NHS
Greater Manchester

Whistleblowing Policy September 2025

Review Date: September 2027

Part of Greater Manchester Integrated Care Partnership

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Document Control

Title / Reference:	Whistleblowing Policy
Status:	Draft
Version:	V2.0
Date Issued / Ratified:	July 2025
Originator of Document and Job Role:	Chris Gaffey (CG), Associate Director of Corporate Services, NHS GM
File Classification:	Official Data
Retention:	Life of the organisation plus 6 years (place of deposit)
Target Audience:	All NHS Greater Manchester Integrated Care Staff & 3rd party partners
Links to other strategies, policies, procedures etc:	

Change History

Summary of Changes	Name	Date	Version
Initial draft content	Chris Gaffey	April 2024	1.0
Contact details updated	Jenny Noble	July 2025	2.0

Review

Name	Role	Date	Version
Chris Gaffey Jenny Noble	Associate Director of Corporate Services Board Secretary	April 2024	1.0
Jenny Noble	Board Secretary	July 2025	2.0

Approval

Name	Role	Date	Version
Audit Committee	Final approval	April 2025	1.0
Audit Committee	Final approval	September 2025	1.1

Distribution

Name	Role	Date	Version

DOCUMENT STATUS:
This is a controlled document. Whilst this document may be printed, the electronic version posted on the intranet is the controlled copy. Any printed copies of the document are not controlled

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Equality Impact Assessment
An EIA is ongoing.

Policy Validity Statement
This policy is due for review on the latest date shown above. After this date the policy, EIA and process documents may become invalid.
Policy users should ensure that they are consulting the currently valid version of the documentation.

Contents

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1. Introduction

1.1. NHS Greater Manchester (NHS GM) is committed to the highest possible standards of honesty, openness and accountability and will not tolerate malpractice or wrongdoing.

1.2. NHS GM's Whistleblowing Policy is a vital element of our governance arrangements and is designed to allow people to come forward and raise both disclosures and serious allegations of wrongdoing involving the actions of NHS GM's employees, contractors, or any aspect of NHS GM's activities.

1.3. As such NHS GM is committed to a policy which seeks to protect those individuals who make certain disclosures regarding any instance of malpractice or wrongdoing and to investigate them in the public interest.

1.4. This Policy is aimed at those who are not currently NHS GM members of staff. NHS GM staff, whether on a permanent, temporary or bank contract, as well as agency workers or volunteers, and anyone who may previously have been employed by NHS GM, should refer to our Freedom to Speak Up and Raising Concerns Policy.

1.5. Whistleblowing is generally the term used when someone who reports a concern about suspected wrongdoing, malpractice, illegality, or risk in the workplace.

This can include:

- criminal offences.
- failure to comply with a legal duty.
- miscarriages of justice.
- fraud or corruption.
- abuse of authority.
- serious breaches of NHS GM policy or procedure.
- unethical conduct and actions deemed unprofessional or inappropriate; This could include breaches of regulations requiring employees to 'act with integrity, objectivity and honesty and in the best interests of the organisation' and breaches of the 'Nolan Principles' which are the basis of ethical standards expected of public office holders (Appendix B);
- the health and safety of any individual has been, or is likely to be, endangered.
- the environment has been, is being or is likely to be, damaged (because of NHS GM's actions or inactions); and
- information about any of the above has been, is being, or is likely to be, deliberately concealed.

1.6 This policy seeks to set out how NHS GM will manage and respond to serious allegations of perceived wrongdoing irrespective of whether the individual raising the concern is employed by NHS GM or not.

2. Aims and Scope

2.1 Our Whistleblowing Policy seeks to cover all disclosures and allegations made by an individual who wants to raise an allegation of perceived wrongdoing.

2.2 This policy has specific sections to advise of the process to be followed when raising a disclosure or allegation and how NHS GM will respond.

2.3 The policy seeks to:

- provide for a culture of zero tolerance toward fraud and corruption and deter wrongdoing;
- encourage those with serious concerns about any aspect of NHS GM's work to feel confident to come forward and voice those concerns;
- raise concerns at an early stage and in the right way ensuring that critical information gets to the people who need to know and who are able to take action;
- provide safeguards to reassure those who raise concerns in the public interest and not maliciously or for personal gain, that they can do so without fear of reprisals or

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victimisation regardless of whether these are subsequently proven;
- set out how NHS GM will respond to allegations made and enable them to get feedback on any action taken;
- ensure that those raising concerns know what to do if they are not satisfied with actions taken.

2.4 The Whistleblowing Policy is not to be used where other more appropriate reporting procedures are available. There are existing NHS GM procedures which enable members of the public to make a general complaint or make a Freedom of Information (FOI) request, which can be found on the NHS GM website.

2.5 This Whistleblowing Policy covers concerns that fall outside the scope of those existing procedures. Equally, any allegations made through the above procedures, which raise serious concerns over wrongdoing, NHS GM will investigate under the whistleblowing process.

3. Making a disclosure or raising a concern

3.1 Once an individual has decided to raise a concern, then wherever possible, it should be expressed either verbally or in writing. This should set out the background and history of the concern, giving names, dates and places where possible, and the reason why the individual is particularly concerned about the situation.

3.2 Although individuals raising concerns are not expected to have supporting evidence to prove the truth of an allegation before reporting, they must reasonably believe that the information is substantially true to enable the matter to be taken forward.

3.3 Details of all reports received will be logged and reported by the Corporate Governance Team to allow a central record of whistleblowing cases to be maintained.

3.4 As stated previously, those who are NHS GM employees, whether on a permanent, temporary or bank contract, as well as agency workers or volunteers, and anyone who may previously have been employed by NHS GM, should refer to our Freedom to Speak Up and Raising Concerns Policy.

4. How to report a Whistleblowing concern

4.1 Anybody who has a whistleblowing concern relating to NHS GM can use our whistleblowing reporting procedures. A person who wishes to report a concern or suspected serious wrongdoing (a disclosure) should contact NHS GM in one of the following ways:

E-mail your concerns to NHS GM's Corporate Governance Team at:
gmhscp.gmicb.corporate@nhs.net

Call NHS GM by telephone, asking to speak to the Corporate Governance Team: 0161 742 6023.

Concerns can also be reported in writing to:
NHS GM Corporate Governance Team

Confidential
1st Floor,
Tootal Buildings,
56 Oxford Road, Manchester
M1 6EU

Alternatively, you can raise your concerns directly with NHS GM's Non-Executive Director and Whistleblowing Lead, Richard Paver by emailing richard.paver@nhs.net

4.2 Any person reporting a concern should provide as much information as possible, including:

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- who the allegations are against;
- full details on the nature of the alleged wrongdoing;
- provide any evidence they have in support of the allegation;
- state if the person making the disclosure is an employee of NHS GM;
- Whether the person a service user or member of the public
- name and contact details (unless they wish to remain anonymous).

4.3 When calling to raise any concerns, if contact details are provided we may get in touch to seek further information.

4.4 The following can also be contacted should you wish to raise your concerns externally to NHS GM:

1. **Care Quality Commission –**
   Issues: matters relating to health or social care services.
   Care Quality Commission Citygate,
   Gallowgate
   Newcastle upon Tyne
   NE1 4PA
   Tel: 03000 616161
   Email: enquiries@cqc.org.uk

   You can also use the Share Your Experience Form at:
   www.cqc.org.uk/content/report concern-if- you-are-member-staff

   If you mark the concerns as urgent, your feedback will be prioritised.

2. **Controller and Auditor General of the National Audit Office**
   Issues: the proper conduct of public business, value for money, fraud and corruption in relation to the provision of centrally funded public services.
   The Controller and Auditor General National Audit Office
   157-197 Buckingham Palace Road
   Victoria
   London
   SW1W 9SP
   Tel: **0207 7987000** Fax: **0207 7987070**

3. **Financial Services Authority**
   Issues: the conduct of investment business or of insurance business. The operation of banks, deposit- taking businesses and wholesale money market regimes. The functioning of financial markets, investment exchanges and clearing houses. The functioning of other financial regulators. Money laundering, financial crime and other serious financial misconduct, in connection with activities regulated by the Financial Services Authority.

   Head of Financial Supervision Financial Services Authority 25
   The North Colonnade Canary Wharf
   London E14 5HS
   Tel: **0207 0661000**
   Fax: **0207 0661099**
   Email: **consumerhelp@fsa.gov.uk**

4. **HM Revenue & Customs**
   Issues: income tax, corporation tax, capital gains tax, petroleum revenue tax, inheritance tax, stamp duties, National Insurance contributions, Statutory Maternity Pay and Statutory Sick Pay.

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HM Revenue & Customs
Freepost NAT22785
Cardiff
CF14 5GX

5. **Health and Safety Executive**

Issues: those which may affect the health or safety of any individual at work; matters which may affect the health and safety of any member of the public arising out of, or in connection with, the activities of persons at work.

Health and Safety Executive Edgar Allen House
241 Glossop Road Sheffield S10 2GW
Tel: 0845 345 0055 (HSE Infoline)
Fax: 0114 2912379

6. **Information Commissioner's Office**

Issues: compliance with data protection legislation (which regulates the processing of information relating to individuals, including the obtaining, holding, use or disclosure of such information).

Information Commissioner's Office
Wycliffe House
Water Lane
Wilmslow
Cheshire
SK9 5AF

Tel: **01625 545700**

Fax: **01625 524510**

7. **Local authorities**

Issues: those which may affect the health or safety of any individual at work or the health and safety of any member of the public arising out of the activities of people at work.

Contact the appropriate local authority.

8. **Public Concern at Work**

Issues: concerns about possible wrongdoing or malpractice in the workplace.

Whistleblowing Advice Line
3rd Floor,
Bank Chambers
6-10 Borough High Street
London
SE1 9QQ

Advice Line Tel: **020 7404 6609**

Email: **whistle@pcaw.org.uk**

9. **The Occupational Pensions Regulatory Authority**

Issues: occupational pension schemes and other private pension arrangements.

The Occupational Pensions Regulatory Authority
Invicta House
Trafalgar Place

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Brighton
BN1 4DW
Tel: 0870 606 3636
Fax: 0870 241 1144
Email: **helpdesk@opra.gov.uk**

10. NHS Counter Fraud Authority

Issues: You can report any concerns or suspicions you have about fraud or corruption within the NHS or wider health group to the NHS Counter Fraud Authority.

Telephone: You can call their free 24hr confidential fraud reporting hotline powered by Crimestoppers on 0800 028 4060

You can also make a report to the NHSCFA using their online NHS fraud reporting tool.

5. How NHS GM will Respond

5.1 NHS GM's Corporate Governance Team, if contacted directly, will formally respond to you to acknowledge receipt of a disclosure within 2 working days of the concern being received.

5.2 A further acknowledgement will be sent within 10 working days to indicate:

- how NHS GM proposes to deal with the matter; and the policy under which it will be investigated;
- whether NHS GM considers it to be a protected disclosure;
- contact details for the officer handling the investigation;
- arrangements for confidentiality;
- an estimate of how long it will take to provide a response on the outcome;
- any initial enquiries which may have been made;
- if no action is planned, why not.

5.3 All proposed action should be notified and agreed with the Associate Director of Corporate Services on behalf of the Chief Finance Officer and in consultation with the relevant Chief Officer (unless any of these officers are a subject of the investigation, where an alternative independent senior officer will be identified).

5.4 All allegations will be handled confidentially and discreetly by those who are directly involved in the investigating process. The ongoing point of contact for the whistleblower will be given in the acknowledgement letter. If necessary, further information will be sought from the whistleblower. This will depend on the nature of the matters raised, the potential difficulties involved in conducting an investigation and the clarity of the information provided.

6. Anonymous allegations

6.1 NHS GM recognise that there may be circumstances where individuals are worried about being identified when they report concerns. If you have come to us anonymously and not provided your contact details, we will treat your allegations just as seriously. However, this policy encourages individuals to put their name to an allegation wherever possible as we believe that open or confidential whistleblowing is the best means of addressing the concerns and protecting individuals.

6.2 Concerns expressed anonymously are more difficult to investigate, and harder to substantiate, and further liaison with the whistleblower is not possible. Nevertheless, anonymous allegations will always be individually considered, and action taken at the discretion of the responsible Chief Officer, the Associate Director of Corporate Services and / or manager depending upon:

- the seriousness of the issues raised;
- the credibility of the concern; and

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- the likelihood of confirming the allegations from attributable sources

7. Outcomes

7.1 NHS GM will, subject to legal constraints, seek to advise the whistleblower on the outcomes of the investigation in order to assure them that that the matter has been properly addressed. Some concerns raised may be resolved by agreed action, once the whistleblowers concerns have been explained, without the need for investigation.

7.2 Investigation reports will be required for all cases. These will usually be issued by the Investigating Officer to the Chief Officer of the department involved and to the Chief Finance Officer and Chief Executive (unless any of these officers are a subject of the investigation, where an alternative independent senior officer will be identified). The Associate Director of Corporate Services will also require confirmation of the outcome of the work and any system risk issues which arise from it. The Corporate Governance Team may carry out follow up work as a result of any identified areas of risk.

8. Safeguards

8.1 In order to ensure that allegations are investigated in the right spirit with the right outcome, the following safeguards or principles should be applied in all cases.

9. Confidentiality and Anonymity

9.1 NHS GM's Whistleblowing Policy seeks to protect the identity of the individual making a disclosure, meaning that your name will not be revealed without your explicit consent. Your name will initially be logged at the outset and will be visible at times when data monitoring is taking place.

9.2 However, in alleged cases of serious wrongdoing, it must be appreciated that NHS GM cannot guarantee that this will be maintained particularly if external legal action results from the disclosure. In some cases a concern may require further action and they may have to act as a witness and/or provide evidence, for example serious criminal offences which are referred to the Police.

9.3 If your disclosure relates to a child at risk or abuse of a vulnerable adult then NHS GM is required to investigate this under separate procedures and this takes priority over any request for anonymity. If you have provided your contact details, NHS GM will of course advise you of the action being taking.

10. Harassment and Victimisation

10.1 NHS GM acknowledges that the decision to report a concern can be a difficult decision for a person to take, not least because of the fear of reprisal from those responsible for the malpractice.

10.2 Although this Policy does not apply specifically to staff (NHS GM staff, whether on a permanent, temporary or bank contract, as well as agency workers or volunteers, and anyone who may previously have been employed by NHS GM, should refer to our Freedom to Speak Up and Raising Concerns Policy), NHS GM will apply the same principles of the legal framework that protects staff under the Public Disclosure Act 1998 (which protects staff who speak up from negative treatment or unfair dismissal) to anyone who raises concerns through our Whistleblowing Policy.

10.3 NHS GM will not tolerate harassment or victimisation against anyone who has raised a genuine concern under the Whistleblowing Policy. Any employee who victimises a whistleblower will be subject to a disciplinary action which may lead to dismissal.

10.4 Anyone who believes they have been victimised as a result of making a disclosure or blowing the whistle should report their concerns to the Corporate Governance Team (or the relevant external organisation listed within paragraph 3.4 of this policy should you not wish to report this directly to NHS GM).

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11. False and malicious allegations

11.1 While encouraging people to bring forward matters of concern, NHS GM must guard against claims which are untrue. This is because of the risk of claims made to deliberately damage the reputation of employees or NHS GM as a whole and not least because the cost of investigation is high.

11.2 If a person makes an allegation, but it is not confirmed by the investigation, no action will be considered or taken against them. However, if someone makes deliberately false, malicious or vexatious allegations this will be treated extremely seriously and appropriate action will be considered.

12. Misuse of the policy

12.1 The Whistleblowing Policy is designed to promote and encourage reporting genuine concerns.

12.2 The policy is not designed to allow:

- Individuals who have acted inappropriately to escape punishment by highlighting any malpractices they were involved in;
- Employment protection in relation a redundancy situation or pre-existing disciplinary issues as a result of reporting a wrongdoing;
- An individual to raise a concern for some private motive and not to prevent or correct the wrongdoing.

13. Data Protection and FOI

13.1 The Freedom of Information Act 2000 gives a general right of access to all types of recorded information held by public authorities. As such NHS GM often receives requests for information under the Freedom of Information Act.

13.2 NHS GM has a legal obligation to provide the information unless it falls under one of the exemptions of the Act.

13.3 The Freedom of Information Act contains exemptions which may be applicable to permit the withholding of information identifying the whistleblower, including:

- Section 40 Personal Data.
- Section 41 Information which, if disclosed, would give rise to an actionable breach of confidence.

13.4 Many people making a disclosure to NHS GM will wish to protect their identity and NHS GM will always seek to protect the identity of individuals during the course of progressing an investigation. If NHS GM receives a request for information identifying a whistleblower, NHS GM will contact the whistleblower to seek their views beforehand and will, wherever possible, seek to comply with those views.

13.5 The principle of maintaining confidentiality should also be applied to the identity of any individual who may be the subject of a disclosure.

13.6 NHS GM will ensure that our handling of concerns meets the requirements of the Data Protection Act 1998 and the Freedom of Information Act 2000.

14. Monitoring of Whistleblowing Complaints

14.1 NHS GM's Corporate Governance Team will maintain a central record of all whistleblowing referrals made under this policy and monitor the outcome of these cases. The collection, monitoring, review and storage of these records will at all times be carried out within the safeguarding principles set out at part 6 of this policy.

14.2 As such, details of any allegation should be reported to NHS GM's Corporate Governance Team by the receiving manager on receipt. The Corporate Governance Team will log and allocate each case a reference number. The outcome of the investigation should be notified to the Associate Director of Corporate Services by the Investigating officer.

14.3 The records held by the Corporate Governance Team will be used to analyse the impact and

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effectiveness of the arrangements in place in statistical terms and records held in Corporate Services sections may be subject to review. The detailed case records form part of the process of reporting back to NHS GM on the effectiveness and outcomes of the Policy. This information will be referred to for monitoring purposes and annual assurance reports provided to the Audit Committee by the Associate Director of Corporate Services as part of this process.

14.4 The Chief Finance Officer and the Chief Executive retain responsibility for monitoring the effectiveness of NHS GM's Whistleblowing Policy and process. The review process should be independently checked for effectiveness on an annual basis.

14.5 An Whistleblowing record sheet (Appendix A) should be used to record a summary for each case. A copy should be sent to the Corporate Governance Team and one retained with the investigation paperwork on completion.

15. Awareness

15.1 Chief Officers and Heads of Service are responsible for ensuring the Whistleblowing Policy and process is available to the public, and that any training needs are addressed which may arise from the application of the policy. Raising awareness of NHS GM's Whistleblowing Policy should form part of the induction training for all employees and should be addressed as refresher training for all employees.

15.2 Employees have a responsibility to ensure that they are aware of and understand NHS GM's policy in relation to Whistleblowing.

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Appendix A

CONFIDENTIAL
NHS GM WHISTLEBLOWING CASE RECORD

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Information required.	**Your response.**
The date the concern / allegation / disclosure was received in NHS GM Directorate Involved How the report was received (verbal or written)	
Details of who the concerns were raised with? Name and Job role	
Name and job role of person making complaint/allegation: (unless anonymity was requested).	
Was confidentiality requested / explained or promised?	
A summary of the concern / allegation raised:	
Details of any feedback given and any response from the person who has raised concerns	
Matter reported to Head of Internal Audit	
(Yes/No) Date referred:	

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Has formal acknowledgement provided to person who has raised concerns in line with the policy? (Acknowledgement of receipt within 2 working days) (Further acknowledgement on sent within 10 working days).	
Chief Officer and Officer handling the investigation (must be independent of the allegations / investigation being conducted): (Names)	
Summary outcome of investigation: (Proved not proved, action plans and recommendations)	
Date notification of outcome given to person who has raised concerns:	
Papers retained (location), responsible officer and review date:	
Papers retained (location), responsible officer and review date:	

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Appendix B

SEVEN NOLAN PRINCIPLES

The following are the Seven Nolan Principles underpinning standards for Public Life:

The principles of public life apply to anyone who works as a public office-holder. This includes all those who are elected or appointed to public office, nationally and locally, and all people appointed to work in the civil service, local government, the police, courts and probation services and in the health, education, social and care services. All public office-holders are both servants of the public and stewards of public services. The principles also have application to all those in other sectors delivering public services.

1. Selflessness: Holders of public office should act solely in terms of the public interest..

2. Integrity: Holders of public office must avoid placing themselves under any obligation to people or organisations that might try inappropriately to influence them in their work. They should not act or take decisions in order to gain financial or other material benefits for themselves, their family, or their friends. They must declare and resolve any interests and relationships..

3. Objectivity: Holders of public office must act and take decisions impartially, fairly and on merit, using the best evidence and without discrimination or bias..

4. Accountability: Holders of public office are accountable to the public for their decisions and actions and must admit themselves to the scrutiny necessary to ensure this.

5. Openness: Holders of public office should act and take decisions in an open and transparent manner. Information should not be withheld from the public unless there are clear and lawful reasons for so doing..

6. Honesty: Holders of public office should be truthful.

7. Leadership: Holders of public office should exhibit these principles in their own behaviour. They should actively promote and robustly support the principles and be willing to challenge poor behaviour wherever it occurs.

Source: The Committees on Standards in Public Life website.