1 Introduction
This procedure has been developed pursuant to MedAccess’s Business Integrity Policy and relevant legislation, and on terms consistent with its Code of Business Conduct. The policy applies to all members of staff at MedAccess, which for the purposes of this procedure applies to employees, officers, directors, consultants and contractors.

2 Whistleblowing
Whistleblowing is the reporting of suspected wrongdoing or dangers relating to our activities. This includes bribery, money laundering, terrorist financing, facilitation of tax evasion, fraud or other criminal activity, miscarriages of justice, health and safety risks, damage to the environment and any breach of legal or professional obligations. In the UK examples of such breaches of legal obligations include offences under the Bribery Act 2010 and the Modern Slavery Act 2015.

The Public Interest Disclosure Act 1998 (the “Act”) aims to encourage a climate of openness in the workplace by giving legal protection to staff who make certain “whistleblowing” disclosures that they reasonably believe to be in the public interest. The Act protects staff who raise genuine concerns as a whistleblower, free from the threat of unwarranted dismissal or victimisation by an employer or co-workers. These protections are also consistent with MedAccess’ principles, in particular to act in a way which is open, honest and fair, and treats all employees fairly.

MedAccess also has a strong commitment to integrity and ethical behaviour and encourages staff who have concerns about suspected serious malpractice or misconduct or any breach or suspected breach of law or regulation that may adversely impact the company, to voice those concerns without fear of harassment or victimisation.

MedAccess will respond to any allegations or acts, or attempted acts of interference, reprisal, retaliation, threats, coercion or intimidation against staff who report, disclose or investigate improper or illegal activities which they reasonably believe to be in the public interest and protect those who report such activities. This protection does not extend to a whistleblower where they have made false or bogus allegations, knowing such allegations to be false and such allegations may result in disciplinary action.

This reporting process should not be used by staff to raise complaints in relation to their own individual circumstances, including their treatment at work. Complaints of this nature should be raised via MedAccess’ Grievances and Complaints Procedure as set out in the Employee Handbook. If a staff member is unsure as to the right course, this should be raised with the Compliance Officer who will provide guidance.
3 Procedure

3.1 Introduction
We hope that in many cases you will be able to raise any concerns with your manager. However, where you prefer not to raise it with your manager for any reason, you should make a report to the Responsible Officer, currently MedAccess’ Compliance Officer.

3.2 Responsible Officer
MedAccess’ Compliance Officer will be responsible for overseeing the handling of all protected disclosures and concerns received via the whistleblowing channel and the investigation of any alleged interference, reprisals, retaliation or threats. The Compliance Officer will also be responsible for ensuring and overseeing the integrity, independence and effectiveness of MedAccess’ policies and procedures on whistleblowing, including policies and procedures protecting whistleblowers from retaliation resulting from reporting disclosures or concerns. They will manage the handling of complaints of misconduct or malpractice from external parties.

The Compliance Officer will report alleged misconduct or malpractice received via the whistleblowing channel and complaints received via the external complaints channel to MedAccess’s Audit and Finance Committee.

3.3 Legal Framework – Protected Disclosures (whistleblowing)
For a disclosure to be protected by the Act, it must relate to matters that “qualify” for protection.

Qualifying disclosures are disclosures which are made when a staff member reasonably believes that one or more of the following matters is happening, or is likely to happen in the future:

- a criminal offence has been committed, is being committed or is likely to be committed;
- a person has failed, is failing or is likely to fail to comply with any legal obligation to which he or she is subject;
- a miscarriage of justice has occurred, is occurring or is likely to occur;
- the health and safety of any individual has been, or is being or is likely to be endangered;
- the environment has been, is being or is likely to be damaged; or
- there has been a deliberate attempt to conceal any of the above.

Although the law identifies the above categories of disclosures as potentially being ‘protected’ and confers statutory protection for staff members making such disclosures, MedAccess recognises that there may be other, potentially serious matters outside of these categories which staff may wish to raise. These include:

- the exploitation or inappropriate treatment of third parties;
- conduct likely to damage the financial well-being, reputation or standing of MedAccess;
- serious breaches of MedAccess policies, procedures or Codes of Conduct; and
- deliberate concealment of any of the above.

### 3.4 Making a Disclosure

If a staff member wishes to make a disclosure or raise a concern under this reporting mechanism, does not feel comfortable using normal reporting lines within MedAccess’ organisational structure or has attempted to use such reporting lines and has been frustrated, they should prepare a whistleblower report detailing their concerns.

The report should be made in writing to the Compliance Officer as soon as possible and as far as is practicable within 30 days of the staff member becoming aware of the issues or concerns and should describe the details of the misconduct or malpractice clearly and with as much detail as possible. This report may be provided on an anonymous basis; however, MedAccess encourages staff to raise concerns on a named basis. Reports can be made directly by email to the Compliance Officer or to [compliance@medaccess.org](mailto:compliance@medaccess.org)

There may be occasions when a staff member considers it necessary to raise a matter externally if they feel that a matter has not been (or will not be) properly addressed within MedAccess or has been (or will be) covered up. MedAccess supports the work of the whistleblowing charity Protect and encourages staff to speak to them for confidential advice in such circumstances. Protect can be contacted via their confidential helpline +44 (0) 20 3 117 2520 or their website is at: [https://protect-advice.org.uk](https://protect-advice.org.uk)

### 3.5 Investigation

All disclosures and concerns reported via the whistleblower channel will be reviewed by the Compliance Officer, as soon as practicable after their receipt to evaluate the course of action. The Audit and Compliance Committee will be kept informed of the progress of any subsequent investigation, maintain confidentiality, and maintaining anonymity where appropriate.

All disclosures and concerns will be investigated by the Compliance Officer who will seek appropriate internal and external advice and assistance in completing a prompt investigation of the facts where the situation requires it. In some circumstances, and where the identity of the individual is known, an individual may be requested to provide additional information and/or attend a meeting to provide further information in order for a concern to be progressed further. Employees may be accompanied by a colleague at any meeting about a disclosure should they so wish. Equally an individual may maintain their anonymity should they wish to do so, recognising the limitations this may place on any investigation.

Should the disclosure or concern relate to a staff member, the staff member will normally be informed of the allegations as soon as appropriate during any formal investigation and will have the opportunity to provide their inputs during the investigation. However, in some cases, it may not be possible for those investigating to do this e.g. where the integrity of the investigation may be compromised. The staff member is under a duty to co-operate with the investigation and may engage legal counsel at their own cost to represent them in the investigation proceedings.
Where a disclosure concerns the conduct of the Compliance Officer, then the Chairman of MedAccess’ Audit and Compliance Committee will conduct the review and report to MedAccess’ Board of Directors.

MedAccess is committed to ensuring that all disclosures and concerns raised are dealt with appropriately, consistently, fairly and professional.

Individuals who raise disclosures or concerns under this reporting mechanism will be advised of the progress of the investigation and applicable timescales where possible and appropriate, subject to applicable legal constraints. Information provided in relation to any such investigation and/or outcome should be treated as confidential information.

### 3.6 Protection & Confidentiality

MedAccess recognises that in some cases, a staff member may wish to make a disclosure or raise a concern anonymously. However, MedAccess encourages staff to do so on a named basis as anonymous disclosures are more difficult to investigate and address and feedback is difficult, if not possible, to provide to the staff member.

Any staff member who believes that they have subject to interference, threats, reprisals, retaliation, coercion or intimidation because they have raised a concern under this reporting mechanism should inform the Compliance Officer immediately. MedAccess will treat any such treatment of a staff member as a serious disciplinary matter.

### 3.7 External Complaints

While the above Sections relate to reports from staff, genuine reports of misconduct or malpractice from external parties are a valuable source of information which MedAccess encourages. Such complaints will be treated confidentially and investigated by the Compliance Officer. It should be noted, however, that these external complaints are distinct from internal whistleblowing reports as the same legal protection against retaliation or reprisal does not apply as it does for protected disclosures made by staff members.

### 3.8 Reporting

The Compliance Officer will ensure that appropriate records of matters raised under this reporting mechanism are maintained. In the event reports are received under this mechanism the Audit and Finance Committee may periodically request a report from the Compliance Officer on the workings and effectiveness of the policy on whistleblowing and complaints and any reports received.

MedAccess will endeavour to ensure that the identity of any person making a disclosure, or a concern is kept confidential and only disclosed on a need to know basis. Papers relating to a protected disclosure will be held in a manner consistent with their confidential nature.