



The Hull York Medical School

Code of Practice on Whistleblowing

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Responsibility to Update:	Quality and Standards Manager

HYMS Code of Practice on Whistleblowing

Introduction

1. The Nolan Committee defines whistleblowing as raising concerns about misconduct within an organization. Whereas complaints procedures may be invoked when you feel that you have cause for complaint on your own account, whistleblowing would normally be appropriate when you observe behaviour which impinges on others.
 - 1.1. HYMS has in place a number of other Codes of Practice which may be relevant to a situation, for example the Code of Practice on Investigation and Determination of Student Complaints, the Code of Practice on Academic Misconduct, the Code of Practice on Equal Opportunities, the Code of Practice on Fitness to Practise Medicine, and the Code of Practice on Harassment.
2. As a medical student you have a duty to report dangerous, abusive, discriminatory, dishonest or exploitative behaviour or practice: episodes may occur either in the universities or the NHS.
3. We recognise the vulnerability and relative powerlessness sometimes felt by students who may well be undergoing a process of assessment and this procedure is designed to provide you with protection and support where you have raised issues in good faith. People attracted to the caring professions for the right reasons sometimes wish to avoid conflict in case it upsets others but the needs of those being abused or harmed have to take precedence over the risk of upsetting those in positions of greater power.
4. The Code of Practice aims to:
 - 4.1. encourage you to raise serious concerns about possible bad practice, or where you have misgivings, discomfort or worries about episodes you have observed;
 - 4.2. provide a mechanism to deal with those concerns and ensure that you are included in the process and receive appropriate and timely feedback;
 - 4.3. reassure you that you will be protected from possible reprisals or victimization if you have reasonable belief that you have made any disclosure in good faith.
5. The procedure is intended to cover major concerns that fall outside the scope of other procedures. These concerns might include:
 - 5.1. conduct which is an offence or a breach of the law;
 - 5.2. disclosures related to miscarriages of justice;
 - 5.3. health and safety risks including risks to the public and service users as well as other staff and students;
 - 5.4. damage to the environment;
 - 5.5. the inappropriate or unauthorized use of public funds or other resources;
 - 5.6. possible fraud or corruption;
 - 5.7. abuse of service users;

5.8. other unethical conduct.

6. Concerns may be about something that:

6.1. makes you feel uncomfortable in terms of known standards, your experience or known codes of practice which apply

6.2. falls below established standards of practice

6.3. amounts to improper conduct

7. Where possible all concerns will be treated in confidence and the identity of the whistleblower will not be revealed.

7.1. However, this cannot be a hard and fast rule as there may for example be a situation in which evidence is given or the nature of the concern could only arise from the experience of a particular individual.

7.2. Anonymous expressions of concern will not be accepted.

8. There may be circumstances where immediate action to prevent harm is necessary, and if you are on placement you should contact available staff such as the Student Liaison Officer or the Director of Clinical Studies, and tell your tutor or Educational Supervisor

9. Otherwise when you become concerned that there has been a violation of standards it would be sensible to discuss it with people who are in a position to advise you how best to proceed.

9.1. In the first instance you might approach your tutor, or your Educational Supervisor or your University Advisor.

10. *Informal procedure* In situations where there are minor concerns, and if you feel you can, talk to the person directly concerned and then to your tutor or the other staff indicated above.

10.1. You should specify that this whistleblowing procedure is being invoked and you should be satisfied that the issue has been properly addressed.

10.2. This means that the person receiving your information should make a note of the substance of the concern and any action taken to deal with the situation.

10.3. In all cases you must keep HYMS informed about your actions either through your tutor or the Director of Medical Education or the Head of Administration.

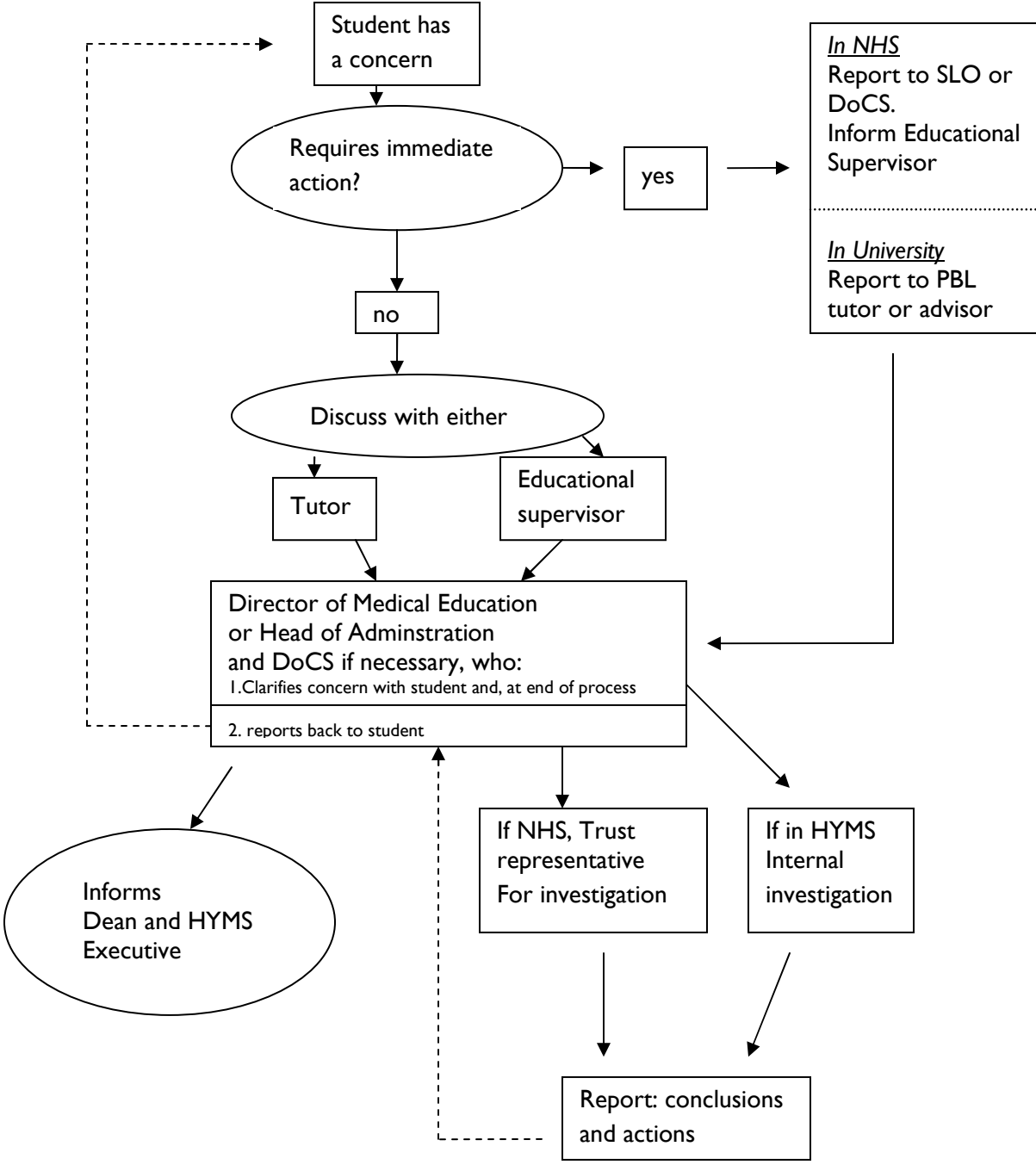
10.4. If you are not satisfied with the outcome of this informal procedure, or the problem persists then your concerns should be put in writing in accordance with the formal procedure.

11. *Formal procedure* This procedure should be used for any matter not satisfactorily dealt with by the informal procedure and for serious matters. It is instigated by the completion of a written report using the following format:

- 11.1. the background and history of the concern – giving relevant dates
 - 11.2. the reason why you are particularly concerned about the situation
 - 11.2.1. it helps if others put their names to the report.
 - 11.3. In the first instance, unless it seems inappropriate, the report should be given to your tutor or the other staff indicated above and you should retain a copy.
12. The tutor or the other staff indicated above will notify the Director of Medical Education or the HYMS Head of Administration
- 12.1. acknowledgement will be sent within 7 working days with an indication of how the matter will be dealt with.
13. There will be a meeting between you and the Director of Medical Education or the HYMS Head of Administration to clarify your concerns as well as with the relevant Director of Clinical Studies if it concerns an episode in the NHS.
- 13.1. A colleague may accompany you to that meeting.
14. The Director of Medical Education or the HYMS Head of Administration will inform the Dean and the HYMS Executive whenever a student invokes the formal procedure under this policy.
15. The Director of Medical Education or the HYMS Head of Administration will forward your report to an appropriate person in the Trust with a request for an investigation to be carried out, or begin an internal investigation.
- 15.1. Trusts have whistleblowing and public disclosure policies and any disclosure under the HYMS policy is likely to feed into those policies at an appropriate point.
16. The Director of Medical Education or the HYMS Head of Administration will consider whether it is in your best interests to remain in any placement.
17. HYMS is not in a position to investigate matters in another organisation but will try to ensure that the placement provider carries out an appropriate investigation.
- 17.1. Requests for confidentiality will be respected as far as possible subject to the requirements of natural justice, but may limit the scope of any investigation.
 - 17.2. Normally HYMS would expect the matter to be investigated and a report with conclusions and actions taken made within a month.
 - 17.3. It is understood that you need to be assured that the matter has been properly dealt with and so, subject to legal constraints, you will be informed of the outcome of any investigation, but you must undertake to keep that information confidential.
18. This Code of Practice is intended to support and protect students who have raised concerns in good faith although subsequently after investigation such concerns may be judged to have been ill-founded.

19. Raising concerns with malicious intent or reckless irresponsibility will be considered to contravene the HYMS Code of Conduct for Medical Students and will result in a fitness to practise disclosure.

Whistleblowing: Formal Procedures



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