

## **SCARBOROUGH MARITIME HERITAGE CENTRE (SMHC)**

### **"WHISTLEBLOWING" POLICY**

#### **Introduction**

SMHC is committed to the highest standards of openness, probity and accountability.

An important aspect of accountability and transparency is a mechanism to enable staff, volunteers and others connected to SMHC to voice concerns in a responsible and effective way. Where an individual discovers information that they believe shows serious malpractice or wrongdoing within the organisation then this information should be disclosed internally without fear of reprisal. In many cases reporting should be to the person to which you normally report but SMHC have considered arrangements to enable you to report in other ways if you would prefer to do so.

The Public Interest Disclosure Act, which came into effect in 1999, gives legal protection to employees against being dismissed or penalised by their employers as a result of publicly disclosing certain serious concerns. The Company has endorsed the provisions set out below so as to ensure that no members of staff should feel at a disadvantage in raising legitimate concerns.

It should be emphasised that this policy is intended to assist individuals who believe they have discovered malpractice or impropriety. It is not designed to question financial or business decisions taken by the Company nor should it be used to reconsider any matters that have already been addressed under harassment, complaint, disciplinary or other procedures. Once the "whistleblowing" procedures are in place, it is reasonable to expect staff and volunteers to use them rather than air their complaints outside the Company.

#### **Scope of Policy**

This policy is designed to enable volunteers & employees (although at the time of preparing this policy we have no employees) or anyone connected to SMHC to raise concerns internally and at a high level and to disclose information that you believe shows malpractice or impropriety. This policy is intended to cover concerns that could include

- Financial malpractice or impropriety or fraud
- Failure to comply with a legal obligation or Statutes
- Dangers to Health & Safety or the environment
- Criminal activity
- Improper conduct or unethical behaviour
- Attempts to conceal any of these

#### **Safeguards**

##### **i. Protection**

This policy is designed to offer protection to those who disclose such concerns provided the disclosure is made in good faith and in the belief that malpractice or impropriety is taking place within the organisation.

##### **ii. Confidentiality**

SMHC will treat all such disclosures in a confidential and sensitive manner. The identity of the individual making the allegation may be kept confidential so long as it does not hinder or frustrate any investigation. However, the investigation process may reveal the source of the information and the individual making the disclosure may need to provide a statement as part of the evidence required. When any matter is brought to attention under this policy, discussions will take place with the person raising the concern as to whether it is possible to undertake the investigation without revealing their identity.

### **iii. Anonymous Allegations**

This policy encourages individuals to put their name to any disclosures they make. Concerns expressed anonymously are much less credible, but they may be considered at SMHC's discretion.

In exercising this discretion, the factors to be taken into account will include:

- The seriousness of the issues raised
- The credibility of the concern
- The likelihood of being able to investigate the allegation from the information provided

### **iv. Untrue Allegations**

SMHC appreciate that action which might be easily mistaken as suggesting malpractice can sometimes be reported. If an individual makes an allegation in good faith and in the belief that there is malpractice or impropriety but which is not confirmed by subsequent investigation, no action will be taken against that individual. In making a disclosure the individual should exercise due care to ensure the accuracy of the information. If, however, an individual makes malicious or vexatious allegations, and particularly if he or she persists with making them, disciplinary action may be taken against that individual.

#### **Procedures for Making a Disclosure.**

An individual wishing to report malpractice or impropriety can contact any of the Officers or Trustees whose names and contact details are shown in the schedule attaching to this policy. For the avoidance of doubt the individual should not feel duty bound to report the matter to the person that he or she considers as the natural 'line manager'.

On receipt of a report of malpractice or impropriety, the person contacted will make a note of the complaint and will explain the steps that he or she intends to take to share the information. The procedure will then move to the investigative stage and an Investigating Officer will be appointed who will consider the precise way in which the information should be investigated. Then Investigating Officer will commence his or her work as soon as is reasonably possible having regard to all the circumstances.

If there is evidence of criminal activity then the Investigating Officer will be under an obligation to inform the police. SMHC will ensure that any internal investigation does not hinder a formal police investigation.

#### **Timescales**

Due to the varied nature of these sorts of complaints, which may involve internal investigators and / or the police, it is not possible to lay down precise timescales for such investigations. The investigating official should ensure that the investigations are undertaken as quickly as possible without affecting the quality and depth of those investigations.

The Investigating Official, should as soon as practically possible, send a written acknowledgement of the concern to the complainant. It is likely that the Investigating Official will need to speak directly to the complainant as part of the investigative process. Thereafter he or she will report back to the complainant in writing on the outcome of the investigation and on the action that is proposed. If the investigation is a prolonged one, the Investigating Official will keep the complainant informed as to the progress of the investigation and as to when it is likely to be concluded.

All responses to the complainant should be in writing and sent to their home address in an envelope marked 'Personal and Confidential'.

## **Investigating Procedure**

The Investigating Official should consider these matters as part of the investigative work:

- The need for full details and clarifications of the complaint.
- The Investigating Official should inform the member of staff or volunteer against whom the complaint is made as soon as is practically possible having regard to the nature of the investigation. At any future interview with this person, he or she will be informed of their right to be accompanied by a colleague or other representative.
- Where appropriate, the Investigating Official should consider the involvement of the SMHC's auditors and the Police at this stage and should consult with the Chairman of the Trustees.
- The allegations should be fully investigated by the Investigating Official with the assistance where appropriate, of other individuals / bodies at his or her discretion.
- The Investigating Official will make a judgement concerning the complaint and validity of the complaint. This judgement will be detailed in a written report containing the findings of the investigations and reasons for the judgement. The report will be passed to the Chairman / Trustees as appropriate.
- The Chairman / Trustees will decide what action to take.
- The complainant should be kept informed of the progress of the investigations and, if appropriate, of the final outcome.
- If appropriate, a copy of the outcomes will be passed to the Company Auditors to enable a review of the procedures.

If the complainant is not satisfied that their concern is being properly dealt with by the investigating official, they have the right to raise it in confidence with the Chairman, or one of the designated persons described above.

If the investigation finds the allegations unsubstantiated and all internal procedures have been exhausted, but the complainant is not satisfied with the outcome of the investigation, the Company recognises the lawful rights of employees and ex-employees to make disclosures to prescribed persons (such as the Health and Safety Executive, the Audit Commission, or the utility regulators), or, where justified, elsewhere.

### **Schedule of SMHC Officers and Trustees which are Available to a Complainant to Approach to Raise their Concerns.**

This list includes all officials together with all trustees who have pre agreed to be contacted by a complainant. Their contact details are available on request, subject to the Data Protection Act 2018.

#### Directors

M. Vesey, R. L. Rowley, D. Normandale, J.R.F. Spencer.

#### Trustees

M. Vesey, R. L. Rowley, D. Normandale, J.R.F. Spencer,  
Captain P Simpson MN, H. Roberts, B. Roberts.

#### Committee

M. Vesey, R. L. Rowley, D. Normandale, J.R.F. Spencer, L. Auckland,  
J. Roberts, A Roberts, J King, S. Kirby, G. Smith.