



UNIVERSITY OF
LIMERICK
OLLSCOIL LUIMNIGH

PROTECTED DISCLOSURES POLICY

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1 Introduction

1.1 Purpose of this Policy

1.1.1 This Policy implements the Protected Disclosures Act 2014 as amended by the Protected Disclosures (Amendment) Act 2022 (the “**Act**”) and related statutory guidance. The Act protects workers from retaliation if they speak up about wrongdoing in the workplace.

1.1.2 The University of Limerick is committed to the highest standards of integrity, transparency, probity, and accountability and recognises that workers play an important role in achieving this aim.

1.1.3 Persons who make protected disclosures (sometimes referred to as “**whistle-blowers**”) are protected by the Act, implemented in the University through this policy.

1.1.4 This Policy expresses the University’s commitment to:

- addressing concerns about any wrongdoing that is disclosed;
- encouraging the reporting of suspected wrongdoing by “Reporting Persons” as soon as possible, in the knowledge that such reports will be taken seriously and investigated as appropriate;
- protecting persons who make Disclosures under this Policy.

1.1.5 This Policy will:

- provide Reporting Persons with guidance as to how to raise concerns about wrongdoing;
- provide avenues for Reporting Persons to make Disclosures in confidence;
- provide reassurance to Reporting Persons that they can disclose Relevant Wrongdoings without fear of penalisation;
- reassure Reporting Persons that the confidentiality of their identity will be protected;
- provide a response, where appropriate and possible, to Reporting Persons with respect to Disclosures made; and
- protect Reporting Persons from penalisation or any threat of penalisation where the Reporting Person reasonably believes that the Disclosure tends to show Relevant Wrongdoing.

2 Scope

2.1 To Whom does the Policy Apply?

2.1.1 This Policy applies to all “Reporting Persons” as set out in the Definition below.

2.1.2 Whilst the protections of the Act arise independently of any individual’s contract of employment, this Policy does not form part of any contract of employment and as such it may be amended by the University from time to time.

2.2 Definitions

2.2.1 In this Policy, the following capitalised terms (which are used throughout this Policy) shall have the following meanings:

Term	Definition
The Act	The Protected Disclosures Act 2014 as amended by the Protected Disclosures (Amendment) Act 2022.
Designated Person	The Designated Person is the person to whom the Protected Disclosure should be made. In the University, the Designated Person is the Director of Human Resources or their nominee .
Alternative Designate Person	If circumstances arise such that it is inappropriate that the Director of Human Resources be involved in the process, another member of the Disclosures Group will fulfil the role of Designated Person (the “Alternative Designated Person”), as the Reporting Person may consider appropriate to report the Disclosure. For the purposes of this Policy, references to Designated Person shall include Alternative Designated Person where appropriate.
Disclosure	A report of information tending to show alleged wrongdoing made under this Policy, and if deemed a Protected Disclosure, will be dealt with in accordance with this Policy.
Protected Disclosure	A Protected Disclosure is defined in Section 5 of the Protected Disclosures Act 2014. In summary terms, it is the Disclosure of Relevant Information made by a Reporting Person which, in the reasonable belief of the Reporting Person tends to show one or more Relevant Wrongdoings, and which came to the attention of the Reporting Person in a work-related context.
Disclosures Group	<ul style="list-style-type: none">• The Director of Human Resources;• Provost & Deputy President;• Chief Corporate Officer;• Chief Financial Performance Officer;• Vice President, Research;• Corporate Secretary.• An additional person may be nominated by the President to the Disclosures Group in circumstances where

Term	Definition
	<p>a member of the Disclosures Group is not in a position to sit on the Disclosures Group or where the Disclosures Group believe that person's expertise is relevant to the Disclosure.</p>
<p>Reporting Person</p>	<p>The Act uses the term "Worker", but in this policy the term "Reporting Person" is used instead, reflecting the broader application of the term to individuals who are not necessarily employees. However, the term is defined in the same way as in the Act, and means:</p> <ul style="list-style-type: none"> (a) an individual who is or was an employee; (b) an individual who entered into or works or worked under any other contract, whether express or implied and (if it is express) whether oral or in writing, whereby the individual undertook to do or perform (whether personally or otherwise) any work or services for another party to the contract for the purposes of that party's business; (c) an individual who works or worked for a person in circumstances in which <ul style="list-style-type: none"> (i) the individual is introduced or supplied to do the work by a third person (ii) the terms on which the individual is engaged to do the work are or were in practice substantially determined not by the individual but by the person for whom the individual works or worked, by the third person or by both of them; (d) an individual who is or was provided with work experience pursuant to a training course or programme or with training for employment (or with both) otherwise than under a contract of employment; (e) an individual who is or was a shareholder of an undertaking; (f) an individual who is or was a member of the administrative, management or supervisory body of an undertaking, including non-executive members; (g) an individual who is or was a volunteer; (h) an individual who acquires information on a relevant wrongdoing during a recruitment process; and

Term	Definition
	<p>(i) an individual who acquires information on a relevant wrongdoing during pre-contractual negotiations (other than a recruitment process referred to in (h) above).</p>
<p>Relevant Wrongdoing</p>	<p>This Policy covers the disclosure of information which, in the reasonable belief of the Reporting Person, tends to show one or more of the following wrongdoings has been, is being or is likely to be committed:</p> <ul style="list-style-type: none"> (a) a criminal offence; (b) a failure to comply with any legal obligation other than one arising under the contract of employment of the person making the disclosure; (c) a miscarriage of justice; (d) the endangering of the health and safety of any individual; (e) damage to the environment; (f) unlawful or improper use of funds or resources of a public body; (g) an act or omission by or on behalf of a public body which is oppressive, discriminatory, grossly negligent or constitutes gross mismanagement; (h) an act or omission that is unlawful or that defeats the object or purpose of certain rules of the European Union in the following areas: <ul style="list-style-type: none"> (i) public procurement; (ii) financial services, products and markets, and the prevention of money laundering and terrorist financing; (iii) product safety and compliance; (iv) transport safety; (v) protection of the environment; (vi) radiation protection and nuclear safety; (vii) food and feed safety and animal health and welfare;

Term	Definition
	<ul style="list-style-type: none"> (viii) public health; (ix) consumer protection; (x) protection of privacy and personal data, and security of network and information systems; (xi) or affects the financial interests of the European Union or the internal market; or (xii) the deliberate concealment of any of the above matters. <p>It should be noted however, that a matter is not deemed a ‘relevant wrongdoing’ where it is the Reporting Person’s function or that of the University to detect, investigate or prosecute that matter and does not consist of or involve an act or omission on the part of the University.</p>
Relevant Information	<p>For the purposes of this Policy information is deemed to be Relevant Information if:</p> <ul style="list-style-type: none"> (a) in the reasonable belief of the Reporting Person, it tends to show one or more Relevant Wrongdoings; and (b) it came to the attention of the Reporting Person in a work-related context.
Penalisation	<p>Penalisation means any direct or indirect act or omission which occurs in a work-related context, is prompted by the making of a report and causes or may cause unjustified detriment to a Reporting Person, and includes the items set out in Appendix III.</p>

2.3 In what Situations does the Policy Apply?

2.3.1 “Work Related Context”

2.3.2 To come within the scope of this Policy, the Relevant Information must come to the attention of the Reporting Person in a work-related context.

2.3.3 A “work-related context” means current or past work activities in the University through which, irrespective of the nature of these activities, the Reporting Person acquires information concerning a Relevant Wrongdoing, and within which the Reporting Person could suffer penalisation for reporting the information.

2.3.4 It should be noted that Reporting Persons are neither required nor are they entitled to investigate such Relevant Information themselves in order to find proof of their concerns, and they should not endeavour to do so.

2.4 Third Parties

2.4.1 Concerns raised under this Policy may sometimes relate to the actions of a third party, such as a supplier or service provider. In particular circumstances, the law may protect a Reporting Person if he/she raises the matter with the third party directly. However, the University encourages Reporting Persons to report such concerns internally first. Reporting Persons should contact the Designated Person for guidance.

2.5 Personal Grievances

2.5.1 The Act is intended to deal with reports of “Relevant Wrongdoing” as already defined. A matter concerning interpersonal grievances exclusively affecting a Reporting Person, such as grievances about interpersonal conflicts involving the Reporting Person and another worker, or a complaint to the University or about the University which concerns the Reporting Person exclusively, is not a Relevant Wrongdoing for the purposes of the Act.

2.5.2 Interpersonal grievances should generally be dealt with under the University’s internal grievance, or dignity at work, procedures. If a matter is raised as a Protected Disclosure, but following the initial assessment referred to below, is determined in fact to be a grievance or a dignity and respect issue, it should be addressed under those procedures / policies.

2.6 Normal day-to-day operational reporting

2.6.1 This Policy is not intended to act or be used as a substitute for normal day to day operational reporting or other internal employment procedures.

2.7 Who is Responsible for Ensuring that the Policy is Implemented and Monitored?

Person / Group	Responsible for:
President	<ul style="list-style-type: none"> • The President has delegated various functions under this policy to other persons (e.g. the Designated Person, the Corporate Secretary, the Disclosures Group, etc.) the President maintains overall responsibility for the successful implementation of this Policy.
Reporting Person	<ul style="list-style-type: none"> • Bringing the matter to the attention of the Designated Person or the Protected Disclosure Group; • Providing information related to the alleged Relevant Wrongdoing; • Cooperating when requested to with any process outlined in this Policy; • Exercising discretion and committing to keeping the reporting and investigation process confidential;

Person / Group	Responsible for:
Designated Person (or Alternative Designated Person)	<ul style="list-style-type: none"> • Receiving and following up on Disclosures; • Acknowledging receipt of the Disclosure in writing to the Reporting Person; • Convening the chairing the Disclosures Group. • Maintaining communication with the Reporting Person and where necessary, requesting further information from and providing feedback to the Reporting Person as appropriate.
Disclosures Group	<ul style="list-style-type: none"> • Conducting an Initial Assessment of the Disclosure to determine whether there is evidence that a Relevant Wrongdoing may have occurred; • Managing the Disclosure in accordance with this Policy; • Providing the Reporting Person with periodic updates; • Dealing with any Disclosures from an external body following the procedures set out in this Policy; • Advising where appropriate or upon request, the Chair of the Audit and Risk Committee on the outcome of a Disclosure; • Considering the outcome of any investigation and advising the President accordingly.
The Audit and Risk Committee	<ul style="list-style-type: none"> • Oversight of this Policy; • Providing independent advice to Governing Authority on the Disclosure processes; • Reviewing the effectiveness and adequacy of this Policy and staff awareness of it; • Referring any Disclosures received from external third parties to the Disclosures Group for initial assessment and processing as appropriate; • Ensuring Disclosures are properly recorded and accounted for in the financial statements.
All UL employees	<ul style="list-style-type: none"> • Awareness and utilisation of this Policy where concerns about wrongdoing have come to their attention in a work-related context.

Person / Group	Responsible for:
	<ul style="list-style-type: none"> • Processing exclusively personal grievances through the relevant HR policies rather than the Disclosures Policy. • Cooperation with this Policy and any related investigation as may be appropriate.
Corporate Secretary	<ul style="list-style-type: none"> • Reporting requirements as set out in Paragraph [9.1] of this Policy.

3 Context

3.1 Legal and Regulatory Context

3.1.1 This Policy implements the Protected Disclosures Act 2014 as amended by the Protected Disclosures (Amendment) Act 2022 (“the Act”) and the related Statutory Guidance.

3.1.2 Reporting Persons should be mindful of the fact that separate and subject matter specific reporting provisions exists under other legislation.

3.2 Related Policies

3.2.1 The University’s Disclosures Policy is a key component of the University’s governance. This Policy should be read, where relevant, in conjunction with the University’s Anti-Fraud Policy.

3.2.2 If a Disclosure relates to fraud, or suspected fraud, the Reporting Person raising a concern should also consult with the University’s Anti-Fraud Policy. Other policies which may be relevant to the Disclosure are set out in Section 5: Related Documents.

4 Policy Statements

4.1 Key Principles for Protected Disclosures

4.1.1 The University is committed to creating a workplace culture that supports the making of Disclosures and provides protection for Reporting Persons. This Policy is informed by the following key principles:

- The University will ensure that all reports of Relevant Wrongdoing will, as a matter of routine, be the subject of an initial assessment and any appropriate follow-up action.
- The University will ensure that the identity of the Reporting Person and any other person concerned will be adequately protected.

- The focus of the process will primarily be on the Disclosure, and whether it is a Relevant Wrongdoing, and not on the Reporting Person.
- The motivation of the Reporting person in making the Disclosure is irrelevant. Provided that the Reporting Person discloses information relating to a Relevant Wrongdoing, in an appropriate manner, and based on a reasonable belief, no question of penalisation will be tolerated.

4.2 Penalisation

4.2.1 If a Reporting Person makes a Protected Disclosure, they are protected by law against Penalisation as a result of having made a Protected Disclosure.

4.2.2 Any form of penalisation is prohibited, and the University shall take all appropriate measures to ensure that penalisation of Reporting Persons who make a report will not be tolerated and that all complaints of penalisation shall be addressed.

4.2.3 Any individual who hinders or attempts to hinder a Reporting Person in making a Disclosure may be guilty of a criminal offence under the Act in addition to facing the prospect of disciplinary proceedings.

4.3 Confidentiality

4.3.1 All persons involved in the reporting or investigation of Disclosures under this Policy shall exercise discretion and must commit to keeping the reporting and investigation process and the identity of all individuals involved confidential, except where departures from that general rule are necessitated by this Policy and/or by law as outlined further below.

4.3.2 The Designated Person, or any other person in the University who receives a Disclosure, or anyone else to whom a Disclosure is shared to allow them to carry out their functions in relation to the matter, shall not disclose the identity of the Reporting Person to anyone else (or disclose any information that might reveal the identity of the Reporting Person) without the explicit consent of the Reporting Person, other than strictly within the provisions permitted in the Act.

These provisions are as follows:

- (a) where the disclosure of the identity of the Reporting Person is a necessary and proportionate obligation imposed by law in the context of investigations or judicial proceedings, including with a view to safeguarding the rights of others to a defence in such proceedings;
- (b) where the person to whom the Disclosure was made or transmitted
 - (i) took all reasonable steps to avoid disclosing the identity of the Reporting Person, or

- (ii) reasonably believes that disclosing the identity of the Reporting Person is necessary for the prevention of serious risk to the security of the State, public health, public safety, or the environment; or
- (iii) where the disclosure of the identity of the Reporting Person is required by law.

4.3.3 In these circumstances, the Reporting Person will be notified, in writing, before their identity is disclosed, unless such notification would jeopardise:

- (a) the effective investigation of the Disclosure;
- (b) the prevention of serious risk to security of the State, public health, public safety, or the environment; or
- (c) the prevention or prosecution of a crime.

4.4 Anonymous Disclosures

4.4.1 The University does not encourage Reporting Persons to make Disclosures anonymously because a proper investigation may be more difficult or impossible to undertake if the University cannot obtain further information from the Reporting Person. While the University reserves the right to process anonymous Disclosures, the University is not under a legal obligation to do so, and it may choose not to do so.

4.4.2 Anonymous Disclosures will be considered at the discretion of the Disclosures Group and may be acted upon to the extent that is practicable, while recognising that the University may be restricted in its ability to investigate the matter in the absence of the knowledge of the identity of the Reporting Person. When exercising this discretion, the Disclosures Group shall take into consideration the seriousness of the issue(s) raised, the credibility of the concern and the capacity of the University to investigate the allegation.

4.4.3 There is a distinction between an anonymous Disclosure (where identity is withheld by the Reporting Person) and a confidential Disclosure (where the identity of the Reporting Person is made known and is protected under this Policy). Reporting Persons who are concerned about possible penalisation if their identity is revealed should come forward to the Designated Person and appropriate measures can then be taken to preserve confidentiality to the fullest extent practicable.

4.4.4 Any anonymous Reporting Person who subsequently identifies themselves as the Reporting Person shall be afforded protections under the Act where the matter disclosed constitutes a Protected Disclosure. A Reporting Person cannot obtain redress under the Act without identifying themselves as part of the process of seeking redress.

4.5 Data Protection and Data Management

4.5.1 Most, if not all, Disclosures will involve the processing of personal data. At a minimum, this will likely include the personal details of the Reporting Person but might also include information regarding persons concerned or other third parties.

- 4.5.2** All personal data shall be processed in accordance with applicable data protection law and the [UL Data Protection Policy](#). Where necessary and proportionate, the University may restrict certain data subject access rights under data protection law to ensure protection of the identity of Reporting Persons and others and to prevent any efforts to hinder reporting or to impede, frustrate or slow down follow-up on Disclosures received.
- 4.5.3** The University shall ensure that the arrangements in place to handle records relating to the protected disclosure are kept secure and confidential. Access to the records should be strictly limited to those who require access in accordance with this Policy i.e. the Designated Person, to members of the Disclosures Group, or to other appropriate persons, as required.

5 Making a Protected Disclosure

5.1 Informal Reporting

- 5.1.1** It is recognised that individuals to whom this Policy applies may wish to raise concerns informally at first rather than immediately using the formal internal channels to make a Disclosure. This is particularly the case where the concern may be a minor one, albeit that it may technically be a relevant wrongdoing under the Act (e.g., a minor health and safety concern).
- 5.1.2** Where they are comfortable doing so, such concerns can be addressed by the line manager in the first instance.
- 5.1.3** The line manager shall consider the concerns and shall make such enquiries as are necessary and shall provide feedback to the Reporting Person.
- 5.1.4** If the line manager considers it appropriate, they shall direct a Reporting Person to the formal internal reporting channel as outlined at section 5.2.

5.2 Internal Reporting Channels

- 5.2.1** Where a Reporting Person reasonably believes that it is not appropriate to raise their concern through existing management reporting structures as set out in section 5.1, then the Reporting Person may report any relevant wrongdoing in the manner set out below.
- 5.2.2** It is important to note that the internal reporting channel is accessible to all Reporting Persons to whom this Policy applies equally; Reporting Persons who are external to the University should utilise the reporting channel set out herein.
- 5.2.3** The Reporting Person may make their Disclosure to the Designated Person by way of email to protecteddisclosures@ul.ie or by way of written communication. If the Disclosure relates to the Designated Person, the Disclosure should be made as follows:
- to an individual member of the Disclosure Group by written communication.

- if the Disclosure concerns a member of the Disclosure Group, the Reporting Person may make the Disclosure to one of the other members of the Disclosure Group or to the President who shall determine how the matter is to be taken forward (email: President@ul.ie).
- if the Disclosure concerns the President, the Reporting Person may make the Disclosure to the Chancellor. The Chancellor will establish a special Disclosure Group, consisting of members of the Governing Authority, who will follow the steps outlined in this Policy.

5.2.4 Where a Disclosure is made by way of written communication (i.e. not by email), any such communication should be marked as strictly private & confidential and sent to the office address of the Designated Person.

5.2.5 The Disclosure should be factual and include, in so far as relevant and possible:

- the Reporting Person's name, position in the organisation, place of work and confidential contact details;
- relevant information in respect of the Relevant Wrongdoing (what is occurring / has occurred and how) and any supporting information;
- the date of the alleged Relevant Wrongdoing (if known) or the date the alleged Relevant Wrongdoing commenced or was identified;
- where and when the Relevant Wrongdoing occurred;
- whether or not the Relevant Wrongdoing is still ongoing;
- whether it has been reported to anyone else within the University or externally and if so to whom, when and what action was taken;
- whether there is any supporting information or documentation;
- the name of any person(s) allegedly involved in the alleged Relevant Wrongdoing (if any name is known and the Reporting Person considers that naming an individual is necessary to expose the Relevant Wrongdoing disclosed); and
- any other relevant information.

5.2.6 A template Disclosures Form in [Appendix I](#) is available for making Disclosures and Reporting Persons are encouraged to use this form.

5.3 Acknowledging Receipt of a Disclosure

5.3.1 The Designated Person shall acknowledge, in writing, to the Reporting Person receipt of the Disclosure within 7 days of receipt of the Disclosure. The acknowledgement shall include a link to this Policy.

5.4 Assessment of a Disclosure

5.4.1 Upon receipt of a Disclosure made under this Policy, the Designated Person will convene a meeting of the Disclosures Group and shall advise that a Disclosure has been received. The Disclosures Group shall determine which members of the Disclosures Group shall review the Disclosure and shall consider if any additional members are required on the Disclosures Group. The minimum quorum for the Disclosures Group assessing the Disclosure shall be three. Any individual who is the subject of a Disclosure will not serve on the Disclosures Group reviewing that Disclosure.

5.4.2 The Designated Person shall convene a meeting of the Disclosures Group. The Disclosures Group will normally be chaired by the Designated Person. Where the Designated Person is not a member of the Disclosures Group assessing the Disclosure, the Disclosures Group shall appoint a Chair from its members.

5.4.3 The Disclosures Group will undertake an initial assessment to determine whether or not the information constituting the Disclosure should be treated as a Protected Disclosure.

5.4.4 The assessment process will include the following steps:

- Determining the nature of the information disclosed and the procedure or procedures most appropriate for addressing the matter;
- Clarifying the basis of the concerns raised and establishing whether there is prima facie evidence that a Relevant Wrongdoing may have occurred. Prima facie evidence means sufficient evidence that, unless rebutted, will be sufficient to prove that the Relevant Wrongdoing may have taken place.
- Considering the risk associated with the issue and taking immediate action if the alleged Relevant Wrongdoing involves a serious loss, reputational risk, or danger to others;
- Having due regard to the nature and seriousness of the alleged Relevant Wrongdoing; and
- Considering whether the alleged wrongdoing is serious or minor.

5.4.5 If it is determined that the Disclosure meets the definition of a Protected Disclosure under the Act, the assessment will include consideration of whether the Relevant Wrongdoing disclosed is something that can or should be investigated and, if so, by whom. If an investigation is decided upon the Disclosures Group will consider the nature and extent of same. This could consist of an informal approach for less serious wrongdoings, or it could be a detailed and extensive investigation of serious wrongdoings or an external investigation by another body.

5.4.6 The Disclosures Group may seek further information from the Reporting Person.

- 5.4.7** Having carried out the initial assessment, the Disclosures Group may close the matter where they determine that;
- (a) there is no/insufficient evidence that a Relevant Wrongdoing may have occurred;
 - (b) the matter is outside scope of the legislation; and thus, the Policy;
 - (c) the matter would be more appropriately addressed under a different policy of the University;
 - (d) that matter has already been investigated; or
 - (e) there is other good and substantial reason.
- 5.4.8** If it is unclear whether the information should be treated as a Protected Disclosure, the Designated Person/ Disclosures Group should treat the information as a Protected Disclosure (and protect the identity of the Reporting Person as appropriate) until the Disclosures Group is satisfied that the information is not a Protected Disclosure. It may be necessary as part of this assessment process to differentiate between Protected Disclosures and personal grievances.
- 5.4.9** The Designated Person will provide feedback to the Reporting Person within a reasonable time, being not more than 3 months from the date of the acknowledgement of receipt of the Disclosure was sent to the Reporting Person.
- 5.4.10** Where the Reporting Person so requests in writing, the Disclosures Group will provide further feedback at intervals of 3 months until such time as the procedure concerned is closed.
- 5.4.11** Where the assessment concludes that the matter should be more appropriately dealt with under another of the University's policies the Designated Person will advise the Reporting Person of the appropriate Policy.

6 Investigation

- 6.1.1** Where the Disclosures Group decides that a Disclosure will be investigated, the scope and of the investigation shall be determined by the Disclosures Group prior to the commencement of the investigation.
- 6.1.2** The investigation may, depending on the nature of the Disclosure, be carried out under an appropriate University Policy.
- 6.1.3** The terms of reference shall ensure that the general principles of natural justice and fair procedure are provided for.
- 6.1.4** The Disclosures Group may appoint a person or persons to carry out the investigation. The Disclosures Group may appoint investigators from within the University or may, at its discretion, appoint an external third-party investigator, or if considered

appropriate the Disclosures Group may appoint a combination of internal and external individuals as investigators.

- 6.1.5** In the course of the investigation the Reporting Person who made the Disclosure may be required to attend meetings to provide further information/clarification as may or may not, as determined by the Disclosures Group, be required. If any University employee who is required to cooperate with the investigation refuses to do so, the Disclosures Group may refer this to the Department of Human Resources or other appropriate person.
- 6.1.6** The person(s) appointed to carry out the investigation will provide a written report to the Disclosures Group on the findings of their investigation that will include recommendation(s) for consideration by the Disclosures Group. The investigation report and/or findings of may be used in any subsequent disciplinary process that may ensue as a result of the Protected Disclosure and its investigation.
- 6.1.7** Where a Disclosure relates to alleged wrongdoing on the part of a particular individual (the "Respondent"), the Respondent is also entitled to appropriate protections, in accordance with the principles of fair procedures and natural justice.
- 6.1.8** Arising from the University's duty of confidentiality to employees, and its legal obligations under the Data Protection Acts/General Data Protection Regulations, the University may be prevented from giving the Reporting Person specific details of the investigation, personal information relating to another worker, or any action taken as a result. The Reporting Person should treat any information about the investigation as strictly confidential. Information provided to the Reporting Person by the University should be treated as information given in confidence and should not be disclosed further, other than to a legal advisor or trade union representative or unless the information forms part of a further protected disclosure being made via another channel. A breach of these confidentiality obligations is a serious matter and may result in the taking of disciplinary action.

6.2 Outcome

- 6.2.1** Upon receipt of the investigator's report, the Disclosures Group shall advise the President of the outcome. The President (or such other person to whom the President may delegate responsibility) shall ensure the implementation of agreed actions, if any, arising from the report. This may include changes to the way in which the University conducts its operations or referring certain matters to the Human Resources Division to initiate disciplinary proceedings in accordance with Statute No.4 on Employee Disciplinary Matters and Termination of Employment.
- 6.2.2** The Reporting Person may be subject to disciplinary action in accordance with the University's disciplinary procedures in circumstances where:
- (a) the Disclosure relates to their own wrongdoing
 - (b) they are found to have provided false information as part of the Disclosure
 - (c) they make a Disclosure without reasonable belief that it is true.

6.2.3 Other employees (not being the Reporting Person) may be subject to disciplinary action in accordance with the University's disciplinary procedures in circumstances where:

- (a) they are found to have attempted to prevent or obstruct a Reporting Person from making a Disclosure or they engage in penalisation as defined;
- (b) they are found to have engaged in wrongdoing.

6.2.4 The outcome or relevant elements of the outcome of the investigation will be conveyed as appropriate by the Recipient to the Reporting Person. The feedback conveyed to the Reporting Person shall be as set out in [Appendix IV](#).

6.2.5 Upon completion of the investigation a written report will be presented by the Chairperson of the Disclosures Group to the Governing Authority Audit & Risk Committee setting out:

- Description of Disclosure
- Name of investigator and Terms of Reference (if any)
- Findings/outcome
- Any other relevant information/recommendations

The Disclosures Group may advise the outcome to other external bodies as appropriate, including but not limited to the University Insurers; An Garda Síochána; Higher Education Authority; Department of Further and Higher Education, Research, Innovation and Science; and any other relevant person/ entity.

7 Review

7.1.1 The Reporting Person may seek a review in writing to the Disclosures Group of the following:

- The conduct or outcome of any follow-up actions (including any investigation) taken on foot of the receipt of a Disclosure and/or following the conclusion of a report into a Disclosure;
- The conduct or outcome of any investigation into a complaint of penalisation; and
- Any decision to disclose the identity of a Reporting Person (except in exceptional cases).

7.1.2 Any such review will be undertaken internally or by a person or persons external to the University as nominated by the President.

7.1.3 The request for review must be made within one month of communication to the Reporting Person of the outcome (or relevant elements of the outcome) of the investigation and must set out the reasons for the review.

7.1.4 The role of the reviewer shall not be to re-investigate the matter in question but to address the specific issues referred to at Paragraph [7.1.1] above.

The review shall be confined to:

- whether the correct procedures were followed;
- whether, in the case of an investigation, the terms of reference were adhered to;
- whether the conclusions/findings could or could not reasonably be drawn from the information/evidence on the balance of probability;

7.1.5 Where a review finds significant shortcomings or failings in the process, the President should then consider what further action(s) may or may not need to be taken to address such matters.

7.1.6 The outcome of the review shall be final and there shall be no entitlement to further reviews of the same issue.

8 Protection/Support for Reporting Persons Making Disclosures

8.1 The University is committed to ensuring that Reporting Persons who make a Protected Disclosure under this Policy will not suffer any penalisation for having done so.

8.2 It should be noted that the University will not tolerate any form of penalisation of a Reporting Person as a result of making a Protected Disclosure. The University will take all necessary actions to support Reporting Persons who raise such concerns, up to and including the initiation of disciplinary action against employees found to have engaged behaviours amounting to penalisation.

8.3 If a Reporting Person believes he/she has been subjected to penalisation, then he/she should inform the Disclosures Group. It will be the responsibility of the Disclosures Group to consult with the Director of Human Resources to ensure that appropriate action(s) including those referred to above are taken.

8.4 Support and Advice

8.4.1 Any employee who makes a Disclosure may avail of the services of the University's Employee Support Service (see [Appendix II](#)).

8.4.2 A Reporting Person may wish to seek advice and/or support from their union in relation to any matter arising under this Policy subject to the observation of the confidentiality obligations of the Act.

8.4.3 Information about what wrongdoings can be reported as a Protected Disclosure, how to make a Disclosure and the protections from penalisation can be found on the Citizens Information website. In addition, Transparency International Ireland runs a free Speak Up Helpline and Legal Advice Centre for people who have made or are considering making a Protected Disclosure.

9 Reporting and Information Management

9.1 The Act requires the University to publish a report annually that sets out the number of Protected Disclosures made to the University, what actions (if any) were taken in response to them and such other information in relation to the Protected Disclosures as may be required by the Minister from time to time.

9.2 These particulars referred to above shall be furnished without disclosing any information that might identify any persons, including the Reporting Person(s) who have made the Disclosure(s). This information requirement applies to all Protected Disclosures received irrespective of whether they are being dealt with formally or informally.

9.3 The Corporate Secretary shall engage with the Director of Human Resources to ensure an appropriate system for the management of records is in place to record and track Protected Disclosures.

10 Disclosures to an External Party

10.1 The aim of this policy is to provide an internal mechanism for reporting, investigating, and remedying any Disclosure of potential wrongdoing. A Reporting Person must make a Disclosure in the manner set out in the 2014 Act in order to gain the protections provided therein.

10.2 In most cases, Reporting Persons should not find it necessary to make Disclosures to anyone externally, and higher standards apply when Disclosures by Reporting Persons are made externally. In some specified circumstances it may be appropriate or required to report concerns to another statutory body such as a regulator or An Garda Síochána.

10.3 It will very rarely, if ever, be appropriate to alert the media and, in general, Relevant Persons should only do so as a last resort. The University strongly encourages Reporting Persons to seek advice before reporting a concern to anyone externally.

10.4 The University acknowledges that there may be circumstances where a Reporting Person may consider it necessary to make a Disclosure externally and the Act does provide for a number of avenues in this regard in specified circumstances.

- 10.5** A Reporting Person may make a Disclosure to one of the prescribed persons listed in Act (a “**Prescribed Person**”) or to the Protected Disclosures Commissioner if they reasonably believe that the relevant wrongdoing is within the remit of the Prescribed Person by reason of the nature of their responsibilities or functions, and where they believe that the information disclosed, and any allegation contained in it, are substantially true.
- 10.6** In general, Prescribed Persons have regulatory functions in the area which are the subject of the allegations. The Chief Executive Officer of the Higher Education Authority is the prescribed person for the University and the Data Protection Commission for matters concerning data protection. A full list of Prescribed Persons by sector is available on gov.ie.
- 10.7** The Office of the Protected Disclosures Commissioner has certain powers and responsibilities under the Act. The Commissioner’s primary duty is to refer any reports received under the Act to the most appropriate prescribed person (or other suitable person, if a prescribed person cannot be identified).
- 10.8** For the purposes of enabling the making of Disclosures by Reporting Persons, Prescribed Persons and the Protected Disclosures Commissioner are required to establish, maintain, and operate independent and autonomous external reporting channels and procedures for receiving and handling such Disclosures and for follow-up of same.
- 10.9** The Act also sets out procedures where a Reporting Person may, in specified circumstances, make a Disclosure to a relevant Minister. For the University the relevant Minister is the Minister of Further and Higher Education, Research, Innovation and Science. The Reporting Person must reasonably believe that the information disclosed tends to show one or more relevant wrongdoings; and one or more of the following must also apply:
- (a) The Reporting Person has previously made a Disclosure of substantially the same information to their employer, other responsible person, prescribed person, or relevant Minister, as the case may be, but no feedback has been provided to them in response to the Disclosure within the period allowed, or, where feedback has been provided, the Reporting Person reasonably believes that there has been no follow-up or that there has been inadequate follow-up;
 - (b) The Reporting Person reasonably believes the head of the public body concerned is complicit in the relevant wrongdoing reported;
 - (c) The Reporting Person reasonably believes that the Disclosure contains information about a relevant wrongdoing that may constitute an imminent or manifest danger to the public interest, such as where there is an emergency or a risk of irreversible damage.
- 10.9.2** If any person, on behalf of the University, receives a Disclosure from an external party as defined in the Act, it must be sent to the Disclosures Group. The Disclosures Group will follow the procedures set out in this Policy.

11 RELATED DOCUMENTS

- Policy for Conflicts of Interest
- Data Protection Policy
- Anti-Fraud Policy
- [Human Resources Policies](#)
- [Finance Polices](#)

12 DOCUMENT CONTROL

Document Version	Version 1
Document Owner	Human Resources/Corporate Secretary
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Consulted with	Unite – January 2023
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Date	31 January 2023
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Scheduled Review Date:	01 January 2024

Appendix I
DISCLOSURE FORM

Disclosure Form

This Form is to facilitate the making of Disclosures in accordance with the Protected Disclosures Policy.

Before completing this form, you should:

1. Read the Protected Disclosures Policy carefully and consider whether what is being disclosed is a Disclosure and whether the Protected Disclosures Policy is relevant and applicable or whether another University policy (such as the Grievance Policy or Policy and Procedures for Workplace Dignity and Respect) is applicable.
2. Ensure that you have a reasonable belief that the information being disclosed tends to show one or more Relevant Wrongdoings.
Consider if the informal reporting mechanism is appropriate to address your concerns in the first instance. Please note that disclosures must be made in good faith and relate to a matter that you have reasonable grounds to be concerned about.

Personal Details of the Person Making the Disclosure

Name: _____ Job Title: _____
Staff _____ Faculty/Department: _____
Number: _____
Address: _____
Telephone: _____ Email: _____
Do you want your identity Yes/No _____
protected?

Details of the Disclosure

(Care should be taken to only include the name(s) of individual(s) directly relevant to the report.)

- a) Date of alleged Relevant Wrongdoing (if known) or Date the alleged Relevant Wrongdoing commenced or was identified: _____
- b) Is the alleged Relevant Wrongdoing still ongoing: Yes ___ No ___ Unsure ___
- c) Has the alleged Relevant Wrongdoing already been disclosed within the University or externally and if so by whom, when and what action was taken?

d) Details of the alleged Relevant Wrongdoing:

e) Name of any person(s) allegedly involved in the alleged Relevant Wrongdoing (if known): _____

f) Any other relevant information.

Signature: _____ Date: _____

Completed forms are to be returned to one of the following:

- To the Designated Person at protecteddisclosures@ul.ie
- To the President if the matter relates to a member of the Disclosure Group at president@ul.ie
- To the Chancellor of the Governing Authority if the matter relates to the President at chancellor@ul.ie

Appendix II

UNIVERSITY OF LIMERICK EMPLOYEE SUPPORT SERVICE

The University of Limerick has an **Employee Support Service (ESS)** in place.

The ESS is a confidential counselling and advice service to assist all of us in dealing with personal issues that could pose a threat to our health, well-being, relationships, or employment.

- The service is free – the University of Limerick bears the cost of this service.
- The service is voluntary – the decision to use the service and avail of counselling rests with the individual.
- The service is confidential and independent – and provided by an external company called Inspire Wellbeing.

How does the Support Service operate?

Inspire Wellbeing, an external provider, engage a range of professional and experienced counsellors and practitioners for this service. All counsellors/ practitioners meet the training and experience requirements of professional bodies such as the Psychological Society of Ireland (PSI) or the Irish Association of Counsellors and Psychotherapists (IACP).

To access this, you call the freephone helpline number Freephone: **1-800-201-346**, which is available **24 hours a day, 7 days a week**. Users may prefer to access this number from a private telephone as UL telephone bills are itemised. From here, you will be referred to the appropriate counsellor. You will be able to avail of up to six counselling sessions in a twelve-month period.

Who can use the ESS?

This service is provided for all University of Limerick employees and their family members. A family member is defined as a partner or adult child (18+ years) residing at the same address as the employee.

We all go through stages where life seems tough, and you may be finding it hard to cope with day-to-day issues. This service can also be used to help with a variety of difficulties such as bereavement, stress, relationship problems, issues with alcohol, drugs, or gambling, etc.

Will my employer know I am using the ESS?

No. The University will not be told who is using the service and receive only anonymous figures for evaluation of the service.

When is the ESS available?

Access to the helpline is available 24 hours a day, 7 days a week. Freephone:1-800-201-346. Staff can also access the ESS Support Hub here: <https://www.inspiresupporthub.org>

Appendix III
DEFINITION OF “PENALISATION” UNDER
PROTECTED DISCLOSURES ACT 2014 (AS AMENDED)

Section 3 of the Act provides the following non-exhaustive list of examples of penalisation:

- (A) suspension, lay-off or dismissal,
- (B) demotion or loss of opportunity for promotion or withholding of promotion,
- (C) transfer of duties, change of location of place of work, reduction in wages or change in working hours,
- (D) the imposition or administering of any discipline, reprimand or other penalty (including a financial penalty)
- (E) coercion, intimidation or harassment or ostracism,
- (F) discrimination, disadvantage, or unfair treatment,
- (G) injury, damage, or loss,
- (H) threat of reprisal,
- (I) withholding of training,
- (J) a negative performance assessment or employment reference,
- (K) failure to convert a temporary employment contract into a permanent one, where the worker had a legitimate expectation that he or she would be offered permanent employment,
- (L) failure to renew or early termination of a temporary employment contract,
- (M) harm, including to the worker’s reputation, particularly in social media, or financial loss, including loss of business and loss of income,
- (N) blacklisting based on a sector or industry-wide informal or formal agreement, which may entail that the person will not, in the future, find employment in the sector or industry,
- (O) early termination or cancellation of a contract for goods or services,
- (P) cancellation of a licence or permit, and
- (Q) psychiatric or medical referrals.

Appendix IV

CONTENT OF FEEDBACK UNDER PROTECTED DISCLOSURES ACT 2014 (AS AMENDED)

- The Act defines feedback as the provision to the Reporting Person of information on the action envisaged or taken as follow-up and the reasons for such follow-up.
- Follow-up is defined as meaning any action taken, by the recipient of a report, or a person to whom the report is transmitted, to assess the accuracy of the information and, where relevant, to address the wrongdoing reported. Therefore, follow-up includes the assessment and investigation of the report of a Disclosure and actions taken to address the wrongdoing.
- The overriding requirement when providing feedback is that no information is communicated that could prejudice the outcome of the investigation or any action that ensues (e.g., disciplinary, or other legal action, including prosecution) for example, by undermining the right to fair procedures enjoyed by the person against whom a report or allegation is made.
- There are limits to the feedback that may be provided and the extent of the feedback will depend on the report itself. If there is no Relevant Wrongdoing identified, this can be communicated in the feedback. If an alleged Relevant Wrongdoing is identified, this can be noted in the feedback, as well as identifying actions that have been taken, or are intended to be taken, to address the wrongdoing, and the reasons for these actions.
- By way of example, actions may include strengthening processes or procedures where a weakness has been highlighted because of the report of a Disclosure; providing additional training to personnel; upgrading or replacing equipment; improving cyber security measures, etc.
- Any feedback given is provided in confidence as part of the reporting process and the process of the University addressing the report. The feedback should not be disclosed further by the Reporting Person, other than to their legal advisor or trade union representative, or unless the information forms part of a further Protected Disclosure being made via another channel.
- The Reporting Person shall not be informed of the commencement, or progress, or outcome, of any disciplinary process involving another employee which may arise on foot of an investigation occasioned by a Protected Disclosure. In general, such information is confidential between the employer and the person who is the subject of a disciplinary process. In such a situation, a Reporting Person may be informed that appropriate action has been taken but is not generally entitled to know what that action was or that it was disciplinary action.
- Any feedback provided shall comply with data protection legislation and shall not breach the data protection rights of any persons involved. Similarly, the University shall ensure that any feedback provided complies with any statutory obligations that might apply in relation to confidentiality and privacy.