Have you a concern that.....

• the health or welfare of patients/clients or the public may be at risk?

• your employer is not meeting their legal obligations?

• there is a misuse or substantial waste of public funds?

If so, you may report your concerns without fear of penalisation from your employer and also without fear of civil liability.

**New Law on Protected Disclosures of Information**

Section 103 of the Health Act 2007, which came into operation on 1st March 2009, provides for the making of protected disclosures by health service employees. If an employee reports a workplace concern in good faith and on reasonable grounds in accordance with the procedures outlined in the legislation it will be treated as a “protected disclosure”. This means that if an employee feels that they have been subjected to detrimental treatment in relation to any aspect of their employment as a result of reporting their concern they may seek redress. In addition, employees are not liable for damages as a consequence of making a protected disclosure. The exception is where an employee has made a report which s/he could reasonably have known to be false.
**Procedure for making a Protected Disclosure**

The HSE has appointed an "Authorised Person" to whom protected disclosures may be made. Employees are required to set out the details of the subject matter of the disclosure in writing on the Protected Disclosures of Information Form (attached) and submit it to the Authorised Person at the following address:

**HSE Authorised Person**  
PO Box 11571  
Dublin 2  
Tel: 01 6626984

The Authorised Person will investigate the subject matter of the disclosure. Confidentiality will be maintained in relation to the disclosure *insofar as is reasonably practicable*. However, it is important to note that it may be necessary to disclose the identity of the employee who has made the protected disclosure in order to ensure that the investigation is carried out in accordance with the rules of natural justice.

In certain limited circumstances an employee may make a protected disclosure to a **Scheduled body** or a **professional regulatory body**.

For further details please refer to the policy document on **Protected Disclosures of Information** which is available from your employer.
Protected Disclosures of Information Form

Before you complete this form, you should read the attached leaflet carefully and ensure that the subject matter of your concern is covered by the legislation.

Please note that disclosures must be made in good faith and relate to a matter that you have reasonable grounds to be concerned about. It must not be merely intended to undermine the reputation of any colleague or service provider. If you make a disclosure which you know or reasonably ought to know to be false you will be guilty of an offence under the legislation.

1. Name of employee making the disclosure ..........................................................................................................................

2. Job title .................................................................................................................................................................
   Department ..............................................................................................................................................................
   Name and address of organisation .....................................................................................................................................
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3. Details of the disclosure (care should be taken to only include the name(s) of individual(s) directly relevant to the report) ..........................................................................................................................................
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Please provide contact details at which the Authorised Person may contact you:

Address .................................................................................................................................................................
..........................................................................................................................................................
..........................................................................................................................................................
Tel no. .............................................................................................................................................................

Employee’s signature ..........................................................................................................................................

Date .................................................................................................................................................................
Disclaimer:
This leaflet is intended to give a general guidance to employees about the legislation on Protected Disclosures of Information as set out in Part 14 of the Health Act 2007. It is not a complete or authoritative statement of the law and is not a legal interpretation. The intention is to present in non-legal language an outline of obligations and rights under this legislation.
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