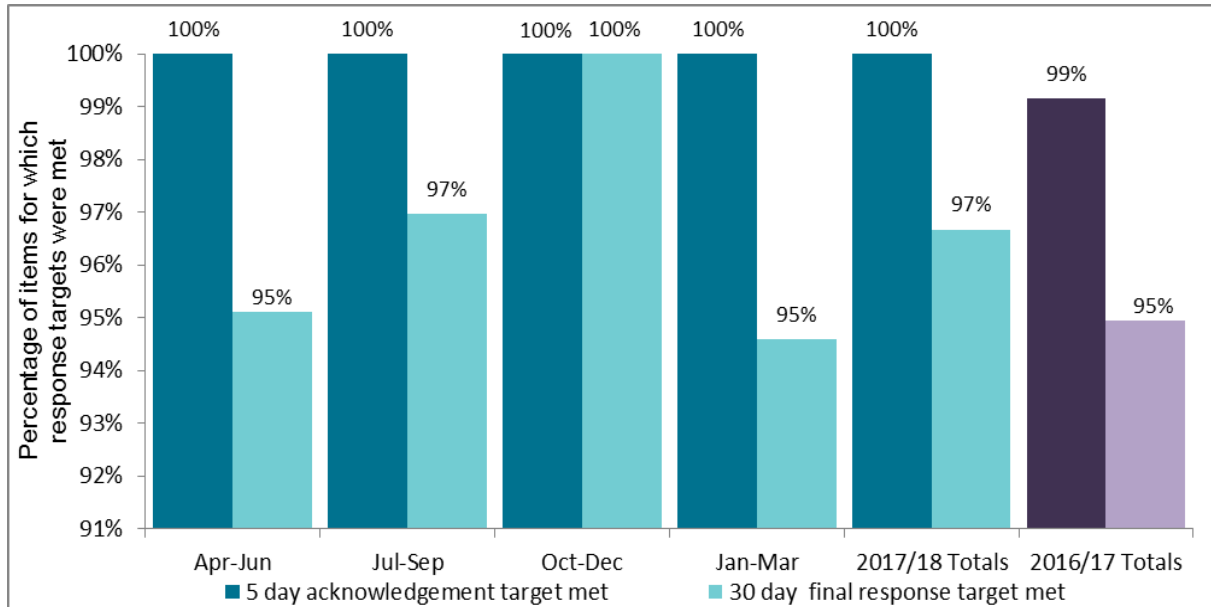
We performed well in relation to target response times

21. We have two key performance targets relating to response times for concerns. We aim to acknowledge receipt of concerns within five working days and to provide a final response within 30 working days. During 2017/18 we acknowledged all concerns within five working days and 97 per cent received a final response within 30 working days. [Exhibit 3](#) shows our 2017/18 performance per quarter for both targets. [Exhibit 4](#) shows that we have continued to improve our performance since 2014/15.

Exhibit 3

Performance in relation to target response times, per quarter for 2017/18 and overall performance for 2016/17 and 2017/18

We acknowledged all the concerns within the target five working days, and 97 per cent received a final response within our 30 working days target.

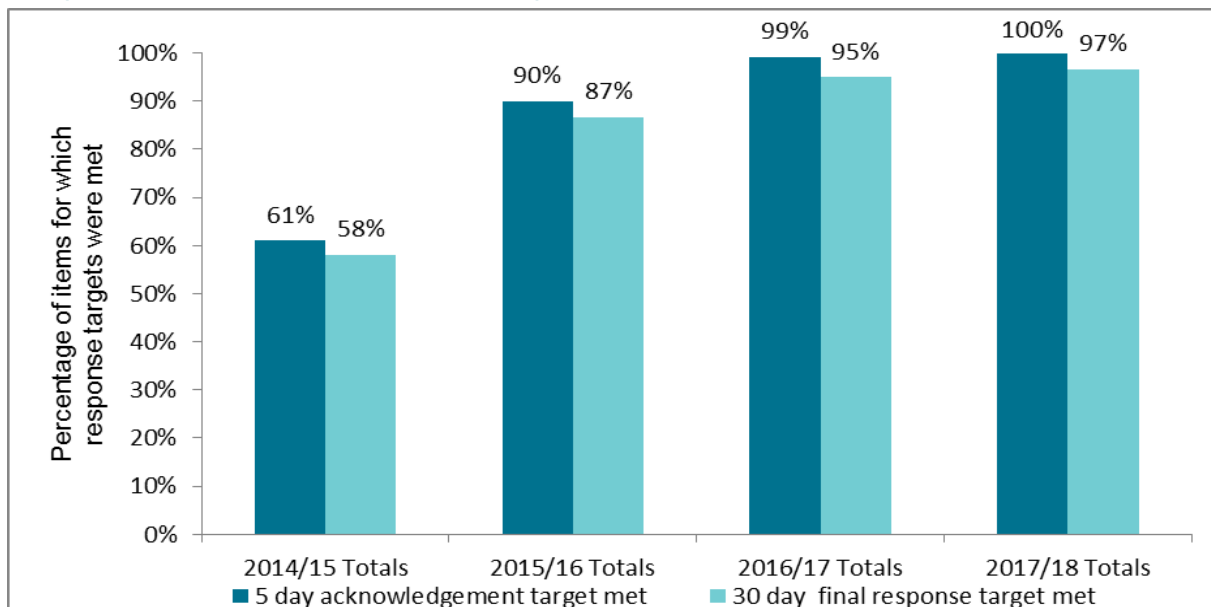


Source: Audit Scotland

Exhibit 4

Performance in relation to target response times, 2014/15 to 2017/18

Our performance shows considerable improvement since 2014/15.



Source: Audit Scotland

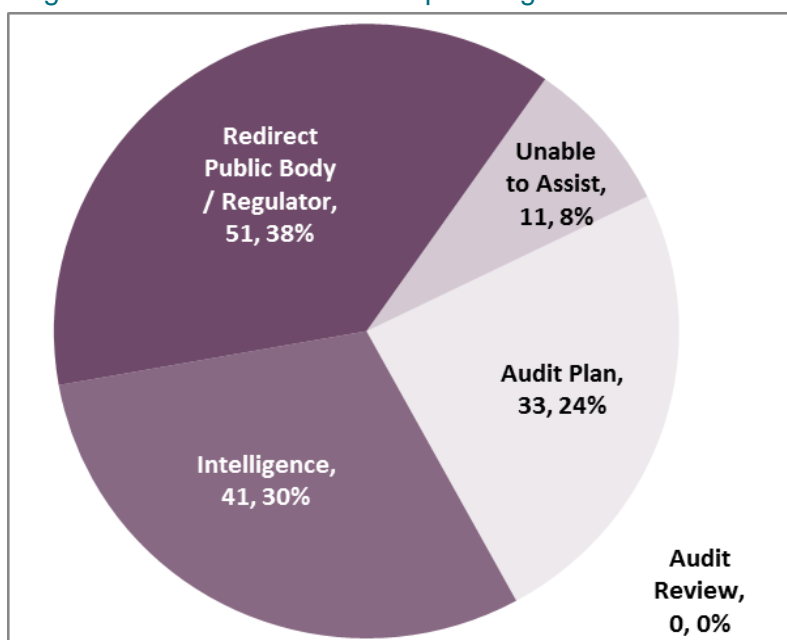
We use correspondence to inform our audit work

22. [Our flow chart](#) provides correspondents with detail about the five potential outcomes and what correspondents can expect when they contact us. [Exhibit 5](#) shows how we handled the concerns we received in 2017/18. Over half of the concerns were used by auditors, either as intelligence about the audited body, or to inform the annual audit process. 38 per cent of concerns were for the audited body itself to handle. For example, where the concern was about a particular service such as street lighting, we directed the correspondent to the relevant body. Where appropriate, we also referred the correspondent to another regulator such as Scottish Housing regulator (SHR) or Scottish Public Services Ombudsman (SPSO).

Exhibit 5

Concern outcomes for 2017/18

We consider a large volume of concerns when planning what audit work to perform.



Source: Audit Scotland

Cost of administrating and responding to all correspondence

23. The cost for 2017/18 was approx. £161,000. This includes time spent by our dedicated correspondence team, training and the cost of auditors' input. The overall cost is likely to be higher, as auditors who consider concerns, may record their time as part of the annual audit.

We continue to make improvements to our correspondence work

24. Areas we have been working on in 2017/18 include:
- More internal and external engagement with the audit teams. This has improved consistency in how we deal with concerns across the organisation and with the appointed firms. We have also provided audit teams with helpful information and case studies that inform their audit work.

- Continuing to learn from, and use the information available from the SPSO. Information on the complaints that people raise with the SPSO has helped us to enhance our knowledge of the public bodies we audit. We have used the SPSO information in different ways, for example to build a risk profile of the public bodies we audit and identify key themes across the public sector.
 - Promoting how correspondence is managed; the service standards and outcomes correspondents can expect when they raise concerns and why Audit Scotland would or would not consider a particular concern.
 - Making better use of the management information available from our correspondence database. This has enabled us to identify more easily audit risks and audit themes. We have also mapped the concerns to the four [audit dimensions](#). All of this intelligence helps to inform our current audit work and plan future work. We have provided useful information for the six monthly intelligence reports on local government to the Accounts Commission and the Controller of Audit's annual report.
 - Training and development has also continued. We provided training to Business Support Services to increase knowledge of the correspondence function and improve reception staff awareness about how to appropriately redirected telephone calls.
 - Redesigning the 'contact us' area within the Audit Scotland website. This now provides a clear statement about our role and remit in relation to the different types of correspondence we deal with. We included a new leaflet to provide the public with additional information on what types of concerns we can consider. Feedback from the forms that we launched in 2016 remains mostly positive about our correspondence service. We will continue to use this to identify ways we can improve our website.
 - We welcome feedback to help improve our correspondence service so in January 2016, we launched feedback forms for our website and final responses.
 - Reviewing our reopened cases and complaints to learn more about why the correspondent asked additional questions on the concern they had previously raised. We implemented some improvements to our processes following this review. For example, being clearer in our response about how we deal with correspondence that contains both a concern and a complaint.
25. We plan to make further improvements to the way we deal with correspondence during 2018/19. These include:
- developing further contacts with other bodies to share intelligence. For example, we plan to engage with other public sector regulators such as Scottish Housing Regulator. This will improve our knowledge of the bodies we audit.
 - developing briefings for our website which cover common issues correspondents write to us about, for example community engagement, issues around common good, fraud and corporate governance arrangements.
 - delivering specialised training about data protection issues arising from of the new General Data Protection Regulation (GDPR)

- reviewing the correspondence function review to reflect changes arising from GDPR
- incorporating into our Quality Assurance Framework, a quality review process for work that audit teams do on concerns
- documenting our procedures for recording, filing and destruction of casework.

Archwilydd Cyffredinol Cymru
Auditor General for Wales

ANNUAL REPORT AND ACCOUNTS

2017-18



WALES AUDIT OFFICE
SWYDDFA ARCHWILIO CYMRU

Supporting effective scrutiny and accountability

The Auditor General's report on disclosures of information

The Auditor General is a 'prescribed person' for making whistleblowing disclosures about the proper conduct of public business and fraud, value for money, and corruption in relation to the provision of public services. The Prescribed Persons (Reports on Disclosures of Information) Regulations 2017 require the Auditor General to publish a report for each financial year setting out:

- a the number of disclosures made to the Auditor General in that year that he believes to be qualifying disclosures⁶⁵;
- b the number of qualifying disclosures where the Auditor General has decided to take action;
- c a summary of the types of action that the Auditor General has taken; and
- d a summary of how the information disclosed has affected the Auditor General's ability to perform his functions.

The Auditor General's main functions are summarised in our [Annual Plan](#) for each year and are described in more detail in our [Guide to Welsh public audit legislation](#).

In 2017-18, 31 individuals wrote to or telephoned the Auditor General or the Wales Audit Office indicating that they wished to make a whistleblowing disclosure. However, in only 11 cases did the Auditor General have a reasonable basis to believe that the disclosure qualified and was within the matters in respect of which he is prescribed. This was because individuals either did not give details of their employment situation, or it was clear that they were not employees or other qualifying workers.

Of the 11 apparently qualifying disclosures, in eight cases the relevant audit team reviewed the matters raised, but they were not found to amount to substantive matters on which the Auditor General would need to report or take other action. In the other three cases, after initial consideration by audit staff, significant further review work has been undertaken or is pending, and in one of these cases, the Auditor General is undertaking an authority-wide review of whistleblowing arrangements. One or more of the three cases may result in a published report.

Generally, where the Auditor General has received information that has been relevant to his functions, this has helped to inform his work, and in three cases, the information has enabled the Auditor General to identify issues meriting significant examination.

⁶⁵ Disclosures that meet the criteria set out in section 43B of the Employment Rights Act 1996 and which engage the protection from detriment provided by that Act.



BANK OF ENGLAND

September 2018
The Prescribed Persons (Reports on Disclosures
of Information) Regulations 2017
Annual Report
1 April 2017–31 March 2018

Bank of England | Prudential Regulation Authority

The Prescribed Persons (Reports on Disclosures of Information) Regulations 2017

Annual Report 1 April 2017 – 31 March 2018

The Bank of England ('the Bank') and Prudential Regulation Authority ('PRA') are both Prescribed Persons as defined by Parliament under The Public Interest Disclosure (Prescribed Persons) Order 2014.

Since April 2017, all 'Prescribed Persons' are required to report in writing annually on workers (whistleblowing) disclosures they have received. The report must be published within 6 months of the end of the reporting period.

The report must contain, without including any information in the report that would identify a worker who has made a disclosure of information, or an employer or other person in respect of whom a disclosure of information has been made—

- (a) the number of workers' disclosures received during the reporting period that the relevant prescribed person reasonably believes are—
 - (i) qualifying disclosures within the meaning of section 43B of the Employment Rights Act 1996; and
 - (ii) which fall within the matters in respect of which that person is so prescribed;
- (b) the number of those disclosures in relation to which the relevant prescribed person decided during the reporting period to take further action;
- (c) a summary of—
 - (i) the action that the relevant prescribed person has taken during the reporting period in respect of the workers' disclosures; and
 - (ii) how workers' disclosures have impacted on the relevant prescribed person's ability to perform its functions and meet its objectives during the reporting period;
- (d) an explanation of the functions and objectives of the relevant prescribed person.

In the period 1 April 2017 to 31 March 2018 inclusive

(a)(i)	We received a total of 141 disclosures that have been subject to assessment against the Public Interest Disclosure Act 1998 (hereafter 'PIDA') and discrete statutory requirements of the Bank, and the PRA.
(a)(ii)	<p>We reasonably believed that 116 disclosures were qualifying disclosures within section 43B of the Employment Rights Act 1996 and that fell within the matters in which the Bank and PRA are Prescribed Persons. We considered that the remaining 25 disclosures were not qualifying disclosures because:</p> <ul style="list-style-type: none"> • 6 related to firms that were regulated solely by the Financial Conduct Authority (FCA); • 7 were related to employment issue disputes (and no public interest); and • 12 were undetermined due to the poor quality of information provided and/or inability to engage further with the worker.
(b)	We decided to take further action on the 116 disclosures that we reasonably believed to be qualifying disclosures.
(c) (i)	<p>All 116 disclosures were subject of supervisory consideration, from which:</p> <ul style="list-style-type: none"> • 7 cases, (including 3 cases considered by the PRA originating from the FCA) were referred to the Bank Enforcement Litigation Division ; • 28 cases were referred to the FCA; and • 1 case was referred to the National Crime Agency.
(c) (ii)	<p>Of the 116 qualifying disclosures subject of supervisory consideration:</p> <ul style="list-style-type: none"> • Nil - Disclosure directly contributed to enforcement activity or other intervention; • 15 disclosures were of significant value and contributed to the discharge of regulatory activity; • 30 disclosures were, or may be in the future, of value but not immediately actionable and/or did not meet current regulatory risk thresholds; and • 71 disclosures were of little value and unlikely to assist in the discharge of regulatory or supervisory activity.

(d)	<p>An explanation of the functions and objectives</p> <p>The Bank of England</p> <p>The Bank of England's mission is to promote the good of the people of the United Kingdom by maintaining monetary and financial stability. The Bank of England is a prescribed person for -</p> <ul style="list-style-type: none"> • the functioning of clearing houses (including central-counterparties) • payment systems and securities settlement systems • the treatment, holding and issuing of banknotes by the Scottish and Northern Ireland banks authorised to issue banknotes (and their agents) • the custody, distribution and processing of Bank of England banknotes under the Bank of England's Note Circulation Scheme <p>Bank of England (IAWB) 20 Moorgate London EC2R 6DA</p> <p>Tel: 020 3461 8703 Email: BOEwhistleblowing@bankofengland.co.uk</p> <p>The Prudential Regulation Authority</p> <p>The Bank of England Prudential Regulation Authority (PRA) regulates and supervises around 1,500 banks, building societies, credit unions, insurers and major investment firms.</p> <p>The PRA has the general objective to promote the safety and soundness of the firms it regulates. It has a secondary objective to facilitate effective competition between firms.</p> <p>In relation to insurers, it has an additional objective, to contribute to securing an appropriate degree of protection for insurance policyholders.</p> <p>The PRA is a prescribed person for matters relating to the carrying on of deposit-taking business, insurance business, or investment business and the safety and soundness of persons authorised for such purposes.</p> <p>Prudential Regulation Authority (IAWB) 20 Moorgate London EC2R 6DA</p> <p>Tel: 020 3461 8703 Email: PRAwhistleblowing@bankofengland.co.uk</p>
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Useful links

[Employment Rights Act 1996](https://www.legislation.gov.uk/ukpga/1996/18/contents): <https://www.legislation.gov.uk/ukpga/1996/18/contents>

[Public Interest Disclosure Act 1998](https://www.legislation.gov.uk/ukpga/1998/23/contents): <https://www.legislation.gov.uk/ukpga/1998/23/contents>

[The Prescribed Persons \(Reports on Disclosures of Information\) Regulations 2017](https://www.legislation.gov.uk/uksi/2017/507/regulation/5/made):
<https://www.legislation.gov.uk/uksi/2017/507/regulation/5/made>

[Whistleblowing: list of prescribed people and bodies](https://www.gov.uk/government/publications/blowing-the-whistle-list-of-prescribed-people-and-bodies--2/whistleblowing-list-of-prescribed-people-and-bodies):

<https://www.gov.uk/government/publications/blowing-the-whistle-list-of-prescribed-people-and-bodies--2/whistleblowing-list-of-prescribed-people-and-bodies>

[Whistleblowing Prescribed persons guidance - Annual reporting requirements](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/604935/whistleblowing-prescribed-persons-guidance.pdf):

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/604935/whistleblowing-prescribed-persons-guidance.pdf

[Whistleblowing and the Bank of England](https://www.bankofengland.co.uk/prudential-regulation/whistleblowing-and-the-pra): <https://www.bankofengland.co.uk/prudential-regulation/whistleblowing-and-the-pra>

PRA Supervisory Statement 28/15: [‘Strengthening individual accountability in banking’](https://www.bankofengland.co.uk/prudential-regulation/publication/2015/strengthening-individual-accountability-in-banking-ss), July 2018: <https://www.bankofengland.co.uk/prudential-regulation/publication/2015/strengthening-individual-accountability-in-banking-ss>

PRA Supervisory Statement 35/15: [‘Strengthening individual accountability in insurance’](https://www.bankofengland.co.uk/prudential-regulation/publication/2015/strengthening-individual-accountability-in-insurance-ss)
<https://www.bankofengland.co.uk/prudential-regulation/publication/2015/strengthening-individual-accountability-in-insurance-ss>

PRA Supervisory Statement 39/15: [‘Whistleblowing in deposit-takers, PRA-designated investment firms and insurers’](https://www.bankofengland.co.uk/prudential-regulation/publication/2015/whistleblowing-in-deposit-takers-pra-designated-investment-firms-and-insurers-ss), July 2018: <https://www.bankofengland.co.uk/prudential-regulation/publication/2015/whistleblowing-in-deposit-takers-pra-designated-investment-firms-and-insurers-ss>

[Whistleblowing and the FCA](https://www.fca.org.uk/firms/whistleblowing): <https://www.fca.org.uk/firms/whistleblowing>

Care Inspectorate

Care Inspectorate has confirmed to BEIS that it has no disclosures to report for 2017-18.



Annual report and accounts 2017/18

Responding to concerns

More than half of the concerns received by our National Customer Service Centre (NCSC) related to complaints about providers, and around a third related to safeguarding concerns. The remainder comprised safeguarding alerts, whistleblowing enquiries, and unregistered providers information (see chapter 2).

Safeguarding

Safeguarding alerts are the most serious and urgent types of safeguarding information that we receive. We referred 96% (474) of safeguarding alerts to a local authority within one day and exceeded our target of 95%. This compares with 98% (589) in 2016/17. Of all the alerts and concerns received, we took 90% (96,091) of one of four mandatory actions within five days against our target of 95%. This compares with 85% (80,469) taken within five days in 2016/17.

Whistleblowing

It is very important that staff who work in health and social care feel able to speak up about anything they think is impeding their ability to do their job. The National Guardian's Office (NGO) was set up to lead a culture change to make speaking up business as usual in the NHS (see Accountability report, page 78). The NGO's broad remit is to:

- lead and develop a growing network of Freedom to Speak Up Guardians across NHS secondary care, to support staff to speak up
- review cases where there is evidence that trusts have not supported their staff to speak up in accordance with good practice, making recommendations as to how this can be improved and promoting good practice
- challenge the system to replicate and role model good speaking up practice for those organisations they oversee.

We have our own Freedom to Speak Up Guardian to support CQC staff. In 2017/18, more than 90 staff became Speak Up Ambassadors and a training programme is underway. The Ambassadors support colleagues to speak up about issues and work together in line with CQC's values. In March 2018, the NGO's national Freedom to Speak Up conference brought together more than 350 Guardians from across NHS organisations to listen, learn and network.

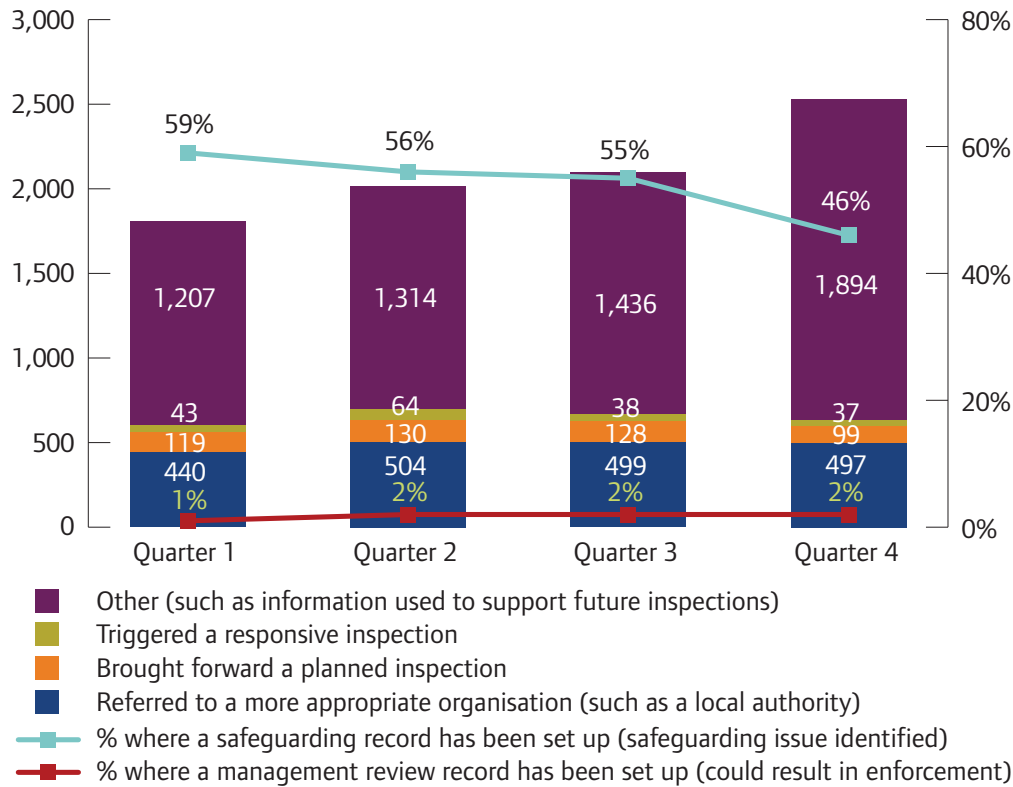
CQC received 8,449 whistleblowing enquiries in 2017/18. This was an increase from 2016/17 when we received 7,433 enquiries, and enquiries increased across each quarter of the year. The total was lower than the number of enquiries we received in 2015/16 and 2014/15.

When we receive a whistleblowing enquiry we consider the information carefully and prioritise which action to take according to the level of risk (figure 2). The most serious enquiries, for example where there is a risk of harm to an individual, will immediately trigger a safeguarding process that may include a referral to the local

authority. Other actions include bringing forward planned inspections, conducting responsive inspections, and using the information to support future inspections.

Regardless of the level of risk, all whistleblowing enquiries are important to help us build a picture of a provider and to make informed judgements about the quality of care.

Figure 2: Whistleblowing outcomes 2017/18



Complaints under the Mental Health Act (MHA)

We review all complaints about the way providers exercise their powers and duties under the Mental Health Act (MHA). In 2017/18 we received 1,341 complaints about the way the MHA was applied to patients. Including enquiries and follow-ups, there were 6,793 total contacts. We will report further on these in our annual *Monitoring the Mental Health Act* report.

Customer service

Our customer service centre underwent a period of change during the early part of the year with the aim of becoming more efficient and effective. We centralised and streamlined our systems and processes, and we invested in new telephone equipment that supports real-time reporting and immediate customer feedback after calls. The modernisation work, combined with staff training, means we are now better placed to track our performance and be more flexible to call demands and busy periods. We are now in a strong position to begin to see the benefits and positive effects on customer service and responsiveness in 2018/19.

Annual Report of the Certification Officer

2017-2018



of the General Secretary election in 2017. We are grateful for the support given by Ms Stacey and Mr Burke during their appointments.

Protected Disclosures and the Certification Officer

The Certification Officer is a designated a 'prescribed person' under the Public Interest Disclosure Regulations 2014 in relation to relevant disclosures by employees/workers of trade unions and employers' associations. Under Part IVA of the Employment Rights Act 1996 and the 2014 Regulations, employees or workers of a trade union or employers' association may be protected if they make a relevant disclosure to me. A relevant disclosure to the Certification Officer is defined in the 2014 Regulations as being one related to fraud, and other irregularities relating to the financial affairs of trade unions and employers' associations.

During this reporting period I received no relevant disclosures.

Advice and contacts for information

My team receives many enquiries and requests for guidance from trade unions, employers' associations and their members. Often we can help but there are constraints on the advice that can be given. It may, for instance, be inappropriate for us to give guidance on, or prior approval to, a specific course of action in areas where complaints can be made to me by an individual member. It would also be inappropriate for us to comment on the merits of a possible complaint. That said my team is, of course, happy to assist where we can and guidance covering different aspects of my responsibilities is available on our website www.gov.uk/certificationofficer. Our guidance is listed in Appendix 11; requests for further information on any aspect of my duties should be made to the Certification Office, Lower Ground, Fleetbank House, 2-6 Salisbury Square, London EC4Y 8JX, tel: 0330 109 3602, e-mail: info@certoffice.org.

Finally, I am very grateful for the support which has been given to me by my team since my appointment was announced. They are a strong team who are keen to deliver a good service to those we work with.

1. Home (<https://www.gov.uk/>)
2. Whistleblowing disclosures made to the Charity Commission for England and Wales 2017-2018 (<https://www.gov.uk/government/publications/whistleblowing-disclosures-made-to-the-charity-commission-for-england-and-wales-2017-2018>)



**CHARITY COMMISSION
FOR ENGLAND AND WALES**

1. (<https://www.gov.uk/government/organisations/charity-commission>)

Transparency data

Whistleblowing disclosures made to the Charity Commission for England and Wales 2017-2018

Published 28 September 2018

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1. The statutory framework
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7. Our plans for improvement



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This publication is available at <https://www.gov.uk/government/publications/whistleblowing-disclosures-made-to-the-charity-commission-for-england-and-wales-2017-2018/whistleblowing-disclosures-made-to-the-charity-commission-for-england-and-wales-2017-2018>

This report is about the disclosures made to us as a prescribed person, what we did with the information in the disclosures and how they contributed to the impact of our regulatory work.

It also explains the plans we have to improve the services we provide for whistleblowers in 2018-2019.

1. The statutory framework

The Charity Commission is a 'prescribed person' under the Public Interest Disclosure Act 1998 (PIDA), which provides the statutory framework for employment protections for charity workers who make a qualifying disclosure (or 'blow the whistle') to us about suspected wrongdoing, including crimes and regulatory breaches by their employer.

2. Our functions, objectives and powers

The Charity Commission is the registrar and regulator of charities in England and Wales. Parliament has given us 5 statutory objectives which are to:

1. increase public trust and confidence in charities
2. promote awareness and understanding of the operation of the public benefit requirement
3. promote compliance by charity trustees with their legal obligations in exercising control and management of their charities
4. promote the effective use of charitable resources
5. enhance the accountability of charities to donors, beneficiaries and the general public

Our general functions include:

- determining whether or not institutions are charities
- encouraging and facilitating the better administration of charities
- identifying and investigating apparent misconduct or mismanagement in the administration of charities and taking remedial or protective action in connection with such misconduct or mismanagement

The full list of our general functions is set out in section 15 of the Charities Act 2011

(<https://www.legislation.gov.uk/ukpga/2011/25/section/15>).

We also have a range of statutory powers which include:

- information gathering powers, which enable us to obtain information or documents, or require named individuals to meet us and answer questions
- temporary protective powers, which allow us to protect charity property for a temporary period while we continue investigating
- remedial powers which allow us to implement long-term solutions to problems often identified by an inquiry

The Charities (Protection and Social Investment) Act 2016

(<http://www.legislation.gov.uk/ukpga/2016/4/contents/enacted>) introduced a number of new powers to enable us to address and remedy abuse within charities. Examples include powers to disqualify individuals from trusteeship, issue official warnings and to direct trustees to take or not take specific actions.

3. Our approach to whistleblowing disclosures

Our aim is to make it straightforward for charity workers to bring concerns covered in PIDA to our attention. It is important that they feel able to speak up about a serious wrongdoing they have identified.

We understand how difficult it may have been for them to bring a matter to our attention, and its importance to them. We recognise the value of this information, as workers will have a unique insight into how a charity is operating on a day to day basis.

These disclosures provide us with information that will help us fulfil our regulatory duties.

4. Assessment and case handling

Our regulatory approach is set out in our Regulatory and Risk Framework (<https://www.gov.uk/government/publications/risk-framework-charity-commission/regulatory-and-risk-framework>).

This helps ensure that the Commission's regulatory engagement with charities is proportionate, accountable, consistent, transparent and targeted as required by the Charities Act 2011.

While the framework is written for the wider public, it may also be useful for charity workers when considering making whistleblowing disclosures to the Commission.

When we receive a whistleblowing disclosure we consider the information and prioritise which action to take according to the nature and level of risk. Our initial assessment will depend on what we are told and the severity of the matter.

5. Whistleblowing facts and figures 2017-2018

We received 101 whistleblowing reports from charity workers in 2017-2018, and 88 reports in 2016-2017.

All received an initial assessment and of these:

- 82 reports were identified as potentially needing some regulatory action
- 19 were considered as low risk
- 51 cases have been closed

When we complete a case we record what we have done by allocating outcome or impact codes that indicate the action we have taken. But more than one outcome or impact code can be used for each case.

From the 51 cases we have closed:

- 39 indicate some form of regulatory activity or advice, for example providing general guidance or verifying that trustees are acting correctly
- 15 indicate a higher level of regulatory activity, for example providing corrective advice for trustees to act upon

The codes recorded fell into the following broad categories and showed:

Action we took	Number of cases
Advice for trustees	27
Decided there was no issue to take forward or established that the trustees were dealing with it	21
Corrective advice provided	2

Action we took	Number of cases
Signposting or waiting for action from other body	5

Charity Commission actions led to the following	Number of cases
Trustees are aware of their duties	32
Reassurance received that trustees are dealing with or have resolved issues	14
Actions led to improvements in areas of charity's work	17
Concerns looked into and not substantiated	9
The charity's beneficiaries, reputation and/or public trust was protected	7

5.1 Charity type

The nature of the charities that we received reports about varied. Each charity has particular classification codes to show what its primary purposes are.

Table shows the charity classifications that we received the most reports about.

Change between chart and table

Charity type	Percentage
Disability	16%
Education/Training	12%
Advancement of health/saving lives	10%

5.2 Nature of issues raised

Table shows the number of reports received over the last 4 financial years.

Change between chart and table

category	2014-15	2015-16	2016-17	2017-18	total
governance	33	63	57	60	213
safeguarding issues	8	10	15	24	57
fraud/money laundering	3	0	11	8	22

category	2014-15	2015-16	2016-17	2017-18	total
theft	2	5	1	5	13
other	2	4	1	2	9
criminality	1	3	0	0	4
sham charity	1	2	1	1	5
terrorism	0	0	1	1	2
blank	0	0	1	0	1

When opening a case we record the nature of the issue that is raised with us. The most reported issue categories were governance issues, safeguarding, fraud and money laundering.

Table shows the nature of whistleblowing reports by employees that were reported to us in 2017-2018 (total 101 reports).

Change between chart and table

Nature of whistleblowing reports 2017-2018 (employees)	Number
Governance issues	60
Safeguarding	24
Fraud or money laundering	8
Theft	5
Other - including other types of criminality	2
Charity set up for criminal purposes	1
Links to terrorism	1

Governance issues cover a wide range of situations which can have a damaging effect on the management and administration of a charity. They can include breaches of a charity's trusts or laws, lack of financial controls or unauthorised trustee benefits.

6. The impact on our work

The reports we have received from whistleblowers this year have helped us to:

- initiate investigatory activity
- take action to protect charities beneficiaries, assets, work and reputations and, more widely, public trust and confidence in charities and the charitable sector
- identify other governance issues not raised by the report and ensure these are addressed

- ensure charities are complying with their safeguarding duties
- use our statutory powers to put charities back on track, including giving regulatory advice to trustees to make them aware of their duties and responsibilities, and ensure they make significant and necessary improvements to their charity's governance

Whistleblowing disclosures help us detect and prevent concerns within the sector and take steps to put these right. They help create more effective and efficient charities and more generally assist in raising the public's trust and confidence in charities and the charitable sector.

7. Our plans for improvement

We have taken account of feedback and, as a result, we have reviewed our guidance and processes and committed to several improvements.

7.1 Improved guidance

There will be new guidance for potential whistleblowers which will support a more streamlined process for making a disclosure to us.

This will make it easier for them to bring their concerns to our attention. It will also provide clearer explanations about when to approach us and what information we require.

7.2 Enhanced assessment, case handling and reporting

We will put improved processes in place for our handling of whistleblowers and their disclosures both during our initial assessment of reports and at the conclusion of any cases that we subsequently open.

We will also improve our approach to recording whistleblowing disclosures to provide us with better analytics. This will help us provide more detail to the public about the disclosures we receive and will also inform further developments to our approach to handling them.

7.3 More training

Working with a specialist organisation, we will arrange training for our staff to improve how we recognise disclosures and handle whistleblowers.

7.4 A whistleblowing helpline

Again, by working with a specialist organisation we will pilot a helpline which will provide an extra service to advise potential whistleblowers.

Chief Executive of the Criminal Cases Review Commission

The Criminal Cases Review Commission has confirmed to BEIS that it has no disclosures to report for 2017-18.

Chief Executive of the Scottish Criminal Cases Review Commission

Chief Executive of the Scottish Criminal Cases Review Commission has confirmed to BEIS that it has no disclosures to report for 2017-18.

Whistleblowing Disclosures

From 1 April 2017 to 31 March 2018

The Children's Commissioner is named in the Prescribed Persons Order 2014 as someone to whom whistle-blowers can raise concerns relating to the rights, welfare and interests of children.

The Children's Commissioner's role as a prescribed person is to provide those working with children with a mechanism to make their public interest disclosure to an independent body. The Children's Commissioner is not a regulatory body and does not have enforcement powers, but will consider concerns, ensure they are passed to the responsible bodies and will seek reassurance that the correct processes have been followed.

Service the disclosure relates to	Number of Disclosures Received
Children's Homes	3
Local Authority Children's Services	8
A third party provider to which a local authority has delegated function	2
Residential School trips	1
Police	1
Schools	3
Other	1

Action taken in the reporting period	Number of Disclosures Received
All concerns were sent to the appropriate bodies including the local authority, police and Ofsted	15
Not taken forward: closed through lack of engagement/ information with the whistle-blower	4

Summary of the overall categories under which the whistleblowing disclosure were classified	Number of Disclosures Received
Concerns that a specific child or children may be at risk of harm	1
Concerns that there are wider or systematic failures in the safeguarding practice/Heath & safety	17
Data protection	1

OCC receives whistleblowing disclosures in letters, emails and via our helpline. Sometimes, the information is provided anonymously

Policy and guidance for whistleblowers:

[Whistleblowing to the Children's Commissioner about the rights, welfare and interests of children in England](#)

Children's Commissioner for Wales

Whistleblowing Disclosures

Annual Report 2017 — 2018

This report has been completed in line with the legal requirements of "The Prescribed Persons (Reports on Disclosures of Information) Regulations 2017".

These regulations set out the reporting requirements for organisations and individuals who are Prescribed Persons for Whistleblowing. Prescribed persons are people and bodies you can blow the whistle to rather than your employer.

The Children's Commissioner for Wales is a prescribed person for Whistleblowing in relation to children's interests and can be contacted about matters relating to the rights, welfare and issues affecting children, young people and those who care for them, in Wales.

The following report provides information in respect of Whistleblowing as outlined in the Department for Business, Energy and Industrial strategy "Whistleblowing — Prescribed Persons Guidance 2017".

1. Statistics

Number of qualifying disclosures of information made by workers during the twelve month period 1.4.17 — 31.3.18	1
The number of qualifying disclosures where the Children's Commissioner for Wales decided to take further action	0

2. Summary of the type of action taken by the prescribed person in respect of qualifying person in respect of qualifying disclosures of information.

Advice was provided to the Whistleblower about the role of the Children's Commissioner for Wales as a prescribed whistleblowing organisation.

The Whistleblower had instigated local authority whistleblowing policy and the matters raised by the Whistleblower were being investigated by the local authority. While there was already an ongoing investigation into the issues raised by the Whistleblower it was not appropriate for the Children's Commissioner to undertake any further action.

The Whistleblower was offered ongoing support should they be dissatisfied with the investigation being undertaken by the local authority. To date this has not been taken up.

3. Summary of how the information disclosed has impacted on the Children's Commissioner for Wales' ability to perform its functions and meet its objectives.

There has been no impact as no action was taken in relation to the information disclosed.

4. Explanation of the Children's Commissioner for Wales, functions objectives and statutory powers

The Children's Commissioner for Wales (the "Commissioner") is an office established pursuant to the Children's Commissioner for Wales Act 2001 which amended the Care Standards Act 2000 ("2000 Act"). The Commissioner's powers and functions are derived from the 2000 Act.

Further powers are granted to the Commissioner pursuant to The Children's Commissioner for Wales Regulations 2001 ("**2001 Regulations**"). In essence, these regulations expand on the powers and functions granted to the Commissioner under the 2000 Act.

The principal aim of the Commissioner is to safeguard and promote the rights and welfare of **children**.

The Commissioner's main statutory powers can be divided into two headings:

- Powers to review the activities of certain public bodies; and
- Powers to assist individual **children**.

Powers to Review

The Commissioner has the power to:

- review the functions or exercise of functions of various public bodies including the Welsh Government; and
- review and monitor the arrangements which certain public bodies have in place to safeguard and promote the rights of **children** in respect of:
 - dealing with complaints or representations;
 - ensuring that proper action is taken in response to **whistle blowing**;
 - representing the views and wishes of **children**;
 - providing **children** with **advice and support**.

Powers to Assist

In relation to individual **children**, the Commissioner has the power to:

- examine individual cases in certain circumstances; and
- provide assistance to a **child** in:
 - making a complaint or representation in relation to the services the **child** receives; or
 - certain **proceedings** (there are restrictions in relation to **legal proceedings**).

i (Information)

Close

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Advice to the aviation industry on a no agreement EU exit

Information from the CAA [read more \(https://info.caa.co.uk/euexit/\)](https://info.caa.co.uk/euexit/)

CAA whistleblowing policy

CAA whistleblowing policy.

Who can make a report under the CAA's whistleblowing policy?

Anyone can make a report, but please read the information below first as not all complaints or reports will be handled under this process e.g. a personal grievance or complaint that does not have the potential to cause harm to the general public.

The CAA is a "prescribed person" under the Public Interest Disclosure Act 1998 for the purpose of receiving "protected disclosures" (whistleblowing) from the civil aviation industry.

We are directly responsible for investigating any information of this nature that is received. A "worker" (which definition includes employees, independent contractors, agency workers and trainees) may make a complaint to the Employment Tribunal if he or she suffers a detriment as a result of making a "protected disclosure". An employee will be regarded as having been unfairly dismissed if the reason or principal reason for their dismissal is the making of a protected disclosure.

On occasion the CAA will receive allegations/complaints that may not be classed as whistleblowing and as such, the protection to the source is not that afforded to whistleblowers.

- [Safety concern reports from the public \(/Our-work/Make-a-report-or-complaint/Report-a-safety-concern/\)](#)

The CAA will endeavour to respect the confidentiality of a whistleblower unless agreed otherwise with them and will process any information relating to individuals in accordance with the Data Protection Act 1998 and our [General Privacy Notice \(/Our-work/About-us/General-privacy-notice/\)](#).

The CAA will investigate all complaints in an appropriate manner, but in order to achieve this, the contact details for the whistleblower will be required.

Making a report

If you make a report you will:

- receive a response to your complaint/allegation
- be kept informed of progress with the complaint(s) if requested.

Whether the investigation is ongoing or has been concluded can be confirmed but in most cases it is not appropriate to provide specific details of the investigation.

Reports by aviation industry employees or ex-employees

Before making a report to the CAA you should:

- contact the organisation concerned
and
- follow the organisation's internal complaints procedure.

This action will not prevent the CAA from exercising its regulatory responsibilities by investigating any report received.

Employees and contracted personnel may report to the CAA via this whistleblowing process alleged infringements of the [Occurrence Reporting Regulation 376/2014](https://www.easa.europa.eu/document-library/regulations/regulation-eu-no-3762014) (<https://www.easa.europa.eu/document-library/regulations/regulation-eu-no-3762014>) as prescribed by Article 16(12) of that Regulation.

Reports made by the public

Before submitting a report under this process, please read our [guidance on reporting a public safety concern \(/Our-work/Make-a-report-or-complaint/Report-a-safety-concern/\)](#).

Supporting information

Copies of evidence or photographs can be accepted for the purposes of the investigation on the understanding that they will later be either destroyed (to protect confidentiality) or returned to the organisation concerned.

The reporting process

We recommend that whistleblowing reports include contact by phone or face to face meetings.

While it may be possible to progress a whistleblowing complaint without speaking with the whistleblower, this can result in wasted or duplicate effort in order to fully uncover the detailed facts.

Where possible, interviews with whistleblowers should take place on CAA premises with another CAA member of staff present as a witness. It can be very difficult to verify allegations without adequate detailed information. Reports should provide as much detailed evidence as possible, either hard copy or by email, not just verbal allegations.

In some cases of whistleblowing the CAA will not be the responsible authority. The CAA will help the whistleblower in identifying the correct authority. Other responsible authorities could be the US Federal Aviation Administration, European Aviation Safety Agency, Ministry of Defence or other National Aviation Authorities.

How to contact us

The preferred method of reporting to the CAA is by email using the [Whistleblowing report form](#) (<http://publicapps.caa.co.uk/modalapplication.aspx?catid=33&pagetype=65&appid=43>).

If this is not possible, reports can be made by calling the CAA Whistleblowing Focal Point on 01293 573190.

Protect (Formally Public Concern at Work)

If you are concerned about malpractice, wrongdoing or a safety risk at work and you are unsure whether to raise this with the CAA, you may find it helpful to contact the independent whistleblowing charity Protect (formerly known as Public Concern at Work) for advice. Protect can talk to you about how best to raise your concern, while minimising any risk to you and maximising the opportunity for the problem to be addressed. You can call them on 0207 404 6609 or email [w \(mailto:whistle@protect-advice.org.uk\)](mailto:whistle@protect-advice.org.uk) histle@protect-advice.org.uk (<mailto:whistle@protect-advice.org.uk>) (<mailto:whistle@protect-advice.org.uk>).

You can find out more about whistleblowing from the [Protect](https://protect-advice.org.uk/) (<https://protect-advice.org.uk/>) (<http://www.pcaw.co.uk>) website.

About Protect

Protect is the independent authority on public interest whistleblowing. Established as a charity in 1993 as 'Public Concern at Work' following a series of scandals and disasters, Protect has played a leading role in putting whistleblowing on the governance agenda and in developing legislation in the UK and abroad. Their work is informed by the free advice offered to people with whistleblowing dilemmas and the professional support provided to enlightened organisations. For more information please see www.protect-advice.org.uk (<https://protect-advice.org.uk/>).

🔍 Whistleblowing reports received annually

The CAA will investigate all disclosures of information in accordance with [our statutory duties \(/Our-work/About-us/Our-role/\)](#), where sufficient information has been provided to enable a meaningful investigation.

The disclosures identified below, where we were able to take further action, were investigated, or passed on to another appropriate authority for investigation, in accordance with our whistleblowing policy while applying our [enforcement policy \(/cap1326\)](#) as the individual case required.

Information disclosed to the CAA under the whistleblowing process can greatly assist us in performing our regulatory oversight functions. The value each disclosure provides us in achieving [our role \(/Our-work/About-us/Our-role/\)](#), is evaluated upon closure of each investigation and for the periods below was split approximately evenly between High, Medium and Low.

How reports are categorised

High

Intelligence directly contributed to CAA enforcement activity or the protection of consumers through other intervention.

Medium

Intelligence was of value to the CAA and contributed to the discharge of its functions.

Low

Intelligence was of little value and is unlikely to assist the CAA in the discharge of its functions.

	April 2016 to March 2017	April 2017 to March 2018
Total number of disclosures of information handled by the CAA under its whistleblowing process, including qualifying disclosures	202	242
The number of those disclosures of information where the CAA were able to take further action	196	238
The number of qualifying disclosures of information that were made by a worker to the CAA, where we believe the disclosure of information is a qualified disclosure within the meaning of section 43B of the Employment Rights Act 1996	82	75
The number of qualifying disclosures of information where the CAA were able to take further action	81	73

Guidance on definitions

Qualifying disclosures

To be covered by whistleblowing law, the disclosure must be a 'qualifying disclosure'. This is any disclosure of information which, in the reasonable belief of the worker making the disclosure, is made in the public interest and tends to show that one or more of the following has occurred, is occurring or is likely to occur:



- a criminal offence (this may include, for example, types of financial impropriety such as fraud);
- a breach of a legal obligation;
- a miscarriage of justice;
- danger to the health or safety of any individual;
- damage to the environment;
- or
- the deliberate covering up of wrongdoing in the above categories.

Worker

Worker includes a person who works for or who has worked for the organisation being reported within the meaning of section 43K of the Employment Rights Act 1996.

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Whistleblow

The Children and Young People's Commissioner Scotland is a  'prescribed person' under the  [Public Interest Disclosure Act 1998](#), which provides legal protections for employees who 'whistleblow'.

This means that you can contact the Commissioner if you have a genuine concern about malpractice or wrongdoing in your workplace about matters to do with promoting and safeguarding the rights of children and young people in Scotland. This is called making a disclosure.

When contacting a Prescribed Person, whistleblowers must meet certain legal criteria for their disclosure to be covered under the Act.

When a whistleblower passes on information they must reasonably believe that they are acting both in good faith and in the public interest – this means it has to affect others, not just yourself. Personal grievances and complaints are not covered by the Act.

You must also believe that your disclosure is about one of the following:

- criminal offences (this includes financial improprieties, such as fraud),
- failure to comply with duties set out in law,

- endangering someone's health and safety,
- damage to the environment, or
- covering up any of the above.

The Commissioner cannot give you legal advice, or advise you as to whether your disclosure will be protected under the Act. You should seek independent advice about whether your disclosure may be protected. You can get free advice about this from:


Protect
CAN Mezzanine
7-14 Great Dover Street
London SE1 4YR

Whistleblowing Advice Line: 020 7404 6609

UK advice email:  whistle@protect-advice.org.uk

UK advice site:  <https://www.protect-advice.org.uk/>

All organisations should have internal policies which explain how you can safely raise whistleblowing concerns. You should follow this policy before contacting the Commissioner unless you believe you may be victimised for raising your concern, that it may be covered up, or if you believe your concern was not dealt with properly through your employer's whistleblowing policy.

Any whistleblowing disclosure made to the Commissioner should be about the  **rights, interests and well-being of children in Scotland.**

We respond to whistleblowing concerns as we do to other enquiries. We will let you know if we can take any action and what that action will be. If we are unable to help, we will advise you as to someone else who may be able to assist you.


days and to provide an initial response within five working days.

The Advice and Investigations Service is confidential and you can contact us anonymously if you wish.

We will only collect or share information about you if:

- you have given us your permission
- we are worried about your or someone else's safety.

You should be aware that if the Commissioner raises your concern with an organisation, although every effort will be made to protect your identity there is a risk that the organisation may be able to guess who you are.

If you want to make a whistleblowing disclosure to the Commissioner, please contact the Advice and Investigations Team at  inbox@cypcs.org.uk or at:

Enquiries Officer
Children and Young People's Commissioner Scotland
Rosebery House
9 Haymarket Terrace
Edinburgh
EH12 5EZ
0131 346 5350.

If you need any assistance to communicate with us, please let us know and we will do our best to help.

Whistleblowing Reporting

The Commissioner is required to report on an annual basis the number of disclosures made to him under the Public Interest Disclosure Act 1998. The Commissioner's statutory function is to promote and safeguard the rights of children and young people. This is set out in the

Act 2005. The Commissioner's approach to

whistleblowing disclosures is informed by that role and by the Commissioner's statutory powers as set out in the same Act. The range of responses open to the Commissioner is the same as with any other enquiry received by the office and is subject to the same decision making process on the most appropriate course of action.

In the period 1 April 2017 to 31 March 2018 the Commissioner received one disclosure which was identified as potentially being a qualifying disclosure. The Commissioner considered the information, which was provided anonymously, but did not have sufficient information available to take any further action beyond providing general advice to the individual.



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How to whistleblow to the

Contact

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Your Email

When you contact us we will use the personal information you provide to us to allow us to respond to you.

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Commissioner for Ethical Standards
in Public Life in Scotland

Whistleblowing
2017/18

OVERVIEW

The Commissioner for Ethical Standards in Public Life in Scotland “(CESPLS)” is a 'prescribed person' under the Public Interest Disclosure Act 1998. The Act provides protection for employees who pass on information concerning wrongdoing in certain circumstances. The protection only applies where the person who makes the disclosure reasonably believes:

1. that they are acting in the public interest, which means that protection is not normally given for personal grievances; and
2. that the disclosure is about one of the following:
 - criminal offences (this includes financial improprieties, such as fraud),
 - failure to comply with duties set out in law,
 - miscarriages of justice,
 - endangering someone's health and safety,
 - damage to the environment, or
 - covering up wrongdoing in any of the above categories.

The Prescribed Persons Regulations 2017 came into force on 1 April 2017. Prescribed persons are required to report annually on whistleblowing disclosures made to them.

BACK GROUND READING / EXTERNAL SERVICES

[Public Interest Disclosure Act 1998](#)

[The Prescribed Persons \(Reports on Disclosures of Information\) Regulations 2017](#)

Reporting

During the reporting period 1 April 2017 to 31 March 2018 CESPLS received no whistleblowing disclosures. The statutory template of reporting is published below:

Category	Number of disclosures
Number of non-qualifying disclosures	0
Number of qualifying disclosures	0
Number of qualifying disclosures requiring no further action	0
Number of qualifying disclosures requiring further action	0

Investigations

No investigations carried out in this reporting period.

Actions

No actions required during this investigations period.

Improvement objectives

No improvement objectives required during this investigations period.

The Commissioner intends to incorporate the report for future years in the Annual Report which is published in October.



Bill Thomson
Commissioner for Ethical Standards in Public Life in Scotland

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Her Majesty's Revenue and Customs

HMRC receive referrals from the public through its Fraud Hotline, and separately in respect of its National Minimum Wage responsibilities. Not all of these referrals fall within the definition of Qualifying Disclosures (allegations of wrongdoing about the referrer's own employer), but all are assessed and actioned in the same way.

HMRC systematically captures the number of referrals which are relevant to the Prescribed Persons (Reports on Disclosures of Information) Regulations 2017, and will publish details in HMRC's Annual Report in due course.

COMPETITION AND MARKETS AUTHORITY

The CMA is a listed organisation included in the Prescribed Persons Order 2014, which provides the statutory framework for protecting persons from harm if they report on any wrongdoing involving their employer. The process by which a person may make this report is referred to as “making a disclosure” or “whistleblowing”.

To be covered by whistleblowing law, the disclosure must be a ‘qualifying disclosure’. This is any disclosure of information which, in the reasonable belief of the worker making the disclosure, is made in the public interest and tends to show that one or more of the following has occurred, is occurring or is likely to occur:

- A criminal offence (this may include, for example, types of financial impropriety such as fraud);
- a breach of a legal obligation;
- a miscarriage of justice;
- danger to the health or safety of any individual;
- damage to the environment; or
- the deliberate covering up of wrongdoing in the above categories.

Figure 1 – shows the number of disclosures received between 1st April 2017 to 31st March 2018 which we reasonably believe are “qualifying disclosures” and the action taken for each case:

Action taken	No.
Initial investigation - held for intelligence only	8
Further Investigation	15

Whistleblowing report – 1 April 2017 to 31 March 2018

About this report

On 1 April 2017 a new legal duty came into force requiring all prescribed persons to publish an annual report on the whistleblowing disclosures made to them by workers. The reporting period includes activity between 1 April 2017 and 31 March 2018.

The Comptroller and Auditor General (C&AG), is a prescribed person listed in the Public Interest Disclosure (prescribed persons) Order 2014. People can make disclosures to the C&AG relating to the proper conduct of public business, value for money, fraud and corruption in relation to the provision of public services.

In order to protect the confidentiality of whistleblowers and other parties involved, no information is included here that could lead to the identification of a whistleblower or the subject of the whistleblowing or compromise the confidentiality of an ongoing investigation.

The Comptroller and Auditor General's functions, objectives and statutory powers

The C&AG, who leads the National Audit Office (NAO), certifies the accounts of all government departments and many other public sector bodies. He has statutory authority to examine and report to Parliament on whether departments and the bodies they fund have used their resources efficiently, effectively and with economy.

The C&AG uses his powers to:

- decide which value for money examinations to carry out;
- decide how to report results to Parliament; and
- use rights of access to documents and staff to get information and explanations.

You can read more about the C&AG and the NAO on our [web site](#)

Whistleblowing disclosures received from 1 April 2017 to 31 March 2018

From 1 April 2017 and 31 March 2018 the C&AG received 34 whistleblowing disclosures.

Response to disclosures	No of disclosures	Summary of the type of action taken
Work performed by the NAO	9	In these cases we investigated the case either as part of our audit work or as a specific examination.
Referred to alternative body	12	In these cases we referred the disclosure to other bodies that were better placed to investigate the concerns. For example a government department or inspectorate.
Referred to local auditor	8	In these cases we referred the disclosure to the local auditor for the relevant local authority. The local auditor is a prescribed person where concerns relate to a local authority
No action taken	3	In one instance we were copied into a concern raised with another body. This was for information only. In the other two cases we considered the information provided and concluded there was no action necessary at the time the concern was raised.
Insufficient information	2	In these cases insufficient information was provided to enable any action to be taken.

Examples of the type of work we carried out

We have not included any information in these examples which could lead to the identification of a whistleblower or the subject of the whistleblowing or compromise the confidentiality of an ongoing investigation.

- Example 1: We met with the whistleblower and investigated the concerns raised as part of our audit work so as not to identify the whistleblower to the body.
- Example 2: With their consent raised the whistleblower's concerns with the body. We asked to be kept informed of the progress and made recommendations to the body for improvements.
- Example 3: Made inquiries with other inspectorates to help direct the whistleblower to the most appropriate organisation to take forward their concerns.

Learning from disclosures.

The National Audit Office can carry out examinations into the economy, efficiency and effectiveness with which government departments and many other public sector bodies have used their resources. We use the experience of people to inform our audits and take the issues raised with us into account as we conduct and plan our programme of work.

The Local Audit and Accountability Act 2014 gave the C&AG specific value-for-money powers in respect of certain local public bodies, including local authorities. While this does not allow us to investigate *individual* local public bodies, it does allow us to perform value-for-money work on *groups* of local authorities.

Whistleblowing disclosures could therefore trigger a wider examination of the types of study set out in the Local Audit and Accountability Act.

September 2018



SFO

serious
fraud
office



ANNUAL REPORT ON WHISTLEBLOWING DISCLOSURES

This report is made in accordance with the Prescribed Persons (Reports on Disclosures of Information) Regulations 2017.

The Serious Fraud Office (SFO) tackles the top tier of serious or complex fraud, bribery and corruption. We investigate and prosecute a small number of large economic crime cases and use our statutory powers to recover the proceeds of such crime. It is our aim to do so fairly and effectively and this includes treating victims, witnesses and whistleblowers with dignity and respect.

The Director of the SFO is a 'prescribed person' for the purpose of whistleblowing legislation and is required to publish an annual report concerning the number of whistleblowing disclosures made by workers about their employers. To qualify for inclusion in the report a disclosure must relate to serious or complex fraud (including bribery or corruption), civil recovery of the proceeds of crime, civil recovery investigations or disclosure orders in relation to confiscation investigations. In addition, the Director must reasonably believe that in the reasonable belief of the worker the disclosure is made in the public interest and tends to show a criminal offence or other relevant failing by the worker's employer.

During the period from 1 April 2017 to 31 March 2018, the SFO's Intelligence Unit managed 102 whistleblowing disclosures that qualified for inclusion in this report. The SFO took further action in relation to 91 disclosures. This included requesting additional information from the whistleblower, conducting further enquiries and / or making contact with partner law enforcement and regulatory agencies.

Whistleblowers continue to provide a vital source of information to the SFO in the fight against economic crime.



The SFO treats all whistleblowing disclosures in confidence. Those who wish to report wrongdoing relating to matters falling within the SFO's remit may do so via our online [Secure Portal](#).



SFO

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28 September 2018



Whistleblowing: Annual Report 1 April 2017 to 31 March 2018

The Prescribed Persons (Reports on Disclosures of Information) Regulations 2017

We are the Environment Agency. We protect and improve the environment.

We help people and wildlife adapt to climate change and reduce its impacts, including flooding, drought, sea level rise and coastal erosion.

We improve the quality of our water, land and air by tackling pollution. We work with businesses to help them comply with environmental regulations. A healthy and diverse environment enhances people's lives and contributes to economic growth.

We can't do this alone. We work as part of the Defra group (Department for Environment, Food & Rural Affairs), with the rest of government, local councils, businesses, civil society groups and local communities to create a better place for people and wildlife.

Published by:

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1. Foreword

Whistleblowing: Annual Report 1 April 2017 to 31 March 2018 – The Prescribed Persons (Reports on Disclosures of Information) Regulations 2017

Introduction

As part of the public interest disclosure legislation in England and Wales, commonly known as ‘Whistleblowing’, we have an obligation to act on third party disclosures made to us concerning malpractice on environmental matters. Workers, who wish to make a protected disclosure, which is in the public interest, about their employer, can choose to raise their concerns with the employer directly, or otherwise through a number of other routes (further guidance is given at the following web address: <https://www.gov.uk/whistleblowing>).

One of those routes is by disclosing concerns directly to us, as we are listed as a ‘prescribed person’ in the Public Interest Disclosure (Prescribed Persons) Order 2014. Matters which fall into the Environment Agency’s responsibilities are:

“acts and omissions which have an actual or potential effect on the environment or the management or regulation of the environment. This includes those relating to pollution, abstraction of water, flooding, the flow in rivers, inland fisheries and migratory salmon or trout.”

Reporting requirements

There is a duty on prescribed persons to report annually on the disclosures made and the action that was taken. In accordance with the reporting regulations and the guidance issued by the government, we have set out our annual report as follows.

The Environment Agency’s functions, objectives and statutory powers

We were established in 1996 to protect and improve the environment. We have around 10,600 employees. Our head office is in Bristol and we have another office in London. We have offices across England, divided into 14 areas.

Within England we are responsible for:

- regulating major industry and waste

- treatment of contaminated land
- water quality and resources
- fisheries
- inland river, estuary and harbour navigations
- conservation and ecology

We are also responsible for managing the risk of flooding from main rivers, reservoirs, estuaries and the sea.

Our priorities and objectives are to:

- work with businesses and other organisations to manage the use of resources
- increase the resilience of people, property and businesses to the risks of flooding and coastal erosion
- protect and improving water, land and biodiversity
- improve the way we work as a regulator to protect people and the environment and support sustainable growth

Read more about [our ambition to 2020](#). This is our ambition for how we plan to protect and improve our natural resources in years to come, alongside Defra's proposed 25-year environment plan. This document includes our vision, principles and purpose, and sets out our objectives to create a cleaner healthier environment which benefits people and the economy, a nation better protected against natural threats and hazards, and our commitment to work in partnership. We have also explained the metrics we will be measured against so we know when we are succeeding in our ambitions.

Statutory powers

Our principal statutory responsibilities for regulating and managing the environment are to:

- regulate industrial processes to prevent or minimise pollution to the environment as a whole;
- regulate the disposal of radioactive waste and the keeping and use of radioactive material and accumulation of radioactive waste;

- regulate the treating, keeping, movement and disposal of controlled waste to prevent pollution of the environment or harm to human health, in a manner which is proportionate to the threat posed;
- preserve or improve the quality of rivers, estuaries and coastal waters through its powers to regulate, prevent, mitigate or remedy pollution to water;
- take any necessary action to conserve, redistribute, augment and secure proper use of water resources;
- exercise a general supervision over all matters relating to flood defence; we also have powers to take certain flood defence measures as approved by Regional Flood Defence Committees;
- maintain, improve and develop salmon, trout, freshwater and eel fisheries;
- promote the conservation and enhancement of inland and coastal waters, and their use for recreation;
- maintain or improve non-marine navigation;
- regulate the remediation of contaminated land designated as special sites; and
- administer, in accordance with regulations on producer responsibility, registration of businesses and exemption schemes, and monitoring and enforcement of associated obligations.

2. Report

Number of qualifying disclosures made

Within the 1 April 2017 to 31 March 2018 reporting period, we received 28 from people, most of whom were anonymous. Some of these disclosures may have been made by ‘workers’ wishing to make qualifying disclosures about their employers or other third parties.

The following is a summary of the nature of the disclosures made to the Environment Agency, together with an explanation of whether the Environment Agency decided to take further action; and where it did, a summary of the type of action taken and a summary of how the information disclosed has impacted on the Environment Agency’s ability to perform its functions and meet its objectives. In line with the guidance, we have removed references to names or identifying employers and businesses who were the subject of the disclosures.

Reference	Date of qualifying disclosure	Summary of disclosure	Action taken	Impact on the Environment Agency
Disclosure 1 2017/18	05/09/2017	<p>Alleged non-compliance with permit conditions including mis-description of waste, acceptance of non-permitted wastes, mixing of non-compatible waste and hazard waste stored in unauthorised buildings.</p> <p>The Environment Agency received further contact from the ‘whistleblowers’ representative. We</p>	<p>Recorded by receiving officer as a NIRS and information also added to MEMEX. Site inspector informed.</p> <p>Inspection visit provisionally planned for October brought forward. Site visited on 18 September 2017 by two officers. One officer from outside of region to ensure impartiality.</p>	<p>Due to the nature of the permit compliance issues found during the unannounced visit on the operator, they were required to undertake further compliance work. The impact was to alert the Environment Agency of permit breaches earlier than a planned visit which had been scheduled for October 2017.</p>

		informed them that we had already been aware of some of the issues with the site concerned, although specific information provided by the 'whistleblower' had helped Environment Agency investigations.	After further work, Regulation 36 Notice was issued.	
Disclosure 2 2017/18	02/06/2017	Alleged unlawful movement of fish	There was a delay in the reported matter being passed on to an officer to respond to which meant that it would be difficult to gather evidence to prove an offence. It was also deemed that the officer required additional training.	We improved our incident handling process and addressed the on-going training needs of the Fisheries Enforcement Officer to improve their knowledge of CICS and the regulatory requirements.
Disclosure 3 2017/18	24/07/2017	Permit Breach concerning the collection and storage of effluent by an operator.	An Environment Officer investigated the disclosure on 4 August 2017 and confirmed that there was a lagoon filled with trade effluent from a fruit process. This had been ongoing for at least 10 years, thereby confirming the report from the whistle blower. The fruit farm operator is still under investigation and the	This has resulted in the Environment Agency being notified of permit breaches that has led to the operator being subject to enforcement investigations.

			Environment Agency is working with them to bring them into compliance.	
Disclosure 4 2017/18	12/10/2017	Land Contamination Incident was logged as an anonymous report and was dealt with in the usual manner. Officer called Guildford District Council as the depot was their responsibility. They were asked to liaise with the County Council over the question of whether the drains were blocked (as it was the District Council's responsibility).	Incident was dealt with by officer on duty desk and assessed as Category 3. No attendance required and once those that had responsibility were notified the incident was closed.	None
Disclosure 5 2017/18	01/12/2017	Reported burning of waste by operator	The Environment Agency wrote to the operator at the registered address as well as the site address with advice and guidance and asked them to contact the Environment Agency 8 December 2017 if they wished to discuss the matter further.	Becoming aware of an environmental risk and being in a position to contact the operator and ensure future compliance with environmental regulations.

			The informant was spoken to and updated as to our actions. The informant explained that they will not be in the area but others will report further burnings to the Environment Agency.	
Disclosure 6 2017/18	06/01/2018	Permit Breach	The report was anonymous so could not make any contact with the reporter to get further details. Found no previous incidents or sensitive receptors. There were no Environment Agency permitted sites in vicinity. The reported incident was closed down as there were no further details and actions the officer could take. The Environment Agency received no further reports so the matter was closed down.	N/A
Disclosure 7 2017/18	28/03/2018	Suspected Permit Breach	The site operator was advised of the report and responded to the allegations. The report was shared with our partners in the Local	None

			<p>Authority as some of the allegations related to activities under their regulatory powers.</p> <p>An inspection of the site was carried out. No evidence was found relating to the allegations made. The only non-compliance noted was in regards to control of dust (which was unrelated to the disclosure made by the anonymous reporter).</p>	
Disclosure 8 2017/18	15/03/2018	Illegal waste site	<p>Anonymous report about the presence of an alleged illegal waste site. The officer notified the Environmental Crime Team (ECT) under the local procedures for illegal waste site reports and an ECT officer was allocated. ECT officer undertook 'desktop research' in respect of land ownership without success. Intelligence information was recorded on Memex and the site was designated as an illegal</p>	<p>This involved minimal impact on the Environment Agency's functions. The Environment Manager fulfilled a routine incident role. Named companies and sites in the report are known to officers. Resource and prioritisation means that this site is awaiting further investigation.</p>

			waste site for follow up investigation.	
Disclosure 9 2017/18	21/03/2018	Illegal waste site	<p>An officer visited the site in response to the disclosure received.</p> <p>Illegal storage of waste was identified; however the operators responded that they had employed a consultant to lead on the application for a bespoke permit on their behalf.</p> <p>As a result, the Environment Agency currently has a case file with its Legal Services Department.</p>	No unusual impact given that the report of an illegal waste site is routine and is likely to lead to enforcement proceedings.
Disclosure 10 2017/18	15/06/2017	Water Pollution	An anonymous report was received. Unable to confirm if the drains referred to in the report were surface water or foul drains. Also unable to confirm when the 'incident' had taken place. No reports of pollution in that particular area or downstream of that location around that time so	No Impact – Normal incident response.

			the Environment Agency was unable to link it to any water pollution event.	
Disclosure 11 2017/18	16/06/2017	Permit Breach	<p>Anonymous report about a business. There had been no previous reports of permit breach. The Local Waste Team was informed.</p> <p>An officer communicated with the operator informing them of the allegation and asking them to check their facility/practices. The officer also provided the operator with further written Environment Agency guidance from its website.</p> <p>The officer phoned the reporter and told him what had been done.</p> <p>The operator also phoned the same to say that they used a waste contractor.</p>	As far as we are aware there has been no impact on the performance of the Environment Agency's functions.
Disclosure 12	11/08/2017	Land/Water Pollution	Anonymous report of disposal of chemicals down	Limited impact on the Environment Agency's given the

2017/18			<p>on site drains at operator's premises. The investigating officer established that another Environment Agency's team had attended site recently and following inspection had concluded that there was "washing out of independent bulk containers which had contained chemicals, but that this was being done in accordance with accepted practice and the washings disposed of to the foul drainage system."</p> <p>As a result, no attendance of an officer at that time was required and no further reports received. The anonymous nature of the report removed the option of contacting the reporter to more accurately establish the nature of the disclosure.</p>	<p>investigation was closed down after discussion with the operator.</p>
Disclosure 13 2017/18	11/08/2017	Water Pollution	<p>The Installations team have an inspection scheduled and will look at some of the surface water aspects.</p>	<p>There was no impact other than normal incident response.</p>

Disclosure 14 2017/18	12/09/2017	Water Pollution	Details of a reported fire risk were forwarded to Fire Service. Intelligence details were placed on Memex. Officers inspected the watercourse and found it to be clear of pollution. The incident was closed down as unsubstantiated.	There was no impact other than normal incident response.
Disclosure 15 2017/18	21/09/2017	Water Pollution	The Officer discussed the information we received concerning water pollution. A decision was made to add the information to our Intelligence Database (MEMEX) and to contact the water utility so they could take independent samples.	There has been no impact.
Disclosure 16 2017/18	14/11/2017	Water pollution	An anonymous report was made. The site not attended in accordance with Environment Agency procedure (which determines that officers do not attend a 'Category 3' incident unless there are exceptional reasons). The anonymous reporter was not aware as to	There was no impact other than normal incident response.

			<p>whether pollution was occurring (they did not have knowledge of the site's drainage arrangements).</p> <p>The officer discussed site drainage arrangements with a member of a water utility staff who had recently visited the site. They were informed by the site manager that the 'new wash bay' was connected into an existing collection pit, the contents of which were tankered away for disposal. The water utility member of staff had asked for water to be discharged via the wash bay whilst they checked for evidence of any discharge to the canal. They saw none.</p> <p>No further incident reports since the original report on 14 November 2017. If pollution was occurring then, given public access to the canal, the Environment Agency would have expected</p>	
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			further reports would have been received (which they have not).	
Disclosure 17 2017/18	04/12/2017	Illegal waste site	The information received in the report was added to our Memex intelligence systems.	The report was anonymous and we have received no further intelligence so we have not been able to build an intelligence picture that would justify putting further resource into this. It has, therefore, only had limited impact on the EA's ability to perform its functions and meet its objectives.
Disclosure 18 2017/18	09/01/2018	Illegal Disposal of Waste	The matter disclosed was not within the Environment Agency's remit, because it was an obligation on the waste carrier to inform the hotel of waste segregation. No attendance was required to the premises, the disclosure was closed as not being EA business.	No impact. A separate Environment Agency investigation was already being conducted into illegal landfilling operations within the car park area of the hotel.
Disclosure 19 2017/18	08/01/2018	Odour	Contacted the site in response to a report of potential pollution. Site not	There was minimal impact on the Environment Agency

			attended – Incident report closed down.	
Disclosure 20 2017/18	31/01/2018	Oil and chemical spills	A report was received relating to a metals sector facility. The incident report has been closed. The pollution report has not been substantiated. It was agreed to look into the operator as to whether an Environmental Permit would be required.	There was no impact other than normal incident response.
Disclosure 21 2017/18	12/01/2018	Suspected permit breach	An officer contacted the person making the disclosure who could not provide any further details than already provided to our National Customer Contact Centre. The site had been inspected on 8 January 2018 when breaches of the environmental permit had been identified and scored. Further photos were requested on 11 January 2018 which indicated site was non-compliant. Five further inspections were	The site was and is a poor performer and has had significant Environment Agency resource involved in regulation. The site has previously been served regulatory notices to improve compliance. Work is now focused on obtaining a suitable Fire Prevention Plan.

			undertaken between 9 March 2018 and 14 June 2018.	
Disclosure 22 2017/18	05/02/2018	Water pollution	<p>The incident was assessed as a Category 3 incident that warranted a non-urgent inspection. Report of contaminated water being disposed of to surface water drains at an industrial estate.</p> <p>An officer assessed the incident checking water utility mapping that showed the site to consist of a combination of combined sewer and surface water drains.</p> <p>An Environment Officer visited the site on 22 February 2018 and met with the operator's Technical Manager. The Environment Agency found drainage (both foul and surface) to the front of the premises. Surface water drainage at the front of the operator's unit was channelled to the rear of a</p>	No impact dealt with as routine incident response and management

			<p>factory and discharged into the River Aire.</p> <p>On the date of this visit white residues of product were evident around the manhole. On the date of this visit there was not any obvious contamination of the watercourse to the rear of the operator's unit.</p> <p>The operator's Technical Manager was advised to ensure that all waste was discharged to appropriate drains within the premises and not outside, He was advised to contact the water utility as he may need a Trade Effluent consent.</p> <p>The Environment Agency wrote to the operator reiterating our advice and guidance. The operator was asked for an action plan to be produced which was subsequently provided. The operator was recharged</p>	
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			for the Environment Agency time spent on the matter.	
Disclosure 23 2017/18	11/08/2017	Illegal Waste Site	Officer already aware of illegal activity on site. Information received from someone making a disclosure contributed to an ongoing investigation. The site operator was prosecuted and found guilty with sentencing due later this year. We are also pursuing a Proceeds Of Crime Act case.	The information contributed to an ongoing investigation and helped us to achieve the following objectives: <ul style="list-style-type: none"> - Protecting and improving the environment - Supporting healthier and safer communities.
Disclosure 24 2017/18	18/08/2017	Permit Breach	As a result of a disclosure received, a compliance inspection was conducted on 8 September 2017.	There was no impact on the Environment Agency's ability to perform its functions and meet its objectives, as the report was incorporated in a routine compliance inspection.
Disclosure 25 2017/18	04/09/2017	Water Pollution	As the reported location has an abstraction licence, an officer planned to complete a licence inspection whilst investigating the allegation of pollution. Unfortunately other incidents took priority and the officer was not able to	This report had a limited impact on resources. As there was insufficient evidence to suggest a direct impact to the environment, other more serious incidents were prioritised and investigated.

			arrange a visit. The allegation was not investigated any further, nor have any further reports been received of pollution.	
Disclosure 26 2017/18	07/01/2018	Water pollution	<p>As a result of someone contacting the Environment Agency, officers checked the site and spoke to the Manager and the Director. The on-site stream was clear, with no evidence of any yellow paint at all. There were no traces of yellow paint on the bund which runs along the stream behind the factory. All drains were clear and dry, with no paint visible in any of them.</p> <p>The site manager said that they had spilled a can of yellow paint but that it had been sucked up from the ground and was stored in a drum in a cordoned off area.</p> <p>On the basis that no offence had occurred, no further action was required.</p>	None. The disclosure was an incident report, which officers responded to in the normal risk based way.

			No feedback possible as report was anonymous.	
Disclosure 27 2017/18	15/03/2018	Water pollution/Suspected permit breach	As a result of contact being received, an officer contacted a water utility control who stated they would investigate. Discussions with the company suggested that there was no problem on site. No further action was taken by the Environment Agency	This report had a limited impact on resources. As there was insufficient evidence to suggest a direct impact to the environment, other more serious incidents were prioritised and investigated.
Disclosure 28 2017/18	15/02/2018	Illegal waste site	An officer responded to the report – and attended on a risk basis due to potential enforcement action/link with existing investigation. A site visit was undertaken and the person who reported the original incident reporter was contacted. Evidence was collected from site.	None. Disclosure was incident report. We responded in normal risk based way.

3. Glossary and Abbreviations

NIRS	National Incident Reporting System – the system used by the Environment Agency to log and record complaints and disclosures from members of the public regarding environmental incidents.
MEMEX	MEMEX is a database maintained by the Environment Agency for storing intelligence information.
Regulation 36 Notice	Enforcement Notice served on an operator to take specified steps in relation to a breach/anticipated breach of permit conditions issued pursuant to Regulation 36 of the Environmental Permitting (England and Wales) Regulations 2016.

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Annual Report and Accounts 2017/18

(for the year ended 31 March 2018)

HC 1202



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schemes or performance management that might harm consumers, whether through mis-selling or other poor conduct.

This guidance also provides suggestions for ways firms can manage these risks more effectively. The new rules will come into force on 1 October 2018. We subsequently intend to assess the impact of the new rules and guidance by reviewing how consumer credit firms have responded to them.

Accountability

The FCA and, for dual-regulated firms, the PRA and FCA, approve Senior Managers. The SM&CR is a key part of our culture and governance programme. It sets minimum common sense standards of conduct for financial services staff at all levels and clarifies Senior Managers' areas of responsibility. The regime makes it clear that every individual in a firm is responsible and accountable for their own behaviour and that Senior Managers are also responsible and accountable for taking reasonable steps to ensure good conduct in their areas of responsibility. Finally, the regime is designed to ensure that those individuals with the greatest potential to do harm are fit and proper. Firms are required to review annually other important individuals and certify that they are fit and proper.

In May 2017, we extended the regime to apply our conduct rules to non-executive directors. At the same time, we issued guidance to explain how we will enforce the Duty of Responsibility. This power allows us to take action against senior managers of SM&CR firms if they do not take reasonable steps to avoid a contravention happening, or continuing, in activities they are responsible for managing.

The SM&CR has applied to deposit takers and dual-regulated investment firms since March 2016. It is now embedded in our authorisation, supervision and enforcement processes, allowing us to identify and focus on key accountable individuals in these firms.

In 2016, Parliament gave us a duty to extend the SM&CR to most of the firms that we regulate. Last year, we published consultation papers on our proposed design of this extended regime and on how we propose to move firms and individuals to it.

Protecting and encouraging speaking up in firms

We have enabled more staff in firms to act as whistleblowers, to increase the level of valuable information we receive about actual or potential wrongdoing. Being a whistleblower is usually difficult. So we now offer all whistleblowers a meeting with us to build their trust and reflect the value we place on them. We know that whistleblowers can come to any part of the FCA with information, so we have also rolled out training to help all FCA staff recognise whistleblowers and treat what they tell us accordingly.

We use a range of whistleblowing data to show whether firms act appropriately on intelligence they are given and to be transparent about how we respond to incidents. This year we:

- Managed 1,106 cases from whistleblowers. Of these we reasonably believe that 649 are qualifying disclosures within our remit, 307 are not. We have not yet been able to determine whether 150 are or not.
- Decided to take further action on 121 disclosures we reasonably believed to be qualifying disclosures. We are still assessing a further 128 disclosures to determine if we should take further action.

Whistleblowing disclosures are a vital and unique source of information for us. They demonstrate that we have acted compatibly with our strategic objective to ensure relevant markets function well, and they help us deliver our operational objectives to protect consumers and the integrity of financial markets. They do this by helping us take enforcement action against firms and individuals, deliver effective supervision through our work with firms or thematic work, and better understand the behaviour of the firms we regulate.

Encouraging an active focus on firms' cultures

Firms' cultures shape conduct and can drive behaviours that harm consumers and markets. So we have encouraged firms to actively focus on their cultures in line with our objective to protect consumers. We have also undertaken a number of initiatives to try and provide thought leadership in this area, encouraging discussion from different perspectives to speed up the pace of cultural change.

For example, in March 2018, we published a [discussion paper on transforming culture in financial services](#). The paper is a collection of 28 essays, giving views from industry leaders, academics and practitioners. We followed up the paper's publication with a conference to encourage broader debate on these topics.

A number of themes emerged from the conference, including the need to:

- ensure firms create environments of 'psychological safety', where speaking up becomes the norm
- ensure diversity and inclusion
- provide better support, capability-building and empowerment to 'squeezed' middle managers
- using our supervisory communications and challenge with firms to shape healthy cultures, given many participants' views on the limited role of further rules
- look at a broad range of incentives to shape behaviours, including those that go beyond remuneration and other financial incentives

We are reviewing the results of the conference to decide what next steps we should take in this work.



FINANCIAL REPORTING COUNCIL
REPORT AND FINANCIAL STATEMENTS
FOR THE YEAR ENDED
31 MARCH 2018

HC 1311

DIRECTORS' REPORT

success of the FRC. The Strategic Report contains information on the following matters and can be found at pages 1 to 23.

- the FRC's financial risk management policy;
- important events affecting the FRC since the end of the financial year; and
- likely future developments in the business of the FRC.

WHISTLEBLOWING TO THE FRC AS A PRESCRIBED PERSON

Public interest disclosures

Whistleblowing is the term used when a worker passes on information concerning suspected or known wrongdoing by their employer (it is also known as 'making a disclosure'). The Employment Rights Act 1996, as amended by the Public Interest Disclosure Act 1998 provides the legal framework for protecting workers from harm if they blow the whistle. The purpose of a prescribed person is to provide workers with a way of whistleblowing to an independent body that may be able to act on those concerns.

The FRC is a prescribed person and as such, individuals working outside the FRC, but in the accounting or actuarial professions, may get in touch with the FRC if they want to make a disclosure about their employer in relation to matters which are within the scope of the FRC's regulatory duties.

During 2017/18 the FRC received 23 disclosures in its capacity as a prescribed person. In respect of the disclosures made, the following action was taken:

- four were referred to the relevant accountancy professional body for consideration;

- four were referred to another regulator or organisation for consideration;
- nine were of direct relevance to the FRC's responsibilities and were addressed or are being considered by the relevant team(s);
- four did not respond to requests for further information; and
- in two cases we were unable to identify any agency or organisation able to assist with the matter raised.

The FRC's Whistleblowing Policy can be found here: <https://www.frc.org.uk/Whistleblowing>.

COMPLAINTS ABOUT THE FRC

The FRC maintains its Complaints Procedure (<https://www.frc.org.uk/about-the-frc/making-a-complaint-about-the-frc>) and considers complaints about the FRC under that procedure. Where the FRC identifies it has made mistakes as a result of the consideration of a complaint, it will acknowledge them and take any appropriate action. Where a complainant is not satisfied with the response to a complaint they may seek an independent review. The FRC has appointed an Independent Complaints Reviewer (ICR), Elizabeth Derrington. The role of the ICR is to carry out an independent review of the way in which a complaint has been considered and handled.

During 2017/18 the FRC received complaints from 12 complainants. Full responses have been provided to 10 of the complainants following investigation and two complaints are under consideration. One of the complaints was upheld and referred within the FRC for further action and two complaints were referred to the ICR at the request of the complainants although one of those requests was later

withdrawn. In one case, although the complaint was not upheld, opportunities for improvement were identified and taken forward. Three were concluded with no further action being taken and one complaint was referred to the ICR who determined the matter should not be taken forward.

DISCLOSURE TO THE AUDITOR

The Directors, including the Chief Executive as Accounting Officer, at the date of this report, confirm that, as far as he/she is aware, there is no relevant audit information of which the FRC's auditor is unaware. Each Director has taken all steps that they ought to have taken as a Director in order to make himself/herself aware of any relevant audit information and to establish that the FRC's auditor is aware of that information.

AUDITORS

The auditors, haymacintyre, have expressed their willingness to remain in office and the Audit Committee has recommended their reappointment to the Board. A resolution to reappoint the auditors and to authorise the Directors to determine their remuneration will be proposed at the Annual General Meeting of the Company.

Approved by the Board of directors on 4 July 2018 and signed on its behalf by:

Anne McArthur
Company Secretary

Food Standards Agency

The Food Standards Agency has made its report available as a dataset [here](#).



Whistleblowing disclosures 2017-18

Food Standards Scotland (FSS) is designated in law as a 'prescribed person' for the purpose of receiving disclosures of information from workers ('whistleblowers') regarding matters which affect the health of any member of the public in Scotland in relation to the consumption of food and matters which concern the protection of consumers in relation to food.

During 2017/18 whistleblowers contacted us 4 times with disclosures which were qualified disclosures within the meaning of section 43B of the Employment Rights Act 1996*. We investigated to establish the facts in all 4 cases. In each case we found that the whistleblower's concerns were substantiated, and we took action appropriate to the nature of the concern.

FSS is the public body with responsibility in Scotland for food and feed safety and standards, policy and regulation. It is designated as a central competent authority for the regulation of food and feed safety, and monitors the delivery of food and feed regulation by its partners. FSS's Scottish Food Crime and Incidents Unit SFCIU is the dedicated incidents, investigations and intelligence gathering arm of Food Standard Scotland, which focuses on tackling food crime and maintaining consumer protection.

The Unit has a dedicated Intelligence Office which analyses, develops and actions information received from members of the public, food business operators and industry whistle-blowers. The Investigations team investigate instances of food crime. The team may also support Local Authorities with enquiries into serious breaches of food safety and assist with complex and protracted investigations. The information disclosures received in 2017/18 assisted FSS to achieve its objective of consumer protection by acting upon the information received and ensuring the issues identified were rectified.

* A qualifying whistleblowing disclosure is one where the information being disclosed falls under any of the headings below:

- a criminal offence
- a failure to comply with a legal obligation
- a miscarriage of justice
- the endangering of an individual's health and safety
- damage to the environment
- deliberate concealment of information tending to show any of the above.

Annual Whistleblowing Report 2017-2018

Publication date:	28 September 2018	Contact:	Emma Lynch, Senior Manager
		Team:	Conduct and Enforcement
		Tel:	(0141) 331 6044
		Email:	Emma.lynch@ofgem.gov.uk

This is our first annual Whistleblowing Report¹, about disclosures made to us, as the relevant Prescribed Person, by workers in the gas and electricity market. Further detail on the types of disclosures that can be made to us are outlined in [the Public Interest Disclosure \(Prescribed Persons\) Order 2014](#). This report summarises the number of qualifying disclosures received and how they were taken forward in the relevant reporting period from 1 April 2017 to 31 March 2018.

The purpose of this report is to increase openness in the way that whistleblowing disclosures are dealt with and to raise confidence among whistleblowers that their disclosures are taken seriously.

¹ As required by Regulation 3 of the Prescribed Persons (Reports on Disclosures of Information) Regulations 2017

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Any enquiries related to the text of this publication should be sent to Ofgem at: 10 South Colonnade, Canary Wharf, London, E14 4PU. Alternatively, please call Ofgem on 0207 901 7000.

This publication is available at www.ofgem.gov.uk. Any enquiries regarding the use and re-use of this information resource should be sent to: psi@nationalarchives.gsi.gov.uk

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1. Introduction

Background

Ofgem's objectives and functions

- 1.1. Ofgem is the Office of Gas and Electricity Markets. We are a non-ministerial government department and an independent National Regulatory Authority, recognised by certain EU Directives. We are the economic regulator for gas and electricity markets in Great Britain.
- 1.2. Our principal objective when carrying out our functions is to protect the interests of existing and future electricity and gas consumers. We do this in a variety of ways including:
 - promoting value for money
 - promoting security of supply and sustainability, for present and future generations of consumers, domestic and industrial users
 - the supervision and development of markets and competition
 - regulation and the delivery of government schemes.
- 1.3. The Authority determines strategy, sets policy priorities and makes decisions on a wide range of regulatory matters, including price controls and enforcement. The Authority's powers are provided for under a number of statutes including the following:
 - Gas Act 1986
 - Electricity Act 1989
 - Utilities Act 2000
 - Competition Act 1998
 - Enterprise Act 2002
 - The Electricity and Gas (Market Integrity and Transparency) (Enforcement etc) Regulations 2013 which enables Ofgem to monitor, investigate and enforce against market abuse in the wholesale market for electricity under EU Regulation on energy market and integrity and transparency No 1227/2011 (REMIT)
 - measures set out in a number of Energy Acts.

About information we receive

- 1.4. Disclosures can be made to Ofgem in writing (either by e-mail or letter) or by calling our whistleblowing desk. Further information on our whistleblowing process is available via this [link](#)
- 1.5. The information we receive helps us achieve our objectives (including our principal objective) and can provide us with an early indication of future issues. For example, we may be able to direct resources and tackle issues before they escalate and become more serious or widespread. Alternatively, the disclosures may provide useful information and insight about an issue that we are already aware of and may be currently investigating.
- 1.6. Disclosures help deliver our objectives and regulate the gas and electricity market effectively. A qualifying disclosure (see section 2) can provide valuable intelligence about areas where there may be problems and can inform our regulatory actions. All qualifying disclosures are taken seriously and are given due attention. There are a number of measures we can deploy to regulate effectively and can involve the use of our statutory powers. For example:
 - where licensees are potentially breaching licence conditions we may choose to open an enforcement investigation or engage in compliance activities. This helps us achieve our principal objective of protecting the interests of all energy consumers. It can also help us achieve our other objectives, depending on the nature of the potential breach.
 - where there are potential abuses of government schemes we may choose to investigate and report criminal behaviour to a relevant law enforcement authority. Through this we are able to promote value for money.
 - we may investigate potential anti-competitive behaviour using our statutory powers under the Competition Act 1998. This helps us ensure the energy market is working effectively.

2. Disclosures

About disclosures

Ofgem receives information from members of the public who raise a genuine concern about certain practices that they are aware of through their work, which they believe may constitute a criminal offence, a risk to the health and safety of a person or persons, pose a risk to the environment or a potential breach of a regulatory requirement and which affects others, usually customers, members of the public, or their employer.

On receipt of any information, we will consider whether the information falls within the definition of qualifying information, and if so, what action Ofgem should take bearing in mind its statutory duties and powers.

Disclosures

Number of qualifying disclosures received

- 2.1. A total of 79 qualifying disclosures² were made to Ofgem by workers in the gas and electricity energy sector in the period 1 April 2017 to 31 March 2018.

² As defined in section 43B of the Employment Rights Act 1996. Section 43B was inserted by the Public Interest Disclosure Act 1998 c.23, s 1 and amended by section 17 of the Enterprise and Regulatory Reform Act 2013

Outcomes

2.2. This table shows what actions were taken and the outcomes for the 79 qualifying disclosures³ made during the period 1 April 2017 to 31 March 2018.

Action taken	Outcome	Total
Led to direct contact with employer	Resolved at first contact	3
Led to direct contact with employer	After further enquiries led to opening of an investigation	1
Led to direct contact with employer	Ongoing contact with employer	5
Did not lead to contacting employer	Held as intelligence ⁴	38
Ofgem already had ongoing enquiries and was aware of the information the whistleblower had provided but the employer was not yet the the subject of any formal investigation or compliance action	Ongoing enquiries	2
Considered as part of ongoing investigation /compliance action	Ongoing investigation	12
Background enquiries still ongoing	Ongoing enquiries	15
Referred to another body	Action completed	3

³ All disclosures were external ie they were made by workers in the energy sector and disclosed to Ofgem. There were no internal disclosures made by Ofgem staff in the reporting period

⁴ This is where there is insufficient evidence of breach, consumer harm or detriment in the disclosure that would warrant further action

3. Conclusion

- 3.1. Ofgem's statutory function is to protect and make a positive difference for all energy consumers. We work to promote value for money, security of supply and sustainability for present and future generations. We achieve this by supervising and developing markets, regulation and delivery of government schemes. The information provided by whistleblowers can highlight problems in our areas of responsibility and we can react to the information provided. A whistleblowing disclosure can be an influential factor in any decision to exercise our range of statutory powers to ensure we fulfil our statutory functions.
- 3.2. The table of outcomes shows that whistleblowing disclosures which are deemed to be qualifying disclosures have led to a number of different actions. These include the timely resolution of issues without the need for enforcement action, providing valuable information on existing issues we were aware of and were already investigating and, in one instance, the opening of an enforcement investigation. The information provided in some disclosures highlighted problems within our functional areas and were able to act accordingly. For example using the disclosure to focus research, establish trends and use our statutory powers to obtain further information from licensees. Even where disclosures were not acted upon they still provide intelligence about potential emerging issues and this additional information assists our policy considerations.
- 3.3. Ofgem values the information provided by whistleblowers and the content of this report provides greater transparency regarding how we act on the information we receive. All qualifying disclosures are taken seriously and will be investigated. The nature of the enquiries we make are tailored to the facts of each specific disclosure.

Whistleblowing disclosures report 2018

Healthcare professional regulators

This report has been produced by the healthcare professional regulators

**General
Chiropractic
Council**



General Optical Council



General
Medical
Council

**General
Dental
Council**



General
Osteopathic
Council

**General
Pharmaceutical
Council**

hcpc health & care
professions
council

NMC Nursing &
Midwifery
Council

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- 11** General Optical Council
- 14** General Osteopathic Council
- 15** General Pharmaceutical Council
- 17** Health and Care Professions Council
- 18** Nursing and Midwifery Council (NMC)
- 20** Note on data

About the report

On April 1 2017 a new legal duty came into force which required all prescribed bodies to publish an annual report on the whistleblowing disclosures made to them by workers.

“The aim of this duty is to increase transparency in the way that whistleblowing disclosures are dealt with and to raise confidence among whistleblowers that their disclosures are taken seriously. Producing reports highlighting the number of qualifying disclosures received and how they were taken forward will go some way to assure individuals who blow the whistle that action is taken in respect of their disclosures.”

[Department for Business, Energy and Industrial Strategy \(2017\)](#)

As healthcare professional regulators* we have chosen to publish a joint report highlighting our coordinated effort to work together in handling serious issues raised to us. Our aim in this is to be transparent about how we handle these disclosures, highlight the action taken about these issues, and to improve collaboration across the health sector.

In this report we show how we handled these disclosures and what action we have taken. As each regulator has different statutory responsibilities and different operating models, a list of actions were devised that could accurately describe the handling of disclosures in each organisation (Table 1). It is important to note that whilst every effort has been made to align the ‘action taken’ categories, each regulator will have slightly different definitions, activities, and sources of disclosures.

* General Chiropractic Council, General Dental Council, General Medical Council, General Optical Council, General Osteopathic Council, General Pharmaceutical Council, Health and Care Professions Council and Nursing and Midwifery Council

Table 1: Types of action taken after receiving a whistleblowing disclosure

Action type	Description
Under review	This applies to disclosures which have been identified as a qualifying whistleblowing disclosure but no further assessment or action has taken place yet.
Closed with no action taken	This applies to disclosures which have been identified as a qualifying whistleblowing disclosure but no regulatory assessment, action or onward referral was required. This could be in cases where it was decided the incident was resolved or no action was appropriate at the current time.
Onward referral to alternative body	This applies to disclosures which have been identified as a qualifying whistleblowing disclosure and forwarded to another external organisation without any further assessment or action by the receiving regulator.
Regulatory action taken	This applies to disclosures where the regulator has taken an action which falls under their operative or regulatory remit. This may include but is not limited to: <ul style="list-style-type: none"> ● Referral to fitness to practise team or any other fitness to practise process ● Opening of an investigation ● Advice or guidance given to discloser, employer, education body or any other person or organisation ● Registration actions ● Other enforcement actions In cases where the disclosure was assessed via a regulatory action but it was then found that there was not enough information to proceed, the disclosure is categorised as 'no action - not enough information'.
No action - not enough information	This applies to disclosures which have been assessed by the regulator and a decision has been made that there is not enough information to progress any further. This may be in cases where the disclosure was made anonymously with insufficient information to allow further investigation, a discloser in unable to provide more information or the disclosure was withdrawn before it could be investigated.
Onward referral to alternative body and regulatory action taken	This applies to disclosures where a regulatory action was taken and the disclosure was referred on to another external organisation

In order to protect the confidentiality of whistleblowers and other parties involved, no information is included here that would enable a worker who has made the disclosure or the employer, place, or person about whom a disclosure has been made to be identified.

The reporting period includes activity between 1 April 2017 and 31 March 2018.

General Chiropractic Council

The General Chiropractic Council (GCC) is the independent regulator of UK chiropractors. We are accountable to Parliament and subject to scrutiny by the Professional Standards Authority (PSA). Our statutory duty is to develop and regulate the profession of chiropractic, thereby protecting patients and the public.

The GCC's over-arching objective is the protection of the public. This involves the pursuit of the following objectives:

- To protect, promote and maintain the health, safety and wellbeing of the public;
- To promote and maintain public confidence in the profession of chiropractic; and
- To promote and maintain proper professional standards and conduct for members of that profession.

Whistleblowing disclosures received from 01 April 2017 to 31 March 2018

From 01 April 2017 to 31 March 2018 the General Chiropractic Council received no whistleblowing disclosures.

General Dental Council

The General Dental Council (GDC) is the UK-wide statutory regulator of the 111,000 members of the dental team. This includes approximately 42,000 dentists and 69,000 dental care professionals (DCPs), which includes dental nurses, clinical dental technicians, dental hygienists, dental technicians, dental therapists and orthodontic therapists.

Our purpose: We want patients and the public to be confident that the treatment they receive is provided by a dental professional who is properly trained and qualified and who meets our standards. Where there are concerns about the quality of care or treatment, or the behaviour of a dental professional, we will investigate and take action if appropriate.

Our legislation, the Dentists Act 1984 (as amended), sets us the following objectives:

- To protect, promote and maintain the health, safety and well-being of the public
- To promote and maintain public confidence in the professions regulated
- To promote and maintain proper professional standards and conduct for members of those professions.

We fulfil our purpose by using our statutory powers to:

- grant registration only to those dental professionals who continue to meet our requirements on education and training, health and good character. Only those who are registered with us can practise dentistry in the UK
- assure the quality of dental pre-registration training
- set standards of conduct, performance and ethics for the dental team
- investigate complaints against dental professionals and where appropriate, take action through our Fitness to Practise (FtP) process
- protect the public from individuals carrying out dentistry while not registered
- require dental professionals to keep their skills up to date through our continuing professional development (CPD) requirements.

In addition, we provide the Dental Complaints Service (DCS) which aims to support patients and dental professionals in using mediation to resolve complaints about private dental care.

In carrying out all our activities we aim to demonstrate our values, which are:

Fairness: We will treat everyone we deal with fairly

Transparency: We are open about how we work and how we reach decisions

Responsiveness: We can adapt to changing circumstances

Respect: We treat dental professionals, our partners and our employees with respect.

Whistleblowing disclosures received from 01 April 2017 to 31 March 2018

From 01 April 2017 to 31 March 2018 the General Dental Council received 61 whistleblowing disclosures.

Actions taken in response to disclosures

No action – not enough information	4
Closed with no action taken	7
Regulatory action taken	47
Onward referral to alternative body	3

By far the majority of disclosures (51) were made direct to the fitness to practise team. In 42 of those 51 disclosures regulatory action was taken, namely the opening of fitness to practise cases. Four of the disclosures received by the fitness to practise team during this period could not be taken forward because insufficient information was provided and three were referred to another body. Two disclosures were closed with no action taken as the individual concerned was no longer on the register.

In addition, two disclosures were made during this period relating to education providers. One disclosure related to a course provider where the GDC was already undertaking regulatory action. The second disclosure resulted in a number of FtP cases relating to clinical concerns being opened and investigated. In respect of this disclosure, the GDC also investigated the concerns raised with the education provider.

A further three of the disclosures were received by the GDC's illegal practice team. Under the Dentists Act 1984, only registered dental professionals can:

- practise dentistry; or
- hold themselves out as practising or being prepared to practise dentistry;
- use a protected title or carry on the business of dentistry.

A criminal prosecution can be brought by the GDC if there is sufficient evidence for there to be a realistic prospect of conviction and if there is, it is in the public interest to pursue the matter to a prosecution. 'Cease and desist' letters, requiring the illegal practice to be discontinued, were sent in response to all three of these disclosures.

Learning from disclosures

The disclosures we have received have not impacted on our ability to perform our regulatory functions and objectives during the period. In the vast majority of cases, the action we would take in response to a disclosure does not differ from the regulatory action we would normally take. There has been a minor operational impact in terms of establishing systems and practices across the organisation to recognise disclosures appropriately when they are received.

The absolute number of disclosures we have received has been too small to discern emerging trends. Compared to some other regulators we have received a higher number of disclosures in comparison to the size of the register. While we are unable to form firm conclusions as to why this might be the case, it is worth noting that most dentistry is provided in a primary care setting and out with the more robust clinical governance frameworks that characterise some other forms of healthcare. This may mean that alternative disclosure routes are less present in dentistry, and a larger proportion are dealt with by the regulator. We may be able to explore this further as we collect more data.

General Medical Council

The General Medical Council is an independent organisation that helps to protect patients and improve medical education and practice across the UK. Our role is to protect the public* and act in the public interest.

- We decide which doctors are qualified to work here and we oversee UK medical education and training
- We set the standards that doctors need to follow, and make sure that they continue to meet these standards throughout their careers
- We take action to prevent a doctor from putting the safety of patients, or the public's confidence in doctors, at risk
- Every patient should receive a high standard of care. Our role is to help achieve that by working closely with doctors, their employers and patients, to make sure that the trust patients have in their doctors is fully justified.

Whistleblowing disclosures received from 01 April 2017 to 31 March 2018

From 01 April 2017 to 31 March 2018 the General Medical Council received 23 whistleblowing disclosures.

Actions taken in response to disclosures

No action – not enough information	2
Regulatory action taken	21

All of the whistleblowing disclosures we received came in to our Fitness to Practise directorate. Of the 23 disclosures we received 12 were made by doctors, two were made by other healthcare professionals and the remainder were made anonymously.

All of the disclosures were assessed by our fitness to practise team. Ten of the disclosures were closed after an initial assessment, ten resulted in either a preliminary or full investigation (five now closed) and one disclosure is still being assessed. For two of the disclosures we received, it was not possible to obtain enough information to take any action.

*Medical Act 1983 (as amended)

Of the 15 disclosures which were closed after either an initial assessment or a preliminary or full investigation the reasons for closure included:

- the disclosure was or had already been handled locally
- advice was given to the discloser
- disclosure was outside of our remit to deal with
(e.g. local employment dispute, insufficient local resources)
- disclosure was a historical concern.

Learning from disclosures

The information disclosed to us during the reporting period has not impacted on our ability to perform our regulatory functions and deliver our objectives. We have an operational group which meets throughout the year to reflect on the disclosures we have received.

A few of the disclosures we received were outside of our remit and in these cases we have advised disclosers on where to raise their concern or where to seek additional support.

We want to ensure that whistleblowers feel confident in raising their concerns to us and we have been improving awareness of whistleblowing policies internally. To date we have revised our internal guidance for teams, rolled out in-house training for staff on how to recognise and act on whistleblowing disclosures, and organised an internal learning event where a doctor who was a whistleblower shared his experiences with us.

General Optical Council

The General Optical Council (GOC) is the regulator for the optical professions in the UK. As of 31 March 2018, there were 30,097 optometrists, dispensing opticians, student opticians and optical businesses on our register.

Our general statutory purpose is the promotion of high standards of professional education, conduct and performance among registrants and the additional functions assigned to the Council by the Opticians Act 1989.

We are one of 12 organisations in the UK known as health and social care regulators. These organisations oversee the health and social care professions by regulating individual professionals. We are the regulator for the optical professions in the UK. We currently register around 30,000 optometrists, dispensing opticians, student opticians and optical businesses.

We have four core functions:

- Setting standards for optical education and training, performance and conduct
- Approving qualifications leading to registration
- Maintaining a register of individuals who are qualified and fit to practise, train or carry on business as optometrists and dispensing opticians
- Investigating and acting where registrants' fitness to practise, train or carry on business is impaired.

We published a 'Raising Concerns (Whistleblowing) Policy in 2016:

https://www.optical.org/en/Investigating_complaints/raising-concerns.cfm

Whistleblowing disclosures received from 01 April 2017 to 31 March 2018

From 01 April 2017 to 31 March 2018 the General Optical Council received 11 whistleblowing disclosures.

Actions taken in response to disclosures

No action - not enough information	2
Under review	5
Regulatory action taken	2
Onward referral to alternative body	2

In two cases, we were unable to pursue the disclosures made. In one of the cases, the disclosure was anonymous and we had insufficient information to be able to proceed. In the other case, the discloser did not respond to requests for more information and we were unable to proceed.

A decision is pending in three cases as to whether the disclosure can be taken forward to formal fitness to practise investigation stage. In two cases, we have no jurisdiction under our fitness to practise process as the disclosure relates to non-registrants but we are reviewing whether they can proceed via our Illegal Practice jurisdiction.

We have opened four formal fitness to practise investigations into concerns arising from two disclosures.

We received two disclosures relating to non-GOC registered businesses. We referred both disclosures on to NHS Counter Fraud as they related to claims made under the GOS system.

All 11 disclosures that we received in 2017-18 were placed into our Triage system for formal assessment. All required us to attempt further initial engagement with the discloser before we could reach an initial decision, with varying results as can be seen from the data above.

Where possible, we have opened formal fitness to practise investigations into the disclosures. With regard to the two disclosures that have led to the opening of a formal investigation (into four individuals/businesses), these investigations are ongoing.

Where it has not been possible to open an investigation, we have sought to identify other organisations that may be able to investigate further. In two of our cases, this resulted in the disclosures being referred to NHS Counter Fraud. Where we have been unable to identify fitness to practise jurisdiction (because the subject(s) of the disclosure are not registered with the GOC), we are considering whether we may have jurisdiction under our Illegal Practice powers.

None of the disclosures have (to date) resulted in resolution via the employer(s). This is either because the nature of the disclosures made them unsuitable for resolution in this way, or because we have been unable to obtain sufficient detail or jurisdiction to consider this option.

During the course of 2017-18, a disclosure that was made to the GOC in the previous year was referred by our Case Examiners for a full Fitness to Practise Committee hearing.

Learning from disclosures

In terms of learning emerging from disclosures, not just from 2017-18 disclosures but also arising from prior disclosures, two key themes have emerged:

- Limitations in regulatory powers make it difficult to investigate concerns where the discloser is anonymous or withdraws, even if there is a public interest in doing so. Although it is possible to find ways to continue with an investigation, this is far less effective than having the cooperation of the discloser. We have no powers of inspection or intervention and the registration of businesses with the GOC is only mandatory in certain circumstances. Although we have powers under the Opticians Act 1989 to demand information, and to proceed with an investigation of our own volition if we considers it to be in the public interest to do so, this is very challenging in the absence of the specific detailed information required for us to be able to do so. Where there has been fuller engagement from disclosers, we have found it easier to proceed to a full fitness to practise investigation.
- Full and effective engagement with the discloser from day one is vital to securing the confidence of the discloser in the regulator's willingness and ability to take the matter forward. Any loss of confidence in the regulator does of course increase the chances of the discloser withdrawing. It is vital that those staff operating as the point of first receipt are trained and experienced in effective management of protected disclosures so that they understand the significance of the disclosure, and the risks (perceived or actual) that the discloser will feel that they are taking in coming forward.

The number of disclosures received by the GOC in 2017-18 is relatively small. In total in 2017-18, we received 495 new referrals, so protected disclosures account for only 2% of these. Although protected disclosure cases are by their very nature more difficult and time-consuming to investigate, they have not directly impacted upon our ability to perform our regulatory functions.

General Osteopathic Council

The General Osteopathic Council regulates osteopathic practice in the UK. Its purpose is to protect the public by ensuring high standards of education, practice and conduct among osteopaths.

Its core functions are:

- Assuring the quality of osteopathic education and training
- Registering qualified professionals on an annual basis and ensuring their continuing fitness to practise
- Setting and promoting high standards of osteopathic practice and conduct
- Helping patients with complaints or concerns about osteopaths and, where necessary, dealing with those complaints through fitness to practise procedures.

Whistleblowing disclosures received from 01 April 2017 to 31 March 2018

From 01 April 2017 to 31 March 2018, the General Osteopathic Council received two whistleblowing disclosures.

Actions taken in response to disclosures

Under review	1
Regulatory action taken	1

One case still being investigated under our FtP procedures. It would not be appropriate to disclose further information at this stage given it is in the early stages and a decision not yet taken to disclose to the registrant pending the receipt of further information.

One concern raised with us had already been identified as a matter for consideration within our education quality assurance procedures.

General Pharmaceutical Council

We regulate pharmacists, pharmacy technicians and pharmacies in Great Britain.

We work to assure and improve standards of care for people using pharmacy services.

What we do:

- Our role is to protect the public and give them assurance that they will receive safe and effective care when using pharmacy services
- We set standards for pharmacy professionals and pharmacies to enter and remain on our register
- We ask pharmacy professionals and pharmacies for evidence that they are continuing to meet our standards, and this includes inspecting pharmacies
- We act to protect the public and to uphold public confidence in pharmacy if there are concerns about a pharmacy professional or pharmacy on our register
- Through our work we help to promote professionalism, support continuous improvement and assure the quality and safety of pharmacy.

Whistleblowing disclosures received from 01 April 2017 to 31 March 2018

From 1 April 2017 to 31 March 2018 the General Pharmaceutical Council received six whistleblowing disclosures.

Actions taken in response to disclosures

Under review	1
Regulatory action taken	5

A number of actions were taken in relation to the six disclosures that we received between 1 April 2017 to 31 March 2018. Each disclosure is considered within established regulatory processes through which a range of outcomes are available including formal fitness to practise proceedings and an inspection.

Action was taken in five cases with one still under consideration.

Three cases were investigated through our fitness to practise process. Once we concluded our enquiries no further action was taken in each of these three cases.

Two of the disclosures were investigated by an individual GPhC inspector and concluded with guidance given to the employer by the inspector.

Learning from disclosures

None of the disclosures had an impact on our ability to perform our regulatory functions and meet our objectives during the reporting period.

We use all concerns raised with us to inform our standards and guidance development.

Protected disclosures also inform our operational processes and approach to understanding what the most appropriate regulatory lever is to achieve the best outcome.

The concerns raised with inspectors and the associated guidance in response to the concern, including those that arise through inspections, are widely shared to ensure learning across the inspectorate. These issues also inform our work on understanding the experiences of pharmacy professionals in the community pharmacy environment.

Health and Care Professions Council

The Health and Care Professions Council (HCPC) is a statutory regulator of health, social work, and psychological professions governed by the Health and Social Work Professions Order 2001. We regulate the members of 16 professions.

We maintain a register of professionals, set standards for entry to our register, approve education and training programmes for registration and deal with concerns where a professional may not be fit to practise. Our role is to protect the public.

Whistleblowing disclosures received from 01 April 2017 to 31 March 2018

From 01 April 2017 to 31 March 2018 the Health and Care Professions Council received six whistleblowing disclosures.

Actions taken in response to disclosures

Closed with no action taken	1
Onward referral to alternative body	5

The majority of the disclosures that we received were from registrants, and came through our Policy and Standards department. These related to issues such as financial incentives, resources, emergency cover, training and scope of practice. As these concerns related to organisations, this therefore fell outside of our regulatory remit and instead were referred to the relevant regulator for action.

We also received a disclosure through our Education department, regarding an education provider's approach to admissions. This was however closed when preliminary investigations uncovered that concerns had been appropriately handled, meaning there was no risk in terms of access to the Register.

Learning from disclosures

Most disclosures we have received during this reporting period relate to matters outside of our statutory remit, and so have had little impact on our ability to perform our regulatory functions and objectives.

We have however decided, in response to some of the disclosures, to provide additional information to our registrants about scope of practice, and how they can assess whether or not activities fall within their remit.

We are also in the process of developing a whistleblowing policy, which will be published later this year.

Nursing and Midwifery Council

We regulate nurses and midwives in England, Wales, Scotland and Northern Ireland. We exist to protect the public. We set standards of education, training, conduct and performance so that nurses and midwives can deliver high quality healthcare throughout their careers.

We make sure that nurses and midwives keep their skills and knowledge up to date and uphold our professional standards. We have clear and transparent processes to investigate nurses and midwives who fall short of our standards. We maintain a register of nurses and midwives allowed to practise in the UK.

Like other professional healthcare regulators, we have a set of governing legislation. Our main legislation is the Nursing and Midwifery Order 2001 ('the Order'); a series of orders made by the Privy Council and Rules made by our Council sit underneath the Order. All our legislation was created under powers in the Health Act 1999, and all of our legislation is secondary legislation. These pieces of legislation work together to form a detailed legal framework that determines how we operate. To change how we operate generally requires legislative change.

Whistleblowing disclosures received from 01 April 2017 to 31 March 2018

In total, 371 pieces of information were assessed by the NMC against the whistleblowing criteria between 01 April 2017 and 31 March 2018. Of these, 60 (16%) we reasonably believe to be 'qualifying disclosures' as they met all of the whistleblowing criteria.

Actions taken in response to disclosures

Regulatory action taken	53
Onward referral to alternative body and regulatory action taken	7

The table above shows the action taken on all 'qualifying disclosures' received between 01 April 2017 and 31 March 2018.

In all 'qualifying disclosures' we have taken action either by way of regulatory action; or both regulatory action and an onward referral to another body. Regulatory action taken on these disclosures is as follows (some disclosures have been dealt with by more than one team and so will be duplicated in the overall number):

- 56 out of the 60 'qualifying disclosures' were dealt with via our Fitness to Practise directorate
- Three disclosures were referred to our Education and Standards directorate
- Three were referred to our Employer Link Service who engaged with employer in respect of the issues raised
- One was referred to our Complaints team as the referrer was not happy with the outcome of a Fitness to Practise case.

We have made onward referrals to a range of other bodies including Care Quality Commission, General Medical Council, Care and Social Services Inspectorate Wales and Social Care Wales.

We still took action on many disclosures where we did not reasonably believe the whistleblowing criteria were met. We either took regulatory action or made referrals to other bodies including Department of Work and Pensions, Care Inspectorate Scotland and Healthcare Inspectorate Wales. The main reasons why information was not treated as a 'qualifying disclosure' was because it did not fall within our regulatory remit or did not meet the public interest criterion.

Learning from disclosures

The disclosures we received during the reporting period did not have an impact on our ability to perform against our regulatory functions and objectives. We were able to use the disclosures to enhance our knowledge and understanding of the wider healthcare landscape.

We have a panel that meets weekly to discuss any disclosures and the appropriate course of action. This panel also looks into any learning from each piece of information we assess. We have been carrying out regular internal awareness training around whistleblowing and are just about to launch an e-learning package for our staff.

As many pieces of information we received did not fall within our regulatory remit or did not meet the public interest test, we are considering clarifying our whistleblowing guidance on our website. We have also implemented a tracking mechanism so that we are able to follow a qualifying disclosure through our Fitness to Practise process; this will enable us to report on the progress of such cases in the future.

Note on data

All measures are activity occurring in the reporting date range. Disclosures received may not equal the number of actions taken because some disclosures may have been received in a previous year or still being investigated at the end of the year.

It is possible that some disclosures have been counted and reported on more than once in this report. This may be due to incidences where one regulator has referred the disclosure on to another regulator or when an anonymous discloser has raised a concern multiple times. Whilst checks are done to mitigate for the latter it is not always possible to determine.

General Chiropractic Council

Park House, 186 Kennington Park Road, London, SE11 4BT

Website: www.gcc-uk.org

General Dental Council

37 Wimpole Street, London, W1G 8DQ

Website: www.gdc-uk.org

General Medical Council

Regent's Place, 350 Euston Road, London, NW1 3JN

Website: www.gmc-uk.org

General Optical Council

10 Old Bailey, London, ED4M 7NG

Website: www.optical.org

General Osteopathic Council

Osteopathy House, 176 Tower Bridge Road, London, SE1 3LU

Website: www.osteopathy.org.uk

General Pharmaceutical Council

25 Canada Square, London, E14 5LQ

Website: www.pharmacyregulation.org

Health and Care Professions Council

Park House, 184 Kennington Park Road, London, SE11 4BU

Website: <http://www.hcpc-uk.co.uk/>

Nursing and Midwifery Council

23 Portland Place, London, W1B 1PZ

Website: www.nmc.org.uk

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Published September 2018

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Whistleblowing

Health Education England is listed as a prescribed person under the Public Interest Disclosure Act 1998. This means that workers at other organisations or companies who wish to raise concerns (often known as 'whistleblowing') relating to the education, training, and sufficient supply of health care workers at their employing organisation or company can do so direct to HEE. Prescribed persons enable workers to make public interest disclosures to an independent body where the worker would prefer not to disclose to their employer direct and the body may be able to take action on the disclosure.

Whistleblowing is the term used when a worker provides information to their employer or a prescribed person relating to wrongdoing. The wrongdoing will usually, though not always, relate to something they have witnessed at work. This is also known as making a disclosure. To be protected by whistleblowing law, a disclosure must be a qualifying disclosure. This means the worker making the disclosure believes that doing so is in the public interest and it relates to one of the following categories:

- Criminal offence
- Breach of a legal obligation
- Miscarriage of justice
- Endangering health and safety
- Damage to the environment
- Covering up wrongdoing in any of these categories

Workers have the right not to be subjected to any detriment as a consequence of making a disclosure. To qualify for protection when making a disclosure to a prescribed person, workers must have a reasonable belief that the matter falls within the prescribed person's remit and that the information disclosed is substantially true. Meeting these criteria is referred to as making a protected disclosure.

Please seek independent advice to help you consider whether you might meet the criteria for making a protected disclosure. This can be obtained from Public Concern at Work, **Speak Up** (contact details in policy below) or a legal representative. 

Further information regarding HEE's role as a prescribed person and how to make a disclosure to us can be found in the HEE Whistleblowing Protected Disclosure Policy.

In addition, prescribed persons are required to report in writing annually on whistleblowing disclosures made to them as a prescribed person (without identifying the workers concerned or their employers). The reporting period runs from 1 April to 31 March each year. HEE did not receive any whistleblowing disclosures as a prescribed person during 2017/18.

Related Documents



HEE Whistleblowing Protected Disclosure Policy (.pdf)

205.07 KB

(<https://www.hee.nhs.uk/sites/default/files/documents/HEE%20Whistleblowing%20Policy.pdf>)

Related Content

Raising and responding to concerns

Instilling the importance of speaking up about patient safety and responding effectively.

[Read more >](#)

Enhancing junior doctors' lives

A comprehensive update report has been published today highlighting the progress made by Health Education England to enhance junior doctors' working lives

[Read more >](#)

Related Documents



(http://www.hee.nhs.uk/our-work/whistleblowing) Health Education

See our local offices (https://twitter.com/NHS_HealthEdEng/lists/local-offices/members) on Twitter.

Jobs at HEE (<http://jobs.hee.nhs.uk>)

Contact us (</about/contact-us>)

Privacy (</about/privacy-notice>)

Terms and conditions (</about/terms-conditions>)



The Health and Safety Executive **Annual Report and Accounts 2017/18**

HC 1090

Table 1 Percentage of investigations completed

	2013/14	2014/15	2015/16	2016/17	2017/18
Fatal Investigations completed within 12 months of primacy (target: 80%)	43%	61%	63%	72%	81%(p)
Non-Fatal Investigations completed within 12 months of incident (target: 90%)	90%	90%	90%	90%	90%(p)
Health and safety concerns investigated – percentage completed within agreed timescale (target: 75%)	65%	70%	77%	79%	80%(p)

We received nearly 20 000 concerns about workplaces and activities within our remit. Of these, 3500 were made by potential **whistleblowers** (employees) and we followed up 2400 that presented a significant risk of harm.

The number and percentage of cases successfully prosecuted by HSE, **holding to account those who failed to meet their obligations**, are shown in Table 2. There have been 16 prosecutions resulting in fines of over £1 million, and 89 HSE prosecutions resulting in custodial and community service/rehabilitation orders.

Table 2 Number of cases for which legal proceedings have been instituted

	2013/14	2014/15	2015/16	2016/17	2017/18
Prosecution cases brought by HSE (COPF in Scotland⁷) where a decision has been reached	604	659	711	593	521(p)
Cases resulting in a conviction (for at least one offence)	568	619	672	554	475(p)
Percentage conviction rate	94%	94%	95%	93%	91%(p)

The data for 2016/17 above has been sourced from official Health and Safety Statistics, full details of which can be seen in www.hse.gov.uk/statistics. The figures shown for 2017/18 are based on live operational data and shown as provisional (p) until official statistics are published in autumn 2018.

We received a **high level of positive feedback** in relation to how we conduct our inspections, from a sample of dutyholders who had received a visit. Of particular note, 91% of respondents said they had taken action as a result of a visit.

7 In Scotland, HSE and local authorities investigate potential offences but cannot institute legal proceedings. HSE and local authorities send a report to the Crown Office and Procurator Fiscal Service (COPFS). COPFS makes the final decision whether to institute legal proceedings and which offences are taken. The year of an offence or case is based on when a verdict has been reached.

Healthcare Improvement Scotland (Prescribed Person) - Annual Report on Disclosures of Information, April 2017- March 2018

Introduction

Healthcare Improvement Scotland's aim is better quality health and social care for everyone in Scotland. We have a range of functions which all help to deliver this aim, including service review, inspection and responding to concerns. We also have a number of key priorities as an organisation, one of which is to provide quality assurance that gives people confidence in the services and supports providers in making improvements.

Healthcare Improvement Scotland has a duty to respond to concerns raised about NHS services by NHSScotland employees, or referred to us by another organisation, which may cause harm to patients and/or staff. One of the routes through which Healthcare Improvement Scotland is made aware of concerns is directly by a member of staff or group of staff under the Public Interest Disclosure Act.

Disclosures made to Healthcare Improvement Scotland (2017-2018)

Number of total disclosures: 9

**Action taken: 1 disclosure was directed through the local whistleblowing process
8 disclosures required further information to be sought from the NHS Board**

Number of disclosures where further review was required: 1

Our Response

During the period April 2017-March 2018, Healthcare Improvement Scotland received nine disclosures from NHSScotland staff. In response to all but one of these disclosures, Healthcare Improvement Scotland sought information from the relevant NHS board to understand whether the NHS board was aware of the issues raised and, where applicable, to seek evidence of how the concerns had been addressed and the associated timescales. For the remaining case we advised the complainant to follow their NHS board's whistleblowing procedures in raising their concerns locally.

Following a review of the information provided by the relevant NHS board, we were satisfied that no further detailed review was required in relation to seven of these disclosures. However, in relation to one disclosure it was agreed that further review was required. This involved detailed discussions with NHS board representatives and the review of additional evidence. An external review team (made up of representatives from NHSScotland and the public) then visited the NHS board to meet with staff to hear their views. The conclusions of this work, including areas for improvement, were published on our website following the review (www.healthcareimprovementscotland.org/our_work/governance_and_assurance/responding_to_concerns/nhs_ayrshire_and_arran_aug_18.aspx).

In undertaking this work we are providing public assurance that concerns are being addressed. We also, through our assessments and investigation process, can identify areas for improvement. The NHS board is required to respond to these, and progress is monitored until actions are implemented and improvements are made.

Office for Standards in Education,
Children's Services and Skills



Annual Report and Accounts 2017–18

Annex C: Whistleblowing disclosures report (social care)

From 1 April 2017 to 31 March 2018

HMCI is a 'prescribed person' under The Public Interest Disclosure (Prescribed Persons) Order 2014 which provides the statutory framework for protecting workers from harm if they blow the whistle on their employer. Workers may tell the relevant prescribed person about suspected wrongdoing they believe may have occurred, including crimes and regulatory breaches. Passing information like this is known as making a 'disclosure'. HMCI is prescribed under the order in relation to the children's social care services listed in Figure 1.

Figure 1 The number of workers' disclosures received in the reporting period, which we reasonably believe are qualifying disclosures²

The children's social care services that the disclosure related to	Number of disclosures received ³
Adoption support agencies	0
Cafcass	0
Children's homes	176
Independent fostering agencies	10
Local authority children's services ⁴	78
Residential family centres	3
Residential holiday schemes for disabled children	0
Welfare of children provided with accommodation by boarding schools and further education colleges	3
Welfare of children provided with accommodation by residential special schools	1
A third party provider to which a local authority has delegated functions	0
Voluntary adoption agencies	0
Total	271

Figure 2 Summary of the action Ofsted has taken in respect of the above qualifying disclosures

Action taken in the reporting period	Number of disclosures received ⁵
Referred the matter to the child protection team in the relevant local authority.	23

² To be covered by the whistleblowing law, the disclosure must be a 'qualifying disclosure'. This is any disclosure of information which, in the reasonable belief of the worker making the disclosure, is made in the public interest and tends to show that one or more of the following has occurred, is occurring or is likely to occur: a criminal offence; a breach of legal obligation; a miscarriage of justice; danger to health or safety of any individual; damage to the environment; or the deliberate covering up of wrongdoing in these categories.

³ Sometimes, we receive concerns from more than one whistleblower about the same issue in a service, in these circumstances we may record these in a single record so that we can respond to the concerns holistically.

⁴ Local authority functions as outlined in the Schedule to the Public Interest Disclosure (Prescribed Persons) Order 2014.

⁵ It is possible a disclosure received resulted in more than one type of action.

We refer child protection concerns to the children's social care department of the local authority where the child lives as they have overarching responsibility for safeguarding and promoting the welfare of all children and young people in their area.	
Contacted the appropriate person at the children's social care service and asked them to investigate and respond to Ofsted with more information. We do this because we need further information to make a decision about possible further action required.	154
Undertook a compliance visit (this action applies only to services that Ofsted regulates) if we considered the registered person is failing, or has failed, to comply with a regulatory requirement.	31
Reviewed the timing of the next inspection/visit and brought forward if appropriate.	30
Held the information for follow-up at the next planned inspection/visit. We review information received along with a range of other intelligence gathered about a service to determine when we need to inspect and what lines of enquiry we need to follow up on.	147

Figure 3 Summary of the overall categories under which the whistleblowing disclosures were classified

Category	Number of disclosures received⁶
Concerns that a specific child or children may be at risk of harm	42
Concerns that there are wider or systemic failures in safeguarding practice	84
Concerns that children are not receiving the right quality of care but that do not suggest a risk to their safety	96
Concerns that a social care service is not meeting regulatory requirements	49

We use the categories above to help us assess the urgency of the issues disclosed and take action within appropriate timescales.

Ofsted receives whistleblowing disclosures in letters, emails, and via our helpline. Sometimes, the information is provided anonymously.

⁶ It is possible a disclosure received includes concerns from more than one category and we have used the category that provides the best fit.

Homes and Communities Agency

Background

The Homes and Communities Agency (HCA) was until 30 September 2018 responsible for the regulation of registered providers of social housing through its Regulation Committee. It is a prescribed person under the [The Public Interest Disclosure \(Prescribed Persons\) Order 2014](#), as amended, for the purpose of receiving “workers’ disclosures” (sometimes referred to as whistleblowing) in connection with the conduct of the business of registered providers of social housing.

All prescribed persons must, under the [Prescribed Persons \(Reports on Disclosures of Information\) Regulations 2017](#), make an annual report on the workers’ disclosures it has received.

Workers’ disclosures

Between 1 April 2017 and 31 March 2018, the following workers’ disclosures were received by the Homes and Communities Agency in its capacity as the Regulator of social housing, about the conduct of the business of registered providers of social housing in England. The action taken is also set out.

Number of workers’ disclosures received	Number of workers’ disclosures subject to initial review	Number of workers’ disclosures referred for more detailed consideration	Number of workers’ disclosures taken to further investigation	Number of workers’ disclosures resulting in or contributing to regulatory action being taken
6	6	6	5	2

Impact of workers’ disclosures

There was no impact from the above disclosures on the Homes and Communities Agency’s ability during the reporting period to perform its functions as the regulator of social housing or its ability to meet its objectives.

What we investigate and next steps

We investigate the most serious and sensitive incidents and allegations involving the police.

We also carry out investigations into serious complaints and conduct matters relating to staff at:

National Crime Agency (NCA)

Gangmasters and Labour Abuse Authority (GLAA)

Home Office

Her Majesty's Revenue and Customs (HMRC)

Mayor's Office for Policing and Crime (MOPAC)

Police and Crime Commissioners (PCCs)

We are independent of the police, government and interest groups.

Most complaints about the police are dealt with by the relevant police force. Each force has a separate department that oversees complaints. These are called 'professional standards departments' (PSDs).

By law, forces must refer certain matters to us, for instance:

certain complaints made to their force – such as those that include an allegation of serious corruption or serious assault

indications of misconduct by police officers and staff – for example an indication that a criminal offence has been committed or that a serious injury has been caused

everytime someone had direct or indirect contact with the police when, or shortly before, they were seriously injured or died. However, forces only need to refer cases where the contact may have caused or contributed to the death or injury.

Further information about what police forces must refer to us is available in **our** statutory guidance.

What do we do after we receive a referral from the police?

What happens during an independent IOPC investigation?

What happens when we complete our investigation?

Who receives a copy of our report?

For more information about specific investigations or our wider work the following pages may be of interest:

Our investigations and reports

Investigation summaries and learning recommendations

News releases

Who we are

Reports from prescribed persons

During 2017-18 we received two reports we identified as being protected disclosures from prescribed persons, as per the Prescribed Persons (Reports on Disclosures of Information) Regulations 2017. In one case further action was taken and the disclosure was dealt with as part of an ongoing IOPC independent investigation.

The disclosures did not affect our ability to perform our functions and achieve our objectives.

The IOPC has statutory functions to secure public confidence in the police complaints system. We independently investigate the most serious and sensitive allegations involving the police. We are an appeal body for police complaints handled by police forces. We oversee the complaints system and ensure learning and recommendations arising from our investigations and appeal work are communicated to police forces. Our objective is to improve public confidence by ensuring that allegations are properly investigated, that the police are held to account where necessary, and that forces improve police practice by learning from incidents.

[About the ICO](#) / [Our information](#) /

Whistleblowing disclosures

Share 

1 April 2017 to 31 March 2018

The ICO is a 'prescribed person' under the Public Interest Disclosure Act 1998, meaning that whistleblowers are provided with protection when disclosing certain information to us.

The Prescribed Persons (Reports on Disclosures of Information) Regulations 2017 require prescribed persons to report annually on whistleblowing disclosures made to them.

The ICO has published [advice for individuals considering making a whistleblowing disclosure](#).

Disclosures

Under section 42 of the Data Protection Act 1998 (DPA), any person who is, or believes that they are, directly affected by the processing of personal data, can ask the Information Commissioner to consider whether the processing is likely to comply with the law. On receiving such a request, the Commissioner is obliged to consider the concern and make an assessment. This is regardless of whether the request for assessment is from a whistleblower or from any other person.

The number of whistleblowing disclosures made to the ICO during the period 1 April 2017 to 31 March 2018 was 145. All information provided was recorded and used to develop our overall intelligence picture, in line with our [Information Rights Strategic Plan 2017-2021](#).

Further action was taken on 102 of the above disclosures. Further action may result in referral to appropriate departments for further consideration, referral to external organisations (including other regulators and law enforcement) or consideration for use of our enforcement powers. After review and assessment 43 of the 145 disclosures resulted in no further action taken at that time.

From 1 April 2017 to 31 March 2018 further action on the 102 disclosures resulted in:

- 82 cases being assessed within various departments of the ICO,
- 3 cases being taken into consideration for ongoing ICO investigations and/or projects, and
- 17 cases being recorded for future intelligence development opportunities.

Action taken

After receipt of a concern, the ICO will decide how to respond in line with our Regulatory Action Policy. Actions we have taken are [published on our website](#).

In all cases, we will look at the information provided by whistleblowers alongside other relevant information we hold. For example, if an organisation reports a breach to us we may use information provided by a whistleblower to focus our follow-up enquiries. More broadly, we may use information from whistleblowers to focus our liaison and policy development within a sector, using the information to identify a particular risk or concern.

To find out more about the work we do, statutory powers and areas of responsibility please view our [Legislation we cover page](#).



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Whistleblowing and raising a concern policy

Published: 27 September 2018

Freedom of information class: [About Registers of Scotland \(https://www.ros.gov.uk/about/freedom-of-information#about\)](https://www.ros.gov.uk/about/freedom-of-information#about)

Whistleblowing and raising a concern policy

The Public Interest Disclosure Act 1998

<http://www.legislation.gov.uk/ukpga/1998/23/contents>) was designed to protect employees who make certain disclosures of information in the public interest and to allow those employees who “blow the whistle” on any of the instances of wrongdoing that are set out in the Act, to complain to an employment tribunal if they suffer any form of detriment for doing so. Alongside the Act, employees have the protection set out in the Civil Service Code.

- [Whistleblowing procedure \(https://www.ros.gov.uk/about/publications/policy-and-guidelines/2017/whistleblowing-procedure\)](https://www.ros.gov.uk/about/publications/policy-and-guidelines/2017/whistleblowing-procedure)
- [Whistleblowing FAQ \(https://www.ros.gov.uk/about/publications/policy-and-guidelines/2017/whistleblowing-faq\)](https://www.ros.gov.uk/about/publications/policy-and-guidelines/2017/whistleblowing-faq)

Whistleblowing requests 2017-18

- **i** During the reporting period for 2017-18, Registers of Scotland received 0 whistleblowing disclosures.

Lord Advocate, Scotland

Crown Office and Procurator Fiscal Service has confirmed to BEIS that the Lord Advocate, Scotland has no disclosures to report for 2017-18.

Monitor: annual report and accounts 2017/18

HC1347

NHS Foundation Trust – to be our strategic partner, and involved eight others at different stages of improving their services, to create a **national mental health improvement model**.¹⁶ We involved people who use services, their families and carers throughout. The model reflects the challenges and lessons learned from setbacks, as well as from successful innovations and improvements. Implementing all its good practice examples would produce a world-class mental health service.

Eliminating out-of-area placements

We set up a support team with NHS England to help local health systems eliminate inappropriate out-of-area placements for acute mental health inpatient care by April 2021. It provides expert senior clinical input, and facilitated more than 15 events between autumn 2017 and March 2018.

In October 2017 we set up our joint **national mental health safety improvement programme** with CQC, to be rolled out during 2018/19. It will offer enhanced support to trusts that CQC identifies as facing the greatest safety challenges and quality improvement support to all trusts on issues of common concern, such as restraint and restrictive practice. The programme will build on our work with nine trusts on the national mental health improvement model.

To prepare for our forthcoming **learning disability improvement standards** for trusts, we completed visits to all NHS providers of specialist learning disability

services. We piloted integrating the standards with national quality checks in five trusts. We are also increasing support and oversight of learning disability and autism-related issues in acute trusts. In partnership with four trusts – one in each region – we worked with the rights-based organisation Changing Our Lives to create ‘improvement grab guides’, which focus on how to improve a specific area of care. With four other trusts and a film company we produced short videos to relay specific improvement messages.

NHS staff continue to raise **whistleblowing** concerns with us, usually when they are unhappy with the response they have received from their employer or are worried they may suffer detriment if they raise their concern directly with their employer.

¹⁶ *Valued care in mental health: improving for excellence – a national mental health improvement model*. March 2018. <https://improvement.nhs.uk/resources/valued-care-mental-health-improving-excellence/>

Most cases we received related to bullying and harassment, patient safety, and issues about leadership and the board. The cases indicate that barriers remain to staff feeling free to raise their concerns. We are working with the National Guardian's Office (NGO) to remove these barriers. It is a key part of the NGO's role to provide leadership and advice for Freedom to Speak Up guardians on best practice, to enable staff to speak up safely. We now have Freedom to Speak Up guardians in every trust in England, and with NGO have jointly published guidance and a self-assessment tool to help boards understand their role in ensuring staff feel able to speak up. Where the NGO has conducted a case review into speaking up at a trust, we have supported the trust with its resulting action plan. We are also piloting how we can use data to identify trusts that may need additional support with freedom to speak up.

We take the cases we receive very seriously and took action in 82% of them (see Figure 1). This included 14 cases (12%) that resulted in external investigations overseen by us and/or an external 'well-led' review into the trust's leadership and governance. We took no action in 18% of cases because the individual raising a concern did not provide enough information, we did not receive consent to use the information provided, or the information related solely to an individual employment matter, over which we have no jurisdiction.

We noticed an increase in issues raised about board members and by board members. Some resulted in external investigations overseen by us, followed by support and/or regulatory action to ensure that trust boards function well and have robust plans to address concerns.

At Wirral University Teaching Hospital NHS Foundation Trust, we received concerns from several executive directors about the chief executive and the chair. We commissioned an external investigation into these concerns, and our handling of them. The ensuing report identified that a number of governance failings at the trust during 2017 led to the breakdown of relations between the executive directors, non-executive directors, the former chair and former chief executive, and staff at all levels felt unable to speak freely about concerns they held. The report found we took timely and appropriate action to support trust executives once concerns had been raised about the trust. The trust now has a new interim chief executive and interim chair.

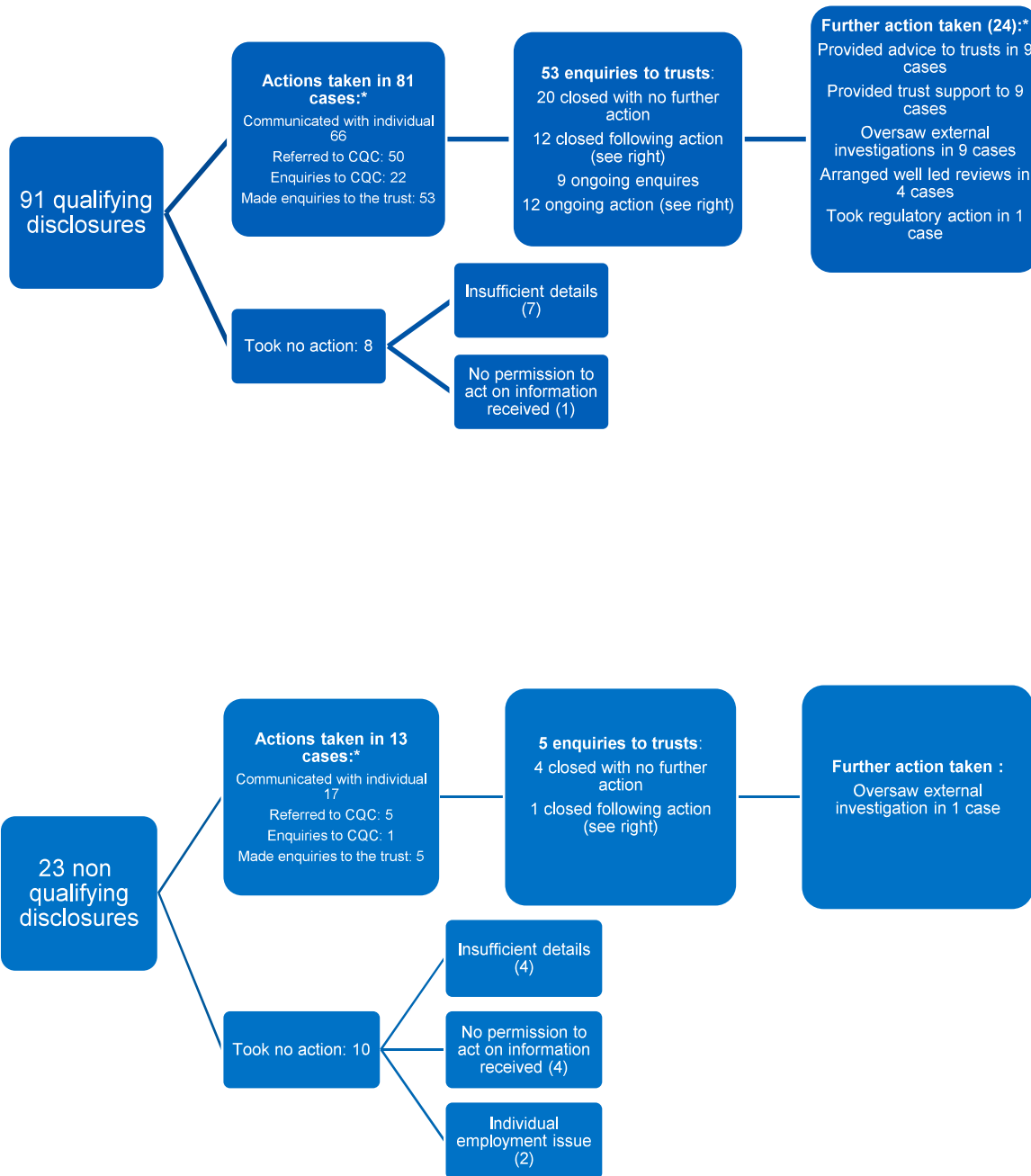
We are piloting our support scheme to help whistleblowers return to work. This follows Sir Robert Francis's recommendation in *Freedom to speak up – a review of whistleblowing in the NHS* to help whistleblowers find alternative employment in the NHS and set out what this should include. In September 2017 with input from stakeholders, including whistleblowers, we launched a pilot scheme to cover the report's minimum requirements, and we continue to work with these stakeholders as the pilot scheme progresses. The scheme includes:

- an application process with independent panel assessment of each application
- support to successful applicants from an external provider to develop and implement an action plan that will help them return to employment.

Many NHS employers have been supportive in offering access to library facilities, training, and shadowing and placements for those ready for these opportunities. The pilot scheme is currently supporting 10 whistleblowers. We have commissioned independent external evaluation so that lessons from the pilot can be applied to the development of the main scheme, which will be launched later in 2018. More detail is available on our website.¹⁷

¹⁷ <https://improvement.nhs.uk/resources/freedom-to-speak-up-whistleblowers-support-scheme/>.

Figure 1: Whistleblowing cases received in 2017/18



*NB: multiple actions may have been taken in some cases: for example, we may have overseen an external investigation and then arranged a well-led review.

NHS Trust Development Authority: Annual report and accounts 2017/18

HC1348

Tyne and Wear NHS Foundation Trust – to be our strategic partner, and involved eight others at different stages of improving their services, to create a **national mental health improvement model**.¹⁶ We involved people who use services, their families and carers throughout. The model reflects the challenges and lessons learned from setbacks, as well as from successful innovations and improvements. Implementing all its good practice examples would produce a world-class mental health service.

Eliminating out-of-area placements

We set up a support team with NHS England to help local health systems eliminate inappropriate out-of-area placements for acute mental health inpatient care by April 2021. It provides expert senior clinical input, and facilitated more than 15 events between autumn 2017 and March 2018.

In October 2017 we set up our joint **national mental health safety improvement programme** with CQC, to be rolled out during 2018/19. It will offer enhanced support to trusts that CQC identifies as facing the greatest safety challenges and quality improvement support to all trusts on issues of common concern, such as restraint and restrictive practice. The programme will build on our work with nine trusts on the national mental health improvement model.

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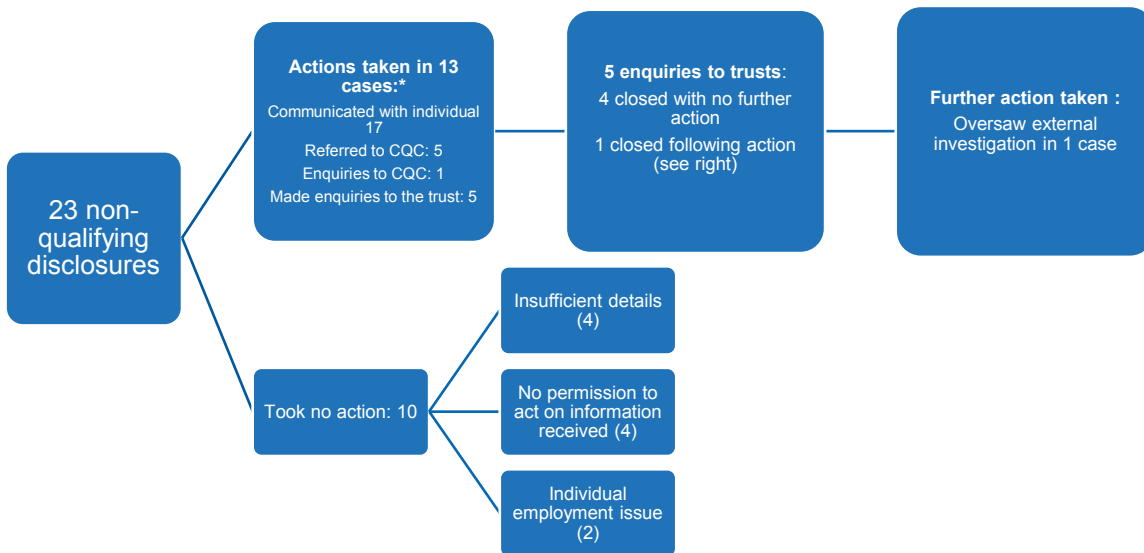
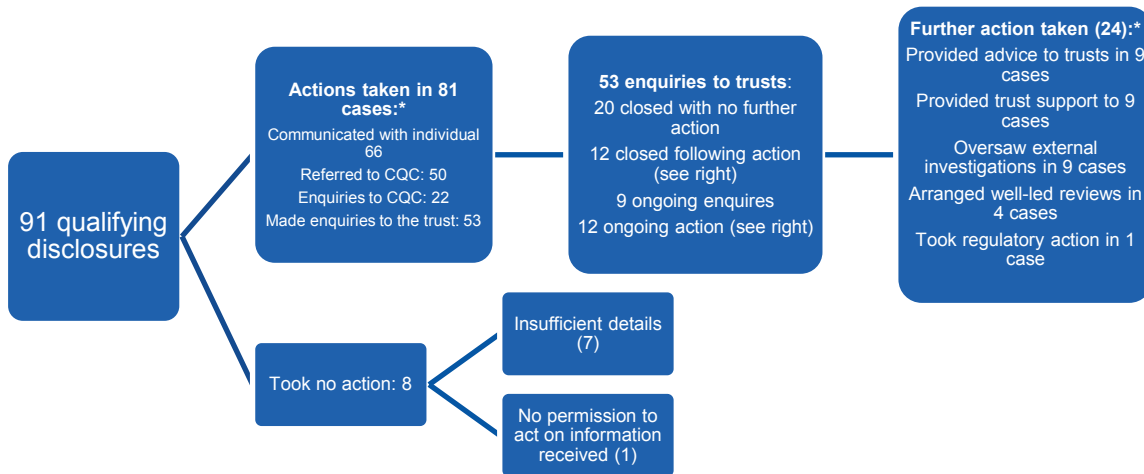
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Figure 1: Whistleblowing cases received in 2017/18



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National Crime Agency

BEIS has not yet received a 2017-18 report from the NCA.

Our 2017/18 Annual Report

Health and high quality care for all,
now and for future generations

HC 1238

Appendix 3: Our prescribed person whistleblowing report for 2017/18

In April 2016, NHS England became a Prescribed Person under the Public Interest Disclosure Order 1999. This means that primary care service staff working in GP surgeries, opticians, pharmacies and dental practices, can raise concerns to us (often known as 'whistleblowing') about inappropriate activity.

Whistleblower protection

Under the statutory protection afforded to workers who raise such concerns, whistleblowing is the term used when a worker provides information to their employer or a prescribed person concerning wrongdoing. To gain the statutory protection under the legislation, the worker making the disclosure must reasonably believe:

- That the disclosure is in the public interest; and
- It falls into one of the following categories:
 - Criminal offence.
 - Breach of any legal obligation.
 - Miscarriage of justice.
 - Endangering of someone's health and safety.
 - Damage to the environment.
 - Covering up wrongdoing in the above categories.

Where the worker raises their concerns directly with a Prescribed Person, such as NHS England, the worker must also reasonably believe that the fault falls within the remit of the prescribed person in question.

Workers have the right not to be subjected to any detriment on the ground that they have made such a "protected disclosure" to their employer or a prescribed person.

NHS England's role as a Prescribed Person

NHS England's remit, in relation to its role as a Prescribed Person, relates to the arrangements for contracting and commissioning of GP, dental, ophthalmic and pharmaceutical services.

Where concerns are raised to us by primary care workers about these issues, we are required to produce annual reports of the disclosures of information made to us, but without identifying the workers concerned or their employers.

In addition, NHS England is committed to assigning any concerns raised for further investigation and providing support to individuals that have suffered fiscal or professional detriment as a result of whistleblowing. This includes signposting whistleblowers to the correct organisation responsible for dealing with their concerns.

Qualifying disclosures received by NHS England during 2017/18 and action taken

Between 1 April 2017 and 31 March 2018, 66 whistleblowing disclosures were made to us relating to primary care organisations.

The table below summarises how we dealt with the disclosures:

Signposted to an alternative body	Investigated – no remedial action required	Investigated and action taken during 2017/18	Under investigation	No investigation required
3	7	7	43	6

As a result of those investigations, we have agreed changes with primary care providers designed to improve services delivered to patients. These actions include:

- Staff required to undertake additional training to address issues which have become apparent as a result of the concerns raised to NHS England and the subsequent investigation.
- GP practice merged with a neighbouring surgery to ensure that there is sufficient access for patients.
- Additional performance monitoring regimes implemented.
- Improvements to the management of controlled drugs.
- Decision made to cancel the NHS contract for the practice.

In addition, following a period of consultation with staff working in primary care, we have issued Freedom to Speak Up guidance for primary care providers. Key measures in the guidance include:

- Each NHS primary care provider should name an individual, who is independent of the line management chain and is not the direct employer, as the Freedom to Speak Up Guardian. They are expected to raise awareness of how staff can share a concern and offer support to staff who do so.
- NHS primary care providers should be proactive in preventing any inappropriate behaviour, such as bullying or harassment, towards staff who raise a concern.
- All NHS primary care providers were required to review and update their local policies and procedures by September 2017, to align with the new guidance.

The National Society for the Prevention of Cruelty to Children

The NSPCC shares whistleblowing information with other agencies where there are safeguarding concerns to investigate and take forward. It does not investigate or follow up cases as that is not its service remit. Callers are advised what to do in order to protect themselves further through legal support.

In summary, for 2017-18 the Whistleblowing helpline responded to 427 contacts. Of these contacts:

- 153 were enquiries (basic questions around Whistleblowing)
- 163 resulted in complex advice provided to the person
- 91 resulted in referrals (safeguarding concerns) being sent to external agencies
- 20 were updates to existing referrals.

Annual report and accounts

NHS fraud. Spot it. Report it.
Together we stop it.

2017-18

www.cfa.nhs.uk



Information governance

Engagement with staff and external stakeholders takes place through a variety of channels. During the reporting period data was collected, retained and stored subject to the requirements of the Data Protection Act (DPA) 1998. Registration as a new special health authority was completed. During the reporting period we processed 4 subject access requests through to completion and 3 requests where proof of ID was requested but not provided and the request closed. All requests were responded to within the required time frame. During this period no charges were made in respect of these requests.

The NHSCFA is also subject to the requirements of the Freedom of Information Act (FOI) 2000. During the reporting period we processed 7 requests under FOIA (and handled 2 additional requests as business as usual) within the required time frames.

A data breach log is maintained, and 3 data breaches were reported to the Data Protection Officer. In all cases immediate action was taken to rectify the issues.

The NHSCFA receives allegations of fraud through the Fraud and Corruption Reporting Line and online reporting form, by verbal communications, and in email or written format. The organisation is also a prescribed person under the Public Interest Disclosure Act (PIDA) 1998. No disclosures were made under PIDA during the reporting period.

Complaints management

Following its launch the NHSCFA published its complaints policy and also provided staff with an internal guidance document. During our first five months of

operations we learnt a number of lessons regarding how we manage complaints, the processes we follow and how we liaise with all parties involved. A review of the complaints process has commenced. During the reporting period we received 9 complaints.

Governance and assurance

An internal governance and assurance function was embedded during the first five months of operation of the NHSCFA. This function provides assurance that risk and operating procedures are managed effectively across the organisation. A governance and assurance strategy was launched and reviewed. A set of operating procedures was adopted and a programme of governance and assurance work was identified and delivered.

Strategy, policy and guidance documents

Since the launch of the NHSCFA a range of strategy, policy and guidance documents were drafted and approved to underpin all areas of work undertaken. These include those published on the NHSCFA's external website. In line with its Standing Financial Instructions, the NHSCFA has reviewed its own counter fraud and security management measures. Taking a risk based approach, workplans are being formulated in respect of each of these to identify activities for implementation in 2018-19.



Office for
Nuclear Regulation

**OFFICE FOR NUCLEAR
REGULATION
ANNUAL REPORT AND
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We received 56 requests under the Freedom of Information Act 2000 (FOI) and/or the Environment Information Regulations 2004 (EIR). Three requests were subject to an internal review and all of these were completed satisfactorily within the required 20 working days upholding the original decision.

Three complaints (originating from outside ONR and are about ONR, in relation to a work activity for which ONR has regulatory responsibility) and 36 concerns (from members of the public or employees relating to a wrong doing in a workplace in relation to a matter that ONR regulates) were received. All complaints and concerns were completed to the third parties' satisfaction.

There were four requests relating to the Data Protection Act 1998, both relating to individuals asking for details of their own vetting information. Two were completed satisfactorily within the required 40 working days timescale and two are in progress.

Whistleblowing

Six-monthly reports were considered by EMT and ARAC.

Internal - There were no internal cases raised in 2017/18. However, the policy was re-issued to directors to remind them of their obligations under the policy and lessons learned from previous disclosures.

External - ONR, as a prescribed body under the law, received three cases in early 2018 with regards to matters that ONR regulates. These are currently under investigation.

There had been one outstanding case from 2016/17 relating to a security issue but this was resolved in October 2017 to the satisfaction of those involved and this had not raised any specific concerns for ONR.

ONR recognised that the definitions of a whistleblowing case, concern and complaint publicised on the website could be clearer and this information has now been updated to provide further clarity.

Setting objectives and operational performance management

The ONR Corporate Plan 2017/18 was produced following engagement with colleagues across the whole of ONR. It set out ONR's objectives and key performance indicators, agreed by the Board, approved by the Secretary of State for Work and Pensions and published on ONR's website:

- <http://www.onr.org.uk/documents/2016/strategic-plan-2016-2020.pdf>

The plan included ONR's corporate milestones and key performance indicators. Performance against these has been closely monitored by the Board and the EMT.

Four standing reports were submitted to each Board meeting to enable each executive member to demonstrate accountability for their area of responsibility:

- Chief Executive Report - to provide assurance to the Board that ONR is being properly managed to deliver its strategic intent and to consider corporate risk mitigation;
- Chief Nuclear Inspector Report - to provide assurance to the Board that ONR is meeting its statutory regulatory obligations;



The Office of Communications Annual Report & Accounts

For the period 1 April 2017 to 31 March 2018



Independent assurance over internal controls

Ofcom outsources its internal audit function to KPMG. KPMG carries out its work in line with the Annual Internal Audit Plan that is approved by the Risk and Audit Committee on an annual basis. The plan is informed by interviews held with stakeholders, a periodic assessment of risk management arrangements, evaluation of the previous year's internal audit results, and an ongoing consideration of the environment in which Ofcom operates. During 2017/18, 11 internal audits were undertaken, including financial controls, Ofcom's new funding model, cost allocation and tariff setting, mobile spectrum auction readiness review, the 700 MHz clearance project, spectrum licensing including PMSE, IT General Controls, Business Continuity Planning, Disaster Recovery and Major Incidence Management, Information Security, Fraud risk and a high-level evaluation of the Governance Statement.

Public interest disclosure

The Public Interest Disclosure Act 1998 gives legal protection to employees against being dismissed or penalised by their employers as a result of disclosing information which is considered to be in the public interest. Ofcom is a 'prescribed person' as defined under the Public Interest Disclosure (Prescribed Persons) Order 2014.

As such, individuals working outside Ofcom, but in the communications sector, may contact Ofcom if they have concerns about possible wrongdoing at their own organisation. During 2017/18 Ofcom did not receive any disclosures under the Public Interest Disclosure Act 1998 or otherwise.

Statement of Accounting Officer

As Chief Executive and Accounting Officer I have overall responsibility for reviewing the effectiveness of the system of internal control. Group Directors have responsibility for the development and maintenance of the internal control framework. This framework informs the work of internal audit and comments made by external auditors in their management letter and other reports.

The Board has maintained strategic oversight and review of internal control and risk management arrangements through regular reports by directors on their areas of responsibility, and through specific reports for discussion at Risk and Audit Committee and Board meetings.

During the year, the Risk and Audit Committee has considered:

- individual internal audit reports, management responses and progress against any actions raised;
- the internal auditor's annual report and opinion on the adequacy of our internal control system;
- National Audit Office reports and recommendations;
- regular reports on Ofcom's strategic risk register, including the identification of risks to the organisation's system of internal control and information about the controls that have been put in place to mitigate these risks; and
- any additional assurance reports that have been requested by the Risk and Audit Committee.

To my knowledge, and based on the advice I have received from those managers with designated responsibilities for managing risks and the risk management system, I am not aware of any significant internal control findings for 2017/18.

Sharon White
Chief Executive and
Accounting Officer

19 June 2018

Annual Report and Accounts

2017 to 2018

HC 1421

Complaints and whistleblowing

We updated our whistleblowing procedures and forms in April 2017, ahead of the summer series, to make the reporting of wrongdoing or malpractice easier. We sent a suite of posters to every secondary school and college in England as part of a campaign to raise awareness of the importance of reporting suspected incidents.

Whistleblowing disclosures

Ofqual is designated as a prescribed person for whistleblowing and workers can contact Ofqual about matters in relation to which we exercise functions under the Apprenticeships, Skills, Children and Learning Act 2009. The Prescribed Persons (Reports on Disclosures of Information) Regulations 2017 (the Regulations) require prescribed persons to produce an annual report on whistleblowing disclosures made to them by workers. This reporting period is for the period 1 April 2017 to 31 March 2018.

Ofqual received 50 whistleblowing disclosures during the reporting period which we considered were 'qualifying disclosures' and which concerned matters in relation to which we exercise functions under the Act. All 50 disclosures were referred to the relevant awarding organisation for further action. Awarding organisations carried out investigations in 43 of the 50 disclosures. Investigations could not be carried out for 7 disclosures as the information was not detailed enough to allow an investigation. Of the submissions investigated: 8 resulted in further action being taken, 17 found no evidence to substantiate the claims and 18 are still ongoing.

The disclosures received have provided us with information and intelligence to ensure that standards in regulated qualifications are maintained and allowed us to discharge our statutory obligations.

Ofqual did not receive notice of any whistleblowing disclosures during the past year which related to Ofqual.

Complaints

Complaints about Ofqual

Ofqual received two complaints in the reporting period, both of which were made by awarding organisations in relation to regulatory decisions made by Ofqual. Neither of these was upheld.

Complaints to the Parliamentary Ombudsman

No complaints relating to Ofqual were accepted by the Parliamentary Ombudsman in the reporting period.

Complaints about awarding organisations

Ofqual aims to acknowledge complaints within three working days and provide a final response within 40 working days in 80% of cases.

During the reporting period, we acknowledged 98% of complaints within three working days and provided a final response within 40 days in 80% of cases. The average number of days to close a complaint was 31 days.

Overall, we handled 223 complaints about awarding organisations. We changed our approach to dealing with complaints about awarding organisations during the year to also establish if there are indications of non-compliance with our rules. Where there are indications of non-compliance we classify our outcome as either 'Not Assured' or 'Partly Assured'. We were not assured or partly assured in relation to 20 complaints about awarding organisations during the year. These awarding organisations were referred to our relevant Standards teams for further consideration of potential non-compliance.

Where a complainant is unhappy with the outcome of their complaint, they can request an internal review. We carried out internal reviews in three cases, which related to the way we investigated the original complaint, two of which were upheld. Additionally, one request for an internal review, which we received during the year 2016-17, was concluded during the performance year 2017-18 which was upheld.

ANNUAL REPORT AND ACCOUNTS 2017-18

JUNE 2018



HC1098

DIRECTORS' REPORT

ORR is a non-ministerial government department. ORR is independent of, but works closely with, the Department for Transport (DfT).

Executive and Non-Executive members of the ORR Board are listed on page 38.

Details of company directorships and other significant interests held by the Board are available on request.

Prompt payment

We are committed to the prompt payment of our suppliers and seek to pay all valid invoices as soon as possible. During 2017-18 100% of invoices were paid within 30 days (100% in 2016-17) and 95% paid within 10 days (95% in 2016-17).

Better regulation

Our work on better regulation in 2017-18 is explained on page 27.

Personal data related incidents

Personal data related incidents are covered in the Governance Statement on page 44.

Complaints

Our customer correspondence team handles all complaints and general enquiries received by ORR. The majority of correspondence received from members of the public and stakeholders concerns the rail industry² and covers a wide range of topics, for example safety concerns, railway engineering work, and punctuality of services. ORR is represented at the cross-government complaint handlers' forum and the Department for Transport complaint handlers' working group.

We aim to respond to 95% of all such enquiries within 20 working days of receipt. In 2017-18 we received 1,433 complaints and general enquiries, of which 1,286 (90%) were cleared within the deadline.

In 2017-18 we received one whistleblowing concern raised by railway employees via the Employment Tribunal ET1 notification. The issues raised are subject to an ongoing police investigation. We also received 149 enquiries relating to employee health, safety and welfare and three enquiries regarding employee employment matters. These 152 enquires generated 188 concerns. The 149 enquiries relating to health, safety and welfare concerns were looked into by ORR's Railway Safety

Directorate in accordance with our published guidance: http://orr.gov.uk/__data/assets/pdf_file/0016/6442/safety-complaints-policy-and-guidance-web.pdf

As well as raising issues through safety representatives and their trade union, railway employees can raise concerns through CIRAS, a confidential report line: <http://www.ciras.org.uk/>.

Freedom of Information

In 2017/18 we received 140 requests of which 137 (98%) were responded to within 20 working days following receipt. Further details are published by the Cabinet Office: <https://www.gov.uk/government/collections/government-foi-statistics>

Formal complaints received about ORR

If someone is unhappy with the service they have received from ORR, they can raise a formal complaint in writing with the head of the customer correspondence team. Their complaint will be acknowledged and passed to the relevant Director to respond. If the complainant remains unhappy they can escalate their concern to the Parliamentary and Health Services Ombudsman (PHSO). In 2017-18 two formal complaints against ORR were received. These were in regard to our response and handling of a cancelled steam train tour involving the Flying Scotsman, and an allegation of poor passenger information leading to passengers having to run for their train at London Victoria. The latter has been referred to the PHSO.

Auditors

The Comptroller and Auditor General carries out the audit of ORR's financial statements. The notional cost of auditing the financial statements was £36,000 (2016-17: £40,000). No remuneration, actual or notional, was paid to the National Audit Office for non-audit work (2016-17: none).



Joanna Whittington
Accounting Officer

11 June 2018

process, allowing the Executive to monitor the delivery of ORR's objectives. This is drawn from a business management system which requires the input of milestones against activities contributing to ORR's strategic objectives. The Board receives quarterly reports on: progress against business plan commitments; service standards, which we use to monitor the performance of some of our public-facing 'business as usual' work; and unplanned or re-prioritised work.

I delegate budgets to Directors as appropriate and review their expenditure against these delegated budgets, and their progress against business milestones, on a monthly basis. Each Director has a number of officers to whom s/he may sub-delegate financial and purchasing authority. Records of these authorities and associated signatures are maintained within the finance team and are refreshed as required.

Whistleblowing

ORR's whistleblowing policy is designed to provide an avenue for staff to raise concerns about perceived wrongdoing, illegal conduct or fundamental misconduct that may endanger others. Our 'whistleblowing and raising a concern' policy is available to all staff on our intranet. There were no whistleblowing complaints during 2017-18.

ORR is a prescribed person under the Public Interest Disclosure Act 1998. Prescribed persons are people and bodies you can blow the whistle to rather than your employer. People are able to contact ORR regarding concerns over the provision and supply of railway services and any other activities in relation to our functions. Information on whistleblowing concerns raised by railway employees is included on page 36.

Risk management

The Board considers the key risks facing ORR as part of a yearly discussion on strategy. Management of these risks is delegated to the Executive Committee. The Audit and Risk Committee is responsible for assuring the Accounting Officer and the Board on the adequacy of risk management processes. The Board receives quarterly updates from the Audit and Risk Committee, which cover risk management, and also from the Executive as part of the quarterly business review.

Strategic risks are aligned to our six strategic objectives. For each strategic objective risks are ranked in a grid. Each risk is assigned an owner (at Director level), and for each strategic objective the activities and control actions which mitigate the risk to us not achieving our objectives are documented. This is linked to our business management system, which helps us to ensure that the planned business activities for the year ahead address our key risks where possible. Our risk templates are updated quarterly by Deputy Directors, and are then reviewed by the Executive Committee where members provide challenge to the information contained in the templates. The templates are then reviewed quarterly by the Audit and Risk Committee.

As part of the business planning process, directorates are asked to consider the key risks to their planned activities and to ensure that these are documented in the business management system risk registers; a directorate level risk register; a project risk register; or the strategic risk register. This ensures that risks are captured at an operational level as well as at a strategic level. Activity owners have the opportunity, at regular team and Executive Committee meetings, to escalate risks from project and activity to directorate level and from directorate level to the strategic risk register if necessary.

Our key risks are grouped into strategic risks by strategic objective and operational risks.

Strategic risk 1: A safer railway

Britain has one of the safest railway networks in Europe. However, there is an inherent risk that the industry may become complacent and that health and safety will be taken for granted leading to increasing incidence of poor health and safety practices. In addition, the growth in use of the network adds to the challenges of managing health and safety.

What we are doing: We continue to strive to ensure that health and safety excellence is culturally embedded in the industry and that there is appropriate identification and management of risk, aiming at zero harm to the workforce, passengers or others.

We monitor compliance with the law and take enforcement action against duty holders that fail in their legal obligations.

LATEST NEWS

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VIDEOS: INTRODUCTION TO THE CHARITY INVESTMENTS GUIDANCE AND TOP TIPS FOR CHARITY INVESTMENTS

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REGULATORS INVITE FEEDBACK ON CHARITIES SORP

NEW GUIDANCE ON MAKING CHANGES TO YOUR CHARITY

[HOME](#) [NEWS](#) WHISTLEBLOWING DISCLOSURES MADE TO OSCR

Whistleblowing disclosures made to OSCR

03 Dec 2018



The Scottish Charity Regulator (OSCR) is a 'prescribed person' under the **Public Interest Disclosure Act 1998 (PIDA)** (<http://www.legislation.gov.uk/ukpga/1998/23/contents>). This means we are allowed to accept disclosures from people who carry out paid work for a charity. In our role as Regulator of all Scottish charities, we work to make sure that charity trustees comply with their legal duties in controlling and managing the administration of their charities.

This report sets out information about the disclosures made to us as a prescribed person in 2017-18, what we did with the information in the disclosures and how they contributed to the impact of our regulatory work.

OSCR has a number of functions set out in The Charities and Trustee Investment (Scotland) Act 2005 (2005 Act). We must:

- Determine whether bodies are charities.
- Keep a public Register of charities.
- Encourage, facilitate and monitor compliance by charities with the provisions of the Act.

- Identify and investigate apparent misconduct in the administration of charities and to take remedial or protective action in relation to such misconduct.
- Give information or advice, or to make proposals, to Scottish Ministers on matters relating to OSCR's functions.

Our strategic objectives for 2017-20 are:

- Help the public to have more confidence in charities
- Help charity trustees to understand and comply with their legal duties
- Keep registration and reporting straightforward and proportionate
- Continually improve the way we operate and deliver services to all of our stakeholders.

Whistleblowing facts and figures:

Our regulatory priorities are set out in our **Risk Framework**. When we receive a whistleblowing disclosure we assess it in the light of our Risk Framework and in line with our Whistleblowing **guidance** and our **Inquiry Policy**.

We received seven (7) whistleblowing reports in 2017-18:

- Four (4) of these led to OSCR opening an inquiry using our powers under section 28 of the 2005 Act and using our other statutory powers as appropriate. Two (2) of these inquiries are still ongoing.
- Three (3) of the reports were considered not appropriate for OSCR to take forward as a formal inquiry.

The impact on our work

The reports we have received from whistleblowers this year have helped us to:

- Identify regulatory concerns
- Take action to protect charity assets and beneficiaries
- Identify risks to charities and to the charity sector that would not otherwise have come to light without the protection afforded to whistleblowers.

Whistleblowing disclosures help us identify and prevent concerns within the sector and help charities to put things right, and supports OSCR to underpin public trust and confidence in the charity sector.

[Find out more about how OSCR deals with whistleblowing concerns in our guidance.](#)

[Back to Previous Page](#)

Mail info@oscr.org.uk (mailto:info@oscr.org.uk)

Twitter [@ScotCharityReg](http://twitter.com/ScotCharityReg) (http://twitter.com/ScotCharityReg)

Facebook [ScottishCharityRegulator](https://www.facebook.com/ScottishCharityRegulator)

(<https://www.facebook.com/ScottishCharityRegulator>)

Older People's Commissioner Wales

Older People's Commissioner Wales has confirmed to BEIS that it has no disclosures to report for 2017-18.



Making workplace pensions work

Whistleblowing disclosures

Details of information provided to us by people with concerns about a workplace pension scheme.

As a public body The Pensions Regulator (TPR) is legally required to report on the whistleblowing disclosures we receive from certain workers. Whistleblowing is the term used when someone provides us with information concerning wrongdoing relating to their workplace pension. This is also known as a whistleblowing disclosure.

Under the Prescribed Persons (Reports on Disclosure of Information) Regulations 2017 we must report the following information every year:

- the number of disclosures we received (which met certain criteria)
- the number of those disclosures where we decided to take further action
- a summary of the action we took in relation to the disclosures
- a summary of how workers' disclosures have impacted our ability to perform our functions and meet our objectives
- an explanation of our functions and objectives

Number of disclosures 2017-18

We received 3,648 disclosures during the reporting period of 1 April 2017 to 31 March 2018 which fell within the remit of our statutory functions and objectives.

Number of disclosures and summary of actions

We took further action in relation to 809 of the 3,648 qualifying disclosures, with the majority of action taken as a result of disclosures reporting a suspected breach of, or failure to undertake, automatic enrolment duties or pay contributions.

In 123 of the instances where we took further action, we issued a Warning Notice or Unpaid Contribution Notice, Fixed Penalty Notice, Escalating Penalty Notice or Compliance Notice. Other actions we took as a result of disclosures included appointing new trustees, referrals

to professional bodies, and supporting schemes to establish robust data improvement plans. Go to [enforcement activity](#)

(<https://www.thepensionsregulator.gov.uk/en/document-library/enforcement-activity>),

for more information on our work in this area.

The action we take is consistent with the principles set out in the [Regulator's Code](#)

(<https://www.thepensionsregulator.gov.uk/en/about-us/how-we-regulate-and-enforce/regulators'-code->

. We are a risk-based regulator that must carry out our activities in a way which is proportionate, accountable, consistent, transparent and targeted. In this context, whistleblowing disclosures help us to inform our intelligence and enforcement action and take action where we see it as appropriate.

In instances where we didn't undertake enforcement action due to a disclosure not meeting the qualifying criteria, the information gathered was used to inform our intelligence work, such as our strategic intelligence assessments or compliance validation work.

How disclosures impact on our objectives

All actions taken, either as a result of a disclosure or informed by a disclosure, contribute towards the achievement of [our objectives](#)

(<https://www.thepensionsregulator.gov.uk/en/about-us/what-tpr-does-and-who-we-are>)

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Annual Report and Accounts 2017/18

INNOVATION  IMPROVEMENT  INFLUENCE

Code of Conduct Complaints

Under the provisions of Part III of the Local Government Act 2000 together with relevant Orders made by the National Assembly for Wales under that Act, I consider complaints that members of local authorities have breached their authority's Code of Conduct. I am also a "prescribed person" under the Public Interest Disclosure Act for raising whistleblowing concerns about breaches of the Code of Conduct by members of local authorities. I can consider complaints about the behaviour of members of:

- county and county borough councils
- community councils
- fire authorities
- national park authorities and
- police and crime panels.

All these authorities have a code of conduct which sets out in detail how members must follow recognised principles for behaviour in public life.

If a county councillor wishes to make a complaint about another county councillor within their own authority, I expect them to first of all make their complaint to that authority's Monitoring Officer, as it may be possible to resolve the matter locally without my involvement.

Management Team

The Management Team has continued to support and advise me in relation to strategic direction as well as the operational, day to day, running of the office.

Shared Services and Collaboration

My Finance, ICT and HR staff, who enable the delivery of our objectives, work collaboratively when appropriate, sharing professional knowledge through a network comprising Welsh Government sponsored bodies and Commissioners and they will continue to do so.

Nature of Code of Conduct complaints received

As in previous years, the majority of Code of Conduct complaints received during 2017/18 related to matters of ‘promotion of equality and respect’. These accounted for 42% of complaints (37% in 2016/17). Disclosure and registration of interests (19%) and integrity (16%) were the second and third most common types of complaint, which is consistent with the previous year. Chart 1.2 below provides a full breakdown of the nature of Code of Conduct Complaints received.

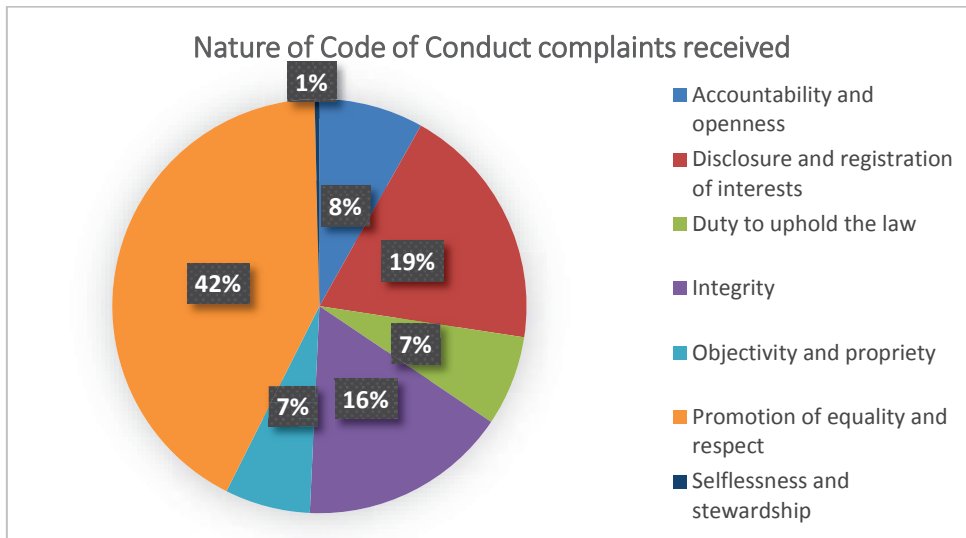


Chart 1.2

Summary of Code of Conduct complaint outcomes

The most common outcome is ‘Closed after initial consideration.’ Of the 247 complaints in 2017/18, the majority were closed (213) under this outcome. These include decisions where:

- there is no ‘prima facie’ evidence of a breach of the Code, and
- it is not in the public interest to investigate.

Fewer complaints were closed after full investigation in 2017/18 (26) than in 2016/17 (34). This is because I have continued to apply a public interest test when deciding whether to investigate Code of Conduct complaints. This means that I investigate only the more serious complaints where an investigation is required in the public interest.

In 2017/18 I received nine complaints which raised potential whistleblowing concerns about alleged breaches of the Code of Conduct. These complainants either did not provide ‘prima

facie' evidence of a breach of the code or did not warrant investigation in the public interest.

However, of the cases I investigated and closed this year, three cases were referred to the Adjudication Panel for Wales. The Adjudication Panel for Wales considers the evidence I prepare, together with any defence put forward by the member concerned. The Panel then determines whether a breach has occurred and, if so, what penalty, if any, should be imposed. Two of these cases were considered by the Panel during the year and in both cases serious breaches of the Code were found on the basis of my investigations and reports. Both cases involved councillors making derogatory remarks and unfounded allegations against staff and engaging in bullying, harassment, intimidation and malicious behaviour. As a result, a former member of [Flintshire County Council](#) was disqualified from holding office for 14 months and a former member of [Conwy County Borough Council](#) was disqualified from holding office for 18 months.

A summary of outcomes is below, with a detailed breakdown showing the outcomes of Code of Conduct complaints, by authority, provided in Annex B:



Qualifications Wales

Qualifications Wales has confirmed to BEIS that it has no disclosures to report for 2017-18.

Revenue Scotland

Revenue Scotland has confirmed to BEIS that it has no disclosures to report for 2017-18.

Scottish Environment Protection Agency

Scottish Environment Protection Agency has confirmed to BEIS that it has no disclosures to report for 2017-18.



Scottish Housing
Regulator

Annual Performance Report & Accounts 2017/18



2. Well-governed and financially healthy RSLs



Whistleblowing

SHR is a prescribed person under whistleblowing legislation.

We are interested in any conduct which puts at risk the interests of tenants and service users, or could threaten the viability or reputation of a regulated body, or the wider sector.

Whistleblowers can make a qualified disclosure¹ to us and they can also tell us about other things, which relate to our statutory objective and duties.

We encourage landlords to have their own whistleblowing arrangements and a culture that gives staff meaningful ways to raise concerns. Whistleblowers helped us protect the interests of tenants and others who use the services provided by social landlords. As a result of whistleblowing, we engaged with landlords and identified areas for improvement.

¹ A qualifying whistleblowing disclosure is one where the information being disclosed falls under any of the headings below:

- a criminal offence
- a failure to comply with a legal obligation
- a miscarriage of justice
- the endangering of an individual's health and safety
- damage to the environment
- deliberate concealment of information tending to show any of the above.

During 2017/18 whistleblowers contacted us 12 times, none of which were qualified disclosures.

We worked with landlords to establish the facts in six of the cases and found that the whistleblower's concerns were substantiated.

- We are engaging with five to be assured they are addressing issues.
- One landlord was carrying out further investigations at the 31 March 2018.

We took no further action in five cases:

- in one, the concerns related to employment and we referred the case to the appropriate regulator;
- in two we were assured that the landlord was dealing with the matter appropriately; and
- in two we took no further action due to a lack of evidence.

We were still investigating one case at 31 March 2018.

Whistleblowers can contact us by phone, email or by post. Full details are available on our website www.scottishhousingregulator.gov.uk



Scottish Information
Commissioner

www.itspublicknowledge.info

The Prescribed Persons (Report on Disclosure of Information) Regulations 2017

Report by the Scottish Information Commissioner

The Scottish Information Commissioner (the Commissioner) is the independent public official responsible for promoting and enforcing Scotland's freedom of information law:

- The Freedom of Information (Scotland) Act 2002 - is an Act of the Scottish Parliament which gives everyone the right to ask for any information held by a Scottish public authority.
- The Environmental Information (Scotland) Regulations 2004 - come from a European Directive on access to environmental information. The EIRs give everyone the right to ask for environmental information held by a Scottish public authority (and some other bodies).

The Commissioner can also receive applications about the view and discovery provisions of the INSPIRE (Scotland) Regulations 2009. These regulations also come from a European Directive, and create a right to discover and view spatial datasets (e.g. map data) held by Scottish public authorities.

The main functions of the Commissioner are: investigating appeals, promoting the public's right to know, promoting good practice to public authorities and intervening when public authority practice is not compliant with freedom of information law.

Under the Employment Rights Act 1996, Section 43F whistleblowers may qualify for employment protections if they disclose information to a "prescribed person". The Commissioner is a "prescribed person" and must report annually on the number of relevant workers' disclosures under the The Prescribed Persons (Reports on Disclosure of Information) Regulations 2017 (the Regulations).

For the period 1 April 2017 – 31 March 2018 there were no relevant workers disclosures falling within the Regulations.

Contact us

Scottish Information Commissioner

Kinburn Castle
Doubledykes Road
St Andrews, Fife
KY16 9DS

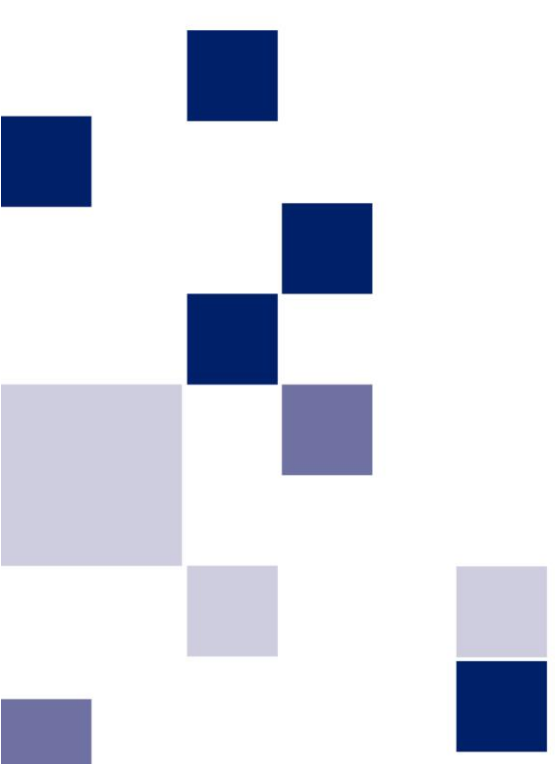
t 01334 464610

f 01334 464611

enquiries@itspublicknowledge.info

Whistleblowing Report for 2017-18

Excerpt from the Annual
Report and Accounts 2017-18
(not yet public)



Whistleblowing Report 2017-18

N.B. This is an excerpt from the Annual Report and Accounts for 2017-18, which will be laid before the Scottish Parliament in December 2018.

Under the Public Interest Disclosure Act (1998), the SSSC is a prescribed person and as such is required to publish a report on whistleblowing cases we have received.

As part of this role, from 2017-18 we are required to publish a report every year detailing referrals that qualify as whistleblowing and the actions we took as a result. In 2017-18, we received 35 referrals that qualify as whistleblowing:

- we opened a fitness to practice case for 13 of these referrals
- we directed seven referrals to another organisation, which was the employer in all instances
- we referred the matter to another organisation in five instances, the employer (four) and the Care Inspectorate (one)
- we took no further action in eight instances
- in two instances, the referrals related to workers we were already investigating and we included the information in the investigation
- out of the 13 cases we opened for investigation, 12 remain on-going (one case has been closed due to insufficient evidence to prove the allegations).

Whilst low, whistleblowing has enabled us to take action to protect the public in these specific cases. We do see that many referrals we receive from employers have come about as a result of an employee raising a concern about the practice or behaviour of a colleague to their manager. This indicates openness from employers in the sector to act on concerns without leaving individuals feeling there is no alternative but to whistleblow to their regulator. However we are not complacent about our part in enhancing a culture of openness and are developing guidance on raising concerns in conjunction with the Care Inspectorate.



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If you would like this document in another format,
please contact the SSSC on 0345 60 30 891

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SSRO

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Annual Report and Accounts 2017/18

The SSRO is an executive non-departmental public body, sponsored by the Ministry of Defence.

The SSRO Board has approved a set of policies and procedures to ensure the robust governance of the SSRO. These include the following which are published on our website:

- A Code of Conduct for Board members and external panel members, including a public register of interests.
- A Complaints Policy. In line with good practice, we also report to every Board meeting the number of complaints received within the year.
- A Gifts and Hospitality policy, including a register of gifts and hospitality.
- A Whistleblowing Policy.

During the year, the SSRO received three disclosures under its Whistleblowing Policy. However, in all three cases the matter fell outside of the SSRO's remit. Where the whistleblower gave us permission to do so, we forwarded the information to the relevant organisation.

We have established robust risk control processes, which are considered regularly by the Executive Committee, Audit Committee and Board. Further information on our risk mitigation is set out below.

At no time has any part of the SSRO's system of internal control failed or been suspended.

The SSRO's governance arrangements are overseen by its Board. Responsibility for non-executive Board member appointments rests with the Secretary of State.

The Board currently consists of a Chairman, five non-executive members and three executive members.

The non-executive members of the Board are George Jenkins, Marta Phillips, David Johnston, Terence Jagger, Mary Davies and Peter Freeman. Mary Davies and Peter Freeman were appointed to the Board in September 2017.

The Board discussed and agreed an amended Executive Committee structure in December 2017 moving to four members of the Executive sitting on the Board: the Chief Executive, the Chief Operating Officer, the Director of Legal and Policy, and the Director of Regulation and Economics. Three executive members are currently in post: Neil Swift (Chief Executive and previously Chief Operating Officer), David Galpin and Matthew Rees.

Social Care Wales

Social Care Wales has confirmed to BEIS that it has no disclosures to report for 2017-18.

Water Services Regulation Authority (Ofwat)

Annual report and accounts 2017-18

For the period 1 April 2017 to 31 March 2018

HC 1105

Part 2: Our accountability report

Corporate governance report

Directors' report

Roles and responsibilities

Ofwat is a non-Ministerial Government Department with its own resource estimate. Our Chief Executive and Accounting Officer is Rachel Fletcher, and Jonson Cox is our Chair.

Supplier payment performance

We achieved 87% against our target for paying 100% of agreed invoices within 30 days of receipt during the year. The corresponding figure for 2016-17 was 90.1%.

The Government set a target for paying 80% of agreed invoices within five days of receipt. In 2017-18, we achieved 13.7% against this target. The corresponding figure for 2016-17 was 24.5%. Given the size of Ofwat and the resources required it is difficult for Ofwat to meet this target. However, we aim to pay our suppliers as quickly as possible and our average payment days in 2017-18 was 17 days.

Whistleblowing

Whistleblowing is the term used when an employee raises concerns about improper practices in their workplace. It is also referred to as a public interest disclosure. We have a responsibility for whistleblowing matters relating to the water sector in England and Wales.

As set out in the Prescribed Persons Order 2014, Ofwat, as a Prescribed Person, has a responsibility to provide employees with a mechanism to make their public interest disclosure to an independent body, where the employee does not feel able to disclose directly to their employer and the body might be in a position to take some form of further action on the disclosure.

Therefore if an employee of the water sector has information or concerns about any aspect of the way a water company or the sector is operating, they can contact us about it. On receipt of a whistleblower contact we investigate the claims made by engaging with the whistleblower (where possible), the water company and internal and external subject matter experts to decide what, if any, steps we can take to resolve the issue or take the matter forward as appropriate.

Following our assessment of the issues raised with us, none of the five qualifying disclosures we received during 2017-18 resulted in us deciding to take further action.

Table 4: Number of qualifying disclosures made in 2017-18

Metric	What is measured	Number
Whistleblowing	Number of disclosures of information made by water sector employees to Ofwat	5
	Number of those disclosures where Ofwat (the Prescribed Person) decided to take further action	0

Protected personal data-related incidents

We have an Information Risk Policy (IRP) and related procedures in place to manage the risk of protected personal data-related incidents. These adhere to the HM Government Security Policy Framework, which sets out how all HM Government organisations and third parties handling HM Government information and other assets must apply protective security. As such, we have policies and procedures for detecting, reporting, responding to and handling security incidents. We continually monitor the effectiveness of our policies to ensure we have a robust process in place.

A breach of protected personal data-related incidents is defined as “any circumstance that has arisen contrary to policy and that has the potential to compromise HMG assets. Assets include people, property or information. The circumstance may include actions that were actual or suspected; accidental, deliberate or attempted. ‘Compromise’ is to bring the asset into disrepute or danger.”

We have experienced no personal data incidents during 2017-18 that we considered sufficiently serious as to require the Information Commissioner to be informed, consistent with ICO guidance.

Water Industry Commission for Scotland

Water Industry Commission for Scotland has confirmed to BEIS that it has no disclosures to report for 2017-18.