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1. Introduction

The University is committed to high standards of openness and accountability and conducts its affairs with due regard to probity.

The University recognises that all workers have important roles to play in achieving this objective.

This policy expresses the University's commitment to addressing concerns about wrongdoing that may arise and protecting workers who make reports of wrongdoing. A culture of openness and accountability is essential in order to prevent wrongdoing and to address wrongdoing when it does occur.

The aims of this policy are:

- (a) to encourage the reporting by workers of suspected relevant wrongdoing as soon as possible in the knowledge that reports will be taken seriously and investigated as appropriate;
- (b) to provide guidance as to how to raise those concerns and how those concerns will be dealt with in a clear, formal and safe manner; and
- (c) to reassure workers that genuine concerns can and should be raised, even if they turn out to be mistaken, without fear of penalisation.

The Protected Disclosures Act 2014 (as amended) (the "**2014 Act**") gives legal protection to workers who make disclosures including protections against dismissal or penalisation by their employer. Workers should read this policy carefully before making a protected disclosure. It is solely a worker's responsibility to ensure he/she meets the criteria for protection under the 2014 Act. If a worker has any queries about this policy, they should seek advice from their line manager or from the Vice-President for Equality, Diversity and Inclusion.

2. **Scope of Policy**

This policy covers all workers. The term “workers” includes current and former employees, independent contractors, agency workers, volunteers, unpaid trainees, board members, shareholders, members of administrative, management or supervisory bodies and job applicants who acquire information on relevant wrongdoings (as defined in the 2014 Act) in a work-related context. A “**Relevant Person**” is a worker who reports a suspected relevant wrongdoing.

Reporting protected disclosures is specifically addressed in the 2014 Act and this policy sets out the internal reporting channels and procedures for the purposes of Section 6 of the 2014 Act.

This policy is not designed to challenge financial, policy or business decisions lawfully taken by the University nor should it be used to reconsider matters which have already been addressed or can be raised under harassment, complaint, disciplinary, academic or other University procedures. Should the disclosure relate to fraud, or suspected fraud, those raising a concern should also consult with the University’s Anti-Fraud Policy QA403. In addition, should the disclosure relate to Research Misconduct, or suspected Research Misconduct, those raising a concern should also consult the University’s Research Integrity Policy - [QA514](#).

3. **Status of Policy**

Employees should note that this policy does not form part of any contract of employment, and may be amended by the University from time to time.

4. Purpose

This policy is intended to apply to concerns that a Relevant Person may have regarding any aspect of the University's activities or the conduct of other members of the University that is not properly addressed within the scope of other University policies.

This policy covers the disclosure of information which, in the reasonable belief of the individual making the disclosure, tends to show one or more of the following wrongdoings has been, is being or is likely to be committed:

- (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:
 - (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;
 - (viii) public health;
 - (ix) consumer protection;
 - (x) protection of privacy and personal data, and security of network and information systems; or affects the financial interests of the European Union or the internal market; or
 - (xi) the deliberate concealment of any of the above matters

5. **What is Not in Scope**

This policy should not be used to raise complaints relating to interpersonal grievances exclusively affecting a Relevant Person, namely grievances about interpersonal conflicts between a Relevant Person and another worker, or a matter concerning a complaint by a Relevant Person to, or about, the University which concerns the Relevant Person exclusively. In such circumstances, it may be more appropriate to raise complaints / grievances under a different University policy or procedure such as the Grievance Procedure or Bullying and Harassment Policy.

This policy does not include a wrongdoing which it is in a worker's function or the University's function to detect, investigate or prosecute and does not involve an act or omission on the part of the University.

If a Relevant Person is uncertain whether something is within the scope of this policy, they should seek advice from his/her line manager. Where it is not appropriate for the employee to discuss matters with his/her line manager (e.g. if the complaint concerns the line manager or if there is any other conflict of interest), the employee can seek advice from a higher ranking member of staff than the line manager or from the Vice-President for Equality, Diversity and Inclusion.

Protected disclosures can only be made by Relevant Persons and be made in a work-related context (as defined in the 2014 Act). Reports of wrongdoing that do not fulfil these criteria will be dealt with under a different University policy or procedure, such as but not limited to the University Fraud Policy, Bullying and Harassment Policy, Conflict of Interest Policy and Code of Conduct Policy.

A Relevant Person must make a report in the manner set out in the 2014 Act to gain the protections of the 2014 Act.

6. **Be Assured**

The University's strong commitment to this policy means that Relevant Persons can raise concerns about wrongdoing in the knowledge that they will be supported and protected from repercussions. If a Relevant Person raises a genuine concern under this policy, the University will ensure that he/she/they will not be at risk of suffering any form of penalisation as a result. Provided that a Relevant Person has a reasonable belief that wrongdoing is occurring or is likely to occur, it does not matter if he/she/they is or are mistaken. A reasonable but mistaken disclosure of questionable practices will not lose protection under this policy. Motivation is irrelevant when determining whether or not a report is a disclosure protected by the 2014 Act.

There is no question of a Relevant Person having to prove anything. A Relevant Person should not pursue their own investigations, however well intended, as a flawed or improper investigation could compromise the University's ability to take effective action.

Protection will be given to any Relevant Person who makes a protected disclosure, within the meaning of this policy, to ensure that they are not the victim of any penalisation by any party.

Examples of penalisation include the following acts and omissions:

- (a) suspension, lay-off or dismissal,
- (b) demotion, 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, 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 on the basis of 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.

Where a worker has made a report, the Relevant Person is still required to conduct themselves professionally and to continue to carry out their duties as normal. Normal management of a worker who has made a report does not constitute penalisation. This can include the taking of disciplinary action against the Relevant Person for matters unrelated to the substance of the report. A Relevant Person who has made a report should not take it upon themselves to assume responsibility for promoting a culture of transparency within the University. While all persons should subscribe to such a culture, the promotion and implementation of such measures is a matter for the University.

There are remedies available to Relevant Persons who believe they have been penalised for making a protected disclosure. These include a claim before the Workplace Relations Commission (the claim must be brought within 6 months of the last instance of penalisation) and a claim for injunctive relief in the Circuit Court (the action must be brought within 21 days of the last instance of penalisation).

7. Confidentiality

The University hopes that a Relevant Person will feel able to report concerns openly; however we understand that a Relevant Person may wish to raise a concern in confidence under this policy.

All persons involved in the reporting or investigation of disclosures under this policy must exercise discretion and commit to keeping the reporting and investigation process, and the identity of all individuals involved, confidential, except as required by this policy or by law. In particular, the person designated under this policy for receiving reports (and any other person in the University who receives a report, or anyone else to whom a report is shared with to allow them to carry out their functions in relation to the report), cannot disclose the identity of a Relevant Person to anyone else without the explicit consent of the Relevant Person, other than in circumstances permitted in the 2014 Act. This

does not include people who a designated person reasonably considers it may be necessary to share the identity with for the purposes of the receipt, transmission, or follow-up of the report.

Any attempt to identify the Relevant Person should not be made by persons within the University to whom their identity has not been revealed as part of the receipt and follow-up of the report of a disclosure. If such attempts are made, these may be dealt with through the University's Disciplinary Procedures where appropriate. All reasonable steps shall be taken to protect the identity of the Relevant Person and the University will not disclose the identity of the Relevant Person without his/her consent, other than in circumstances permitted in the 2014 Act. However, the University cannot guarantee full anonymity and the identity of a Relevant Person may need to be disclosed in certain circumstances, for example:

- (a) where the disclosure 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 defence of others;
- (b) where the person to whom the report was made took all reasonable steps to avoid disclosing the identity of the Relevant Person or reasonably believes that disclosing the identity of the Relevant Person or any such information is necessary for the prevention of serious risk to the security of the State, public health, public safety or the environment; or
- (c) where the disclosure is required by law.

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

- (d) the effective investigation of the disclosure;
- (e) the prevention of serious risk to security of the State, public health, public safety or the environment; or
- (f) the prevention or prosecution of a crime.

The University is committed to acting upon anonymous disclosures to the extent that is possible, however it recognises that it may be restricted in its ability to investigate the matter in the absence of the knowledge of the identity of the Relevant Person. While the University will afford appropriate consideration to an anonymous disclosure, important elements of this policy (for example, keeping the Relevant Person informed and protecting a Relevant Person from penalisation) may be difficult or impossible to apply unless the Relevant Person discloses their identity. Where a Relevant Person who makes a disclosure under this policy by way of an anonymous report is subsequently identified, the Relevant Person will be afforded the protections under the 2014 Act. A Relevant Person cannot obtain redress under the 2014 Act without identifying themselves as part of the process of seeking redress.

Employees who are concerned about possible penalisation if their identity is revealed should come forward to his/her line manager and appropriate measures can then be taken to preserve confidentiality. Where it is not appropriate for the employee to discuss their concerns with his/her line manager (e.g. but not limited to if the complaint concerns the line manager or there is another conflict of interest), the employee can discuss their concerns with from a higher ranking member of staff than the line manager or with the Vice-President for Equality, Diversity and Inclusion.

8. **How to Raise a Concern Internally**

A Relevant Person can make a disclosure to their line manager orally or in writing, if the Relevant Person wishes to use an informal channel rather than using the formal internal reporting channel set out in this policy. Should the Relevant Person do so, the line manager can address the concerns in the first instance where they are comfortable to do so, or will direct the Relevant Person to the formal internal reporting channel if necessary, depending on the content of the disclosure. However, a

Relevant Person must make a report in the manner set out in the 2014 Act to gain the protections of the 2014 Act.

The Vice-President for Equality, Diversity and Inclusion, Chair of the Protected Disclosures Group (the “**PDG**”) has overall responsibility for this policy and for reviewing the effectiveness of actions taken in response to concerns arising under this policy. Any person raising a concern must exercise discretion and commit to keeping the reporting and investigation process confidential.

The PDG will be comprised of the following members:

- (a) Vice-President for Equality, Diversity and Inclusion (Chair) (unless he/she is the subject of the disclosure);
- (b) Deputy President and Registrar (unless he/she is the subject of the disclosure);
- (c) Two of the following (unless he/she is the subject of the disclosure or a conflict of interest arises), selected by the Vice-President for Equality, Diversity & Inclusion and/or the Deputy President and Registrar:
 - (i) Human Resources: a Senior Representative of HR, or their nominee;
 - (ii) Academic matters: the Secretary for Governance and Academic Affairs, or their nominee;
 - (iii) Research matters: the Vice-President for Research and Innovation, or their nominee;
 - (iv) Financial matters: Bursar, Chief Financial Officer, or the Director of Internal Audit or their nominee; or
 - (v) Any other member of the University Management Team (excluding the President); or
 - (vi) Head of School or other senior academic.

If using the formal internal reporting channel, the Relevant Person should make the disclosure in writing to the Vice-President for Equality, Diversity & Inclusion and sent to the following email address: [ovpedi@universityofgalway.ie]. The Relevant Person will need to be able to demonstrate and support the reasons for their concerns and provide evidence of their concerns where such evidence is available. Any disclosures setting out an individual’s concerns should include the following specific factual information to the extent such information is known to the individual::

- (a) that the report is a protected disclosure and is being made under this policy;
- (b) the Relevant Person’s name, position in the University, place of work and confidential contact details;
- (c) the date of the alleged wrongdoing (if known) or the date the alleged wrongdoing commenced or was identified;
- (d) whether or not the alleged wrongdoing is still ongoing;
- (e) whether the alleged wrongdoing has already been disclosed and if so, to whom, when, and what action was taken;
- (f) information in respect of the alleged wrongdoing (what is occurring/has occurred and how) and any supporting information;

- (g) the name of any person(s) allegedly involved in the alleged wrongdoing (if any name is known and the Relevant Person considers that naming an individual is necessary to report the wrongdoing disclosed); and
- (h) any other relevant information.

If a Relevant Person feels that he/she/they are unable to raise the matter with the Vice-President for Equality, Diversity and Inclusion, or if he/she has done so and believes that the Vice-President for Equality, Diversity and Inclusion has not addressed his/her concern, or if he/she prefers not to raise it with them for any reason, the Relevant Person should contact one of the following:

- (a) the Director of Human Resources; or
- (b) the Deputy President and Registrar; or
- (c) the Chief Operating Officer.

The Vice-President for Equality, Diversity and Inclusion, or the individuals named at (a)-(c) above if applicable, will acknowledge, in writing to the Relevant Person, the disclosure not more than 7 days after receipt of the disclosure. The acknowledgement shall include a copy of this policy.

The Vice-President for Equality, Diversity and Inclusion, or the individuals named at (a)-(c) above if applicable, may designate an impartial person to follow-up on the disclosure. This impartial person may communicate with and, where necessary, request further information from the Relevant Person.

8.2 **Initial Assessment**

Once a Relevant Person has made a disclosure under this policy, the Vice-President for Equality, Diversity & Inclusion will carry out an initial assessment to determine whether there is evidence that a relevant wrongdoing may have occurred. If necessary to make an initial assessment, the Vice-President for Equality, Diversity and Inclusion will seek further information from the Relevant Person.

If, having carried out the initial assessment, the Vice-President for Equality, Diversity & Inclusion decides that there is no evidence that a relevant wrongdoing may have occurred, the Vice-President for Equality, Diversity & Inclusion will close this procedure or, if it is clear that the concern falls more appropriately within a different policy/procedure of the University, the Relevant Person will be informed that it should progress in accordance with that procedure. The Vice-President for Equality, Diversity & Inclusion will inform the Relevant Person, in writing, as soon as practicable, of the decision and the reasons for it.

The Vice-President for Equality, Diversity and Inclusion is responsible for the assessment and investigation of all disclosures in a timely and appropriate manner. The Vice-President for Equality, Diversity and Inclusion can seek such advice as is reasonably necessary to perform this assessment.

8.3 **Investigation and Outcome**

If, having carried out an initial assessment, the Vice-President for Equality, Diversity and Inclusion decides that there is evidence that a relevant wrongdoing may have occurred, the Vice-President for Equality, Diversity and Inclusion will take appropriate action having regard to the nature and seriousness of the matter concerned. If an investigation is required, the Vice-President for Equality, Diversity and Inclusion will then appoint such person or persons (either internal or external to the University) who is or are most appropriately placed to investigate the particular disclosure in question (the “**Investigator(s)**”). The scope and terms of reference of any investigation will be determined by the University prior to the

investigation being carried out. The Relevant Person may be invited to attend additional meetings in order to provide further information. The Relevant Person is entitled to take a colleague or an employee representative with him/her/they to any meeting if he/she/they so wishes. The Investigator(s) will draft a report on the investigation (the “**Report**”).

The Report will be sent to the Deputy President and Registrar (unless he/she is the subject of the disclosure), who will determine what (if any) action should be taken by the University. Such action could include changes to the way the University conducts its operations, disciplinary action (following the application of the Disciplinary Procedure), referral of the matter for consideration under a specific Company policy or procedure, or a report to an appropriate third party, such as An Garda Síochána.

The Vice-President for Equality, Diversity and Inclusion will provide feedback to the Relevant Person within a reasonable time, being not more than 3 months from the date the acknowledgement of receipt of the report was set to the Relevant Person. Feedback should include information on the progress of the investigation and its likely timescale. However, sometimes the need for confidentiality may prevent the University from giving the Relevant Person specific details of the investigation or any action taken as a result. The Relevant Person should treat any information about the investigation as strictly confidential. Any breach of this confidentiality may result in disciplinary action up to and including dismissal.

Where the Relevant Person so requests in writing, the Vice-President for Equality, Diversity and Inclusion will provide further feedback at intervals of 3 months until such time as the procedure concerned is closed.

In circumstances where a disclosure of Relevant Information also contains allegations of Fraud as defined under the University’s Fraud policy, the Investigator appointed by the PDG under this policy and the Investigator under the Fraud Policy may be one and the same, and may carry out a joint investigation under both policies. Nothing in this policy shall prohibit the Investigator under the Fraud Policy from being a member of the PDG established under this policy, or from carrying out an investigation under both policies.

It should be noted that fair and due process requires that any person accused of wrongdoing should be made aware of and given the opportunity to respond to any allegations made against them.

A disclosure made in the absence of a reasonable belief is not a protected disclosure and may result in disciplinary action. It is a criminal offence to make a disclosure that contains any information the Relevant Person knows to be false. A person who suffers damage resulting from the making of a known to be false report has a right to take legal action against the Relevant Person..

The Relevant Person will have a right to review, on terms communicated in advance by the University, if the outcome of the investigation results in an adverse finding against them that might lead to disciplinary policies, procedures and action.

Separately and if requested, a Relevant Person or any affected party (as appropriate) will be entitled to have a right of review in respect of the following:

- (a) a decision, following assessment, to close the procedure or refer the matter to another procedure;
- (b) the conduct or outcome of any follow-up actions (including any investigation) taken on foot of the receipt of a report;
- (c) the conduct or outcome of any investigation into a complaint of penalisation; and
- (d) any decision to disclose the identity of a Relevant Person (except in exceptional cases).

A request for review, in this context, should be made within 7 days of a report issuing or a decision being made as applicable. The affected person should set out the reason(s) they are seeking a review. A request for a review should be based on objectively reasonable grounds. The University will advise the affected person of the identity of the person to whom the request for review should be made. The review will be considered by a person (either internal or external to the University) not involved in the original process under review. If a request for review is made, a paper based review will be conducted and the Relevant Person will be advised of the outcome of the review as soon as practicable. The outcome of the review is final.

8.4 **Protection and Support for Persons Making a Disclosure**

If a worker makes a protected disclosure, he/she is protected by law against any form of detrimental treatment or penalisation as a result of raising a concern. The University aims to encourage openness and will support a Relevant Person who raises a genuine concern under this policy, even if they turn out to be mistaken. A Relevant Person who makes a disclosure under this policy must not suffer any detrimental treatment as a result of raising a concern. Appropriate action, which may include disciplinary action, will be taken against a worker who penalises a Relevant Person or other individual due to the making of a protected disclosure.

If a Relevant Person believes that he/she has suffered any such treatment, he/she should inform the Vice-President for Equality, Diversity and Inclusion immediately. If the matter is not remedied, the Relevant Person should raise it formally using the University's Grievance Procedure.

8.5 **External Reporting Channels**

The purpose of this policy is to provide an internal mechanism for making disclosures and investigating and remedying any wrongdoing in the University. In most cases, Relevant Persons should not find it necessary to contact anyone external to the University.

It is preferable for a Relevant Person to first make a disclosure internally as this often allows for a swift resolution of the issue. External disclosures are subject to a higher evidential burden than internal disclosures. Before making a disclosure or reporting a concern to any external person or body, the University would strongly encourage the Relevant Person to seek professional advice. Transparency International Ireland operates a free Speak-Up Helpline that offers support and advice (including legal advice) for Relevant Persons. Further information regarding this helpline can be found [here](#). For Relevant Persons who are members of a trade union, many unions offer free legal advice services on employment-related matters, including protected disclosures.

If an external disclosure is made, the Relevant Person should ensure the disclosure is limited to information relevant to suspected relevant wrongdoing and does not unnecessarily disclose confidential University information unrelated to the alleged wrongdoing.

A Relevant Person may make a disclosure to one of the prescribed persons listed in Protected Disclosures Act 2014 (Disclosure to Prescribed Persons) Order 2020. In general, prescribed persons have regulatory functions in the area which are the subject of the allegations. Examples are the Central Bank, the Health and Safety Authority and the Data Protection Commission. A full list of [prescribed persons by sector is available on gov.ie](#). The Higher Education Authority (HEA) is the prescribed person in all matters relating to the planning and development of higher education and research in the State and all matters relating to funding for universities and certain institutions of higher education designated under the Higher Education Authority Act 1971 (No. 22 of 1971).

A Relevant Person may make a disclosure to a prescribed person if the Relevant Person reasonably believes that the relevant wrongdoing is within the remit of the prescribed person

and the information the Relevant Person discloses and any allegation in it are substantially true.

The Protected Disclosures Commissioner is an alternative means by which a Relevant Person can make a disclosure. In particular, the Commissioner can assist where the Relevant Person is uncertain as to which prescribed person to make a disclosure to. The Commissioner will transmit the disclosure to the correct prescribed person or to another person the Commissioner considers suitable to follow-up on the disclosure. In exceptional circumstances (e.g. if no prescribed person or suitable person can be found) the Commissioner will follow-up directly on a disclosure.

If a Relevant Person wishes to make a disclosure to the Commissioner, in addition to having a reasonable belief that the information they report tends to show a relevant wrongdoing, they must also reasonably believe the information they report and any allegation contained in it is substantially true.

The Commissioner has established formal channels for Relevant Persons to make disclosures under the 2014 Act. Information on how to make a disclosure to the Commissioner is available at: <https://www.opdc.ie/>.

A Relevant Person can make a disclosure to the Minister for Public Expenditure, NDP Delivery and Reform or the Minister for Further and Higher Education, Research, Innovation and Science provided one or more of the following conditions is met:

- (a) the Relevant Person has previously made a disclosure of substantially the same information to their employer or other responsible person; or to a prescribed person; or the Protected Disclosures Commissioner; or to a relevant Minister but no feedback has been provided to the Relevant Person in response to the disclosure within the specified feedback period, or, where feedback has been provided, the Relevant Person reasonably believes that there has been no follow-up or that there has been inadequate follow-up;
- (b) the Relevant Person reasonably believes the head of the public body concerned is complicit in the relevant wrongdoing concerned;
- (c) the Relevant Person reasonably believes that the relevant wrongdoing concerned may constitute an imminent or manifest danger to the public interest, such as where there is an emergency situation or a risk of irreversible damage.

Concerns raised under this policy may sometimes relate to the actions of a third party, such as a supplier or service provider. In some circumstances, the law may protect a Relevant Person if he/she raises the matter with the third party directly. However, the University encourages Relevant Persons to report such concerns internally first. Relevant Persons should contact the disclosure recipient identified above for guidance.

9. There are specific – and more onerous – conditions that must be met for a Relevant Person to be protected if they make a disclosure to any person other than their employer or other responsible person, a prescribed person, the Protected Disclosures Commissioner or a relevant Minister. These are set out in section 10 of the 2014 Act.

10. **Annual Report**

The Vice-President for Equality, Diversity and Inclusion shall maintain a record of all allegations received and investigations carried out by the PDG. An Annual Report will be published, once approved by the University Management team, publication shall not be later than 1 March in each year.

11. Responsibilities

Name	Responsibility
Vice-President for Equality, Diversity and Inclusion	Policy Owner and responsibility for the periodic review of the policy (normally every three years); Chair of the Protected Disclosures Group; Decides whether a disclosure falls within scope of the policy. Reviews the effectiveness of actions taken in response to concerns arising
Deputy President and Registrar	Policy Owner and responsibility for the periodic review of the policy (normally every three years); Chair of the Protected Disclosures Group; Decides whether a disclosure falls within scope of the policy. Reviews the effectiveness of actions taken in response to concerns arising.
The Protected Disclosures Group	Decides what action should be taken upon receipt of a disclosure; Member of the Protected Disclosures Group
Line →Manager	Pass Relevant Information on to the Vice-President for Equality, Diversity and Inclusion or to the Deputy President and Registrar for assessment as appropriate. Deal with informal disclosures.
Worker(s)	Compliance with policy

12. Related Documents

1. [QA403 Fraud](#)
2. Protected Disclosures Act 2014, as may be amended:
<http://www.irishstatutebook.ie/2014/en/act/pub/0014/index.html>
3. QA 413 Conflicts of Interest Policy [QA413-Conflict-of-Interests-Policy-2022-02-15](#)