BMS/2.05 Whistleblowing (Raising Concerns at Work)
### Document Approval Process (workflow)

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### Revision / Amendment Information

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2. **Related Documents**

- BMS Manual
- Document Control
- Record Retention, Storage and Disposal
- Audit
- Corrective and Preventive Action (RAP’s)
- Planning and Review
- Communication
- Risk Management
- Human Resources
- Personal Development and Training
- Incident Reporting and Investigation
- Raising Concerns Form

BMS Manual
Document Control
Record Retention, Storage and Disposal
Audit
Corrective and Preventive Action (RAP’s)
Planning and Review
Communication
Risk Management
Human Resources
Personal Development and Training
Incident Reporting and Investigation
Raising Concerns Form
3. **Purpose of Procedure**

3.1 To ensure a single procedure is defined and utilised at all locations within the Company that provides instruction and guidance for staff wanting to raise a concern at work, also known as whistleblowing or making a disclosure in the public interest.

4. **Scope and Application**

4.1 This procedure applies to all Company sites, employees, agency workers, volunteers, visitors, contractors and other stakeholders.

4.2 Failure to comply with the requirements of this procedure may result in investigation and subsequent formal action in line with the Company’s Capability and Disciplinary procedures.

5. **Policy Statement**

5.1 The Company is committed to protecting the health, safety and welfare of all stakeholders and takes a very serious view of any fraudulent behaviour, serious malpractice or general abuse occurring in the work place.

5.2 If evidence of such an occurrence comes to light, the Company intends to deal with it quickly and serious disciplinary action will be taken against any employee found guilty of such offences.

5.3 In light of this the Company encourages any colleague who becomes aware of possible malpractice to report it immediately to the Company in the first instance. In return the Company agrees to protect any such employees from reprisals and respect the confidentiality.

5.4 The Company also wishes to emphasise to all management and staff that any victimisation of colleagues reporting malpractice or deterring them from raising such a concern would be treated as a serious disciplinary offence.
6. Responsibilities

6.1 Stericycle Vice President Europe / Managing Directors

Have overall responsibility for setting and directing: quality, environmental, safety and health, business continuity and information security policy and for ensuring the appropriate resources are available.

6.2 Senior Management / Leadership Teams

Are responsible for ensuring that all BMS requirements are established, implemented, maintained and continually improved in accordance with the standards to which the Company subscribes and the legislation relative to the Company’s operations.

6.3 Director of HR and Communications

Is responsible for developing, co-ordinating and implementing human resources policy, procedures and work instructions and chairs the Ethics Committee.

Is responsible for ensuring that the complainant and all parties referred to in this procedure are kept fully informed of the progress of the investigation and its outcomes in accordance with the timescales specified in this procedure.

Is responsible for maintaining a register of whistleblowing concerns.

6.4 Strategic HR Business Partner

Is responsible for investigating any concerns raised and reporting the finding of the investigations to the Director of HR and Communications.

6.5 Line Managers

Are responsible for ensuring that all whistleblowing complaints that are brought to their attention are reported and handled in accordance with the requirements of this procedure.

Are responsible for providing all possible assistance and providing all possible access to records and personnel to assist with the investigation of any concerns raised as part of this procedure.

Are responsible for ensuring that this procedure is communicated to all staff, contractors / sub-contractors and suppliers.

Are responsible for ensuring that all staff, agency staff and subcontractors are trained on this procedure.

6.6 Ethics Committee

Is responsible for reviewing all whistleblowing complaints, investigations and outcomes to ensure compliance with Company policy and all applicable legislation.

6.7 Care Quality Advisory Committee

Is responsible for reviewing the outcome of investigations that have or had the potential to impact on patient safety and providing comments to the Director of HR and Communication.

6.8 All Personnel

Are responsible for ensuring they understand Company policy and procedures and follow the processes at all times.
7. **Definitions**

7.1 **Whistleblower** – someone who comes to a decision to express a genuine concern of malpractice within the Company.

7.2 **Worker** – an employee of the Company, an agency staff member or a sub-contractor.

7.3 **Malpractice** - malpractice is not easily defined and the following list therefore contains examples only:

- False entries being made in official records i.e. fraud;
- An action that may cause harm or distress to others i.e. a patient or member of the public;
- A criminal offence;
- A danger to the health and safety of an individual;
- Causing damage to the environment;
- The Company isn’t complying with its legal obligations;
- The use of information to bring personal gain or benefit;
- A concern relating to professional competence;
- Corruption, bribery or dishonesty;
- An action contrary to any code of ethics or practice;
- Failure to adhere to agreed clinical and or operational standards and procedures;
- Deliberate attempts to cover up any of these.

7.4 **Protected Disclosure** – is the disclosure of any information by a worker that in the reasonable belief of the worker making the disclosure is made in the public interest and tends to show malpractice. The disclosure can be to the Company or with certain limitations to a prescribed body such as a regulator but only where the information relates to the activities of the regulator (e.g. disclosure to the Environment Agency about acts that have an effect on the environment).

7.5 **Stakeholder** – any person, group or organisation that may be affected by the actions of the Company. The following stakeholders have been identified;

- Customers;
- Regulators;
- Landlords;
- Local Communities;
- Parent Company;
- Suppliers / Sub-contractors;
- Insurers;
- Emergency Services;
- Service Users;
- Staff and Sub-contractors.

7.6 **UK Whistleblowing Free Phone** – 0808 234 6176 local call rate number for the confidential reporting of concerns under this procedure. This number is usually included free of charge within most mobile phone call packages.
7.7 **Ireland Whistleblowing** – From an outside line dial the direct access number for your location: 1800 550 000. At the English prompt dial: **800-643-0240** extension 3200.

7.8 **Whistleblowing On-line Reporting** – Concerns can be reported online using the following address: [https://secure.ethicspoint.com/domain/media/en/gui/43922/index.html](https://secure.ethicspoint.com/domain/media/en/gui/43922/index.html).

7.9 **Malicious Complaint** – is a complaint raised with the sole intention of causing harm to an individual, rather than to identify a genuine instance of malpractice.

7.10 **Vexatious Complaint** – is a complaint raised with the sole purpose of causing annoyance, frustration or worry, rather than to identify a genuine instance of malpractice.

7.11 **Ethics Committee** – A committee established to ensure the respectable and trustworthy conduct of the Company and its employees, in order to ensure the fulfilment of the Company’s principles and policies and compliance with all applicable laws and regulations (see **BMS/1.05 – Planning and Review** for further details).

The committee shall consist of:

Director of HR and Communications (Chair)
Director of Compliance
Group Finance Director
General Counsel
Representatives from the business unit from which the complaint arose will be invited as required.
8. **Introduction**

8.1 The Company has developed this whistleblowing procedure as part of its commitment to provide and open and transparent system, where staff can feel confident in raising any concerns they may have.

8.2 The Company encourages open dialogue between its workforce and managers, working together to deliver high quality services across all of its businesses. This includes the communication and resolution of genuine concerns.

8.3 The Company takes a very serious view on misconduct, fraudulent behaviour, serious malpractice, general wrongdoing or any activity that compromises patient, public or employee safety and encourages any employee who becomes aware of possible malpractice, to report it to the Company in the first instance. In return, the Company agrees to protect any such employee from reprisals and respect their confidentiality.

8.4 The Company promotes a culture which challenges inappropriate or unprofessional behaviour, suspected wrongdoing and danger at work at all levels without fear of victimisation or reprisal.

8.5 Any disclosure raised under this procedure will be investigated thoroughly, promptly and confidentially and the outcome of the investigation reported back to the concerned person.

8.6 Individuals have no responsibilities for investigating any concern they raise. It is the Company’s responsibility to undertake any necessary investigation.

8.7 If as a result of any investigation there is found to be any misconduct, fraudulent behaviour, serious malpractice, general wrongdoing or any activity that compromises patient, public or employee safety is discovered the Company disciplinary procedure will be used, in addition to any external measures required.

8.8 If however, an employee is aggrieved about a personal matter, they should use the grievance procedure (see BMS/2.01). It is important to note that the raising concerns procedure is primarily where the interests of patients, others or that of the Company is at risk.

8.9 For general, day to day, low risk concerns, employees should raise these with their line manager in the first instance.

8.10 The Company will also emphasise to all managers and staff that any victimisation of employees reporting a concern will be treated as a serious disciplinary offence.

8.11 Any instruction to deter an employee from raising a concern or attempt to cover up a raised concern in line with this procedure will also constitute a serious disciplinary offence.

8.12 If an individual is instructed not to raise or pursue any concern, even by a person in authority such as a manager, the individual should not agree to remain silent but should report the matter using the contacts in the key stages below.

8.13 Complaints that are made and found to be without foundation, with the investigation finding the main intention to cause harm or upset other people (malicious or vexatious), may be considered misconduct or gross misconduct and will be referred for disciplinary attention.
9. **Key Steps**

9.1 The Company wishes to remind all employees that under the Public Interest Disclosure Act 1998 they will in any case be protected where they make a protected disclosure. These are disclosures of information which, in the reasonable belief of the employee making the disclosure, tends to cover the following employer activities:

- A criminal offence has been, is being or is likely to be committed;
- That a person has failed, is failing or is likely to have failed to comply with any legal obligation to which they are subject;
- Miscarriage of justice has occurred, is occurring or is likely to occur;
- That health or safety of an individual has been, is being or is likely to be endangered;
- That the environment has been, is being or is likely to be damaged;
- Information relating to the above is deliberately concealed.

9.2 An employee who makes a protected disclosure has the right not to be dismissed, subjected to victimisation or any detriment, because they have made a disclosure.

10. **Reporting Procedure**

10.1 Staff should consider whether their concerns would be better addressed through the use of the incident reporting procedure **BMS/5.02 – Incident Reporting and Investigation** rather than using this procedure. If you wish to report an incident, please speak to your line manager.

10.2 Staff should also consider whether their concerns would be better addressed through the use of the HR procedure **WI/2.01.05 - Grievance** rather than using this procedure. If you wish to report a HR related matter, please speak to your line manager or a member of the HR Team.

10.3 If any colleague believes reasonably and in good faith that malpractice exists in the work place, then we would encourage them to report this immediately to the Director of HR and Communications.

- By phone on the confidential **UK Whistleblowing Free Phone 0808 234 6176**
- By phone on the confidential **Ireland Whistleblowing Phone 1800 550 000**. At the English prompt dial: **800-643-0240** extension **3200**.

10.4 Any such disclosure will be treated in the utmost confidentiality and will be immediately investigated. The Director of HR and Communications will contact the whistleblower within 2 days to acknowledge the concerns raised.

10.5 If you have Accounting / Finance / Record keeping concerns, you may also raise them directly with the Stericycle corporate office by email to: [auditcommittee@stericycle.com](mailto:auditcommittee@stericycle.com)

This email address will go to the Chair of Stericycle’s audit committee.
11. **Investigation Procedure**

11.1 Once a concern has been raised, HR Admin will add the issue to the register and forward the details to the Strategic HR Business Partner. The Strategic HR Business Partner will then task the relevant HR Advisor to conduct an investigation into the case, utilising any necessary resource from other departments or business units. A report detailing the findings of the investigation will be provided to the Director of HR and Communications within 7 days of the initial concern being raised.

11.2 The Director of HR and Communications will then review the report and discuss the outcome of the investigation with the relevant members of the Leadership Team / Senior Management Team if appropriate.

11.3 Once the outcome of an investigation into a concern has been reported to the Company’s Leadership Team / Senior Management Team, a decision will be made on what further actions are needed including the implementation of a remedial action plan (BMS/1.04) and / or disciplinary actions (WI/2.01.04).

11.4 If the concern is classified as affecting patient safety, a redacted summary of the concern and subsequent findings should be reported to the Care Quality Advisory Committee for review and comment who will in turn provide any appropriate comments to the Leadership Team / Senior Management Team.

11.5 Consideration will also be given to reporting of the concern to any appropriate government department or regulatory agency.

11.6 The Ethics Committee will meet periodically, dependant on any concerns raised, to review this process and the outcome of any investigations conducted.

12. **Feedback of Outcome of Investigation**

12.1 The outcome resulting from the raised concern and its subsequent investigation should be communicated back to the originator of the raised concern before it can be formally closed.

12.2 This should occur within 14 days of the concern being raised. If it is not possible to complete the investigation within this time period the originator should be contacted to provide an update within 14 days.

12.3 If after these steps have been followed the originator is still not satisfied that their concern has been appropriately addressed or that they feel the matter is so serious that it cannot be discussed with anyone else, they should be advised to contact or write to Stericycle’s European Vice President.

13. **Unresolved Concerns**

13.1 If an employee has exhausted all the stages within this procedure and on reflection believes that appropriate actions have not been undertaken and that their concern(s) remain unresolved, they should report their concern to the appropriate external legislative or regulatory body.

13.2 Individuals are encouraged to use these internal procedures in the first instance and the Company hopes these procedures provide reassurance to the staff concerned.
13.3 However, the Company would also prefer that staff raise concerns with the appropriate regulator / body than not at all. Providing the staff are acting in good faith and have evidence to support their concern they can also contact amongst others:

- Care Quality Commission;
- Environment Agency;
- HM Revenue and Customs;
- Health and Safety Executive;
- Serious Fraud Office;
- Appropriate professional body, e.g. HCPC;
- Police.

13.4 Making a disclosure to any other party, except in exceptional circumstances, is unlikely to be a protected disclosure and could result in disciplinary action, including dismissal for gross misconduct.

13.5 Before any individual considers making such a disclosure, it is strongly recommended that they seek advice from the whistle-blowing charity – Public Concern at Work.

13.6 All concerns will be logged onto the register which will be securely held and maintained by the HR Team. The register will detail a description of the concern, date concern raised, investigation process and conclusion of the concern.
14. **Key Steps**

**START**

Employee identifies a concern

Does the concern fall within the scope of this procedure?  
YES

Employee raises concern via phone or via email using F2.05.01.

HR Team acknowledges receipt within 2 days and logs onto register.

Strategic HR Business Partner will task HR Advisors to conduct an investigation.

Report written and returned to Director of HR and Communications within 7 days.

Does the concern relate to an incident or near miss?  
YES

Refer to BMS/5.02 Incident Reporting and Investigation.

Does the concern relate to a grievance?  
YES

Refer to WI/2.01.05 Grievance.

Is the originator satisfied with the outcome?  
YES

Originator advised to report their concern to the appropriate legislative or regulatory body.

NO

Is the originator satisfied with the outcome?  
YES

Originator advised to escalate the concern to Stericycle European Vice President in writing.

NO

Care Quality Advisory Committee matter?  
YES

Concern discussed at next meeting with any information / advice forwarded to LT / SMT.

NO

Actions instigated by LT / SMT including notification to appropriate legislative or regulatory body if required.

Outcome of investigation reported to originator within 14 days of being raised and updates register.

END