

The Faculty of Occupational Hygiene's Code of Ethics Complaints Procedure

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1. Glossary

- 1.1. This glossary has been prepared to help you understand the terms used within this procedure:
 - 1.1.1. Faculty: The Faculty of Occupational Hygiene
 - 1.1.2. Faculty Committee: The Faculty of Occupational Hygiene Committee
 - 1.1.3. **Member:** A Member of the Faculty of Occupational Hygiene
 - 1.1.4. **Professional Register:** The Register of Occupational Hygiene Professionals
 - 1.1.5. Registered Practitioner: A Registered Practitioner of the Register of Occupational Hygiene Professionals
 - 1.1.6. **Registrar:** The Registrar of the Faculty of Occupational Hygiene
 - 1.1.7. **Procedure:** For the purposes of this document the procedure consists of sections 4 19 of this document
 - 1.1.8. The Code: The Code of Ethics
 - 1.1.9. **The Society:** The British Occupational Hygiene Society

2. Introduction

- 2.1. The Code of Ethics and this procedure are issued by the Faculty to its members and registered practitioners on behalf of the Board of the British Occupational Hygiene Society.
- 2.2. The purpose of this procedure is to allow complaints to be raised against a member of the Faculty or a registered practitioner of the Professional Register, in a manner that is handled fairly, consistently, and where possible resolve matters.
- 2.3. The aim of the Code of Ethics is to maintain and improve standards for the professional practice of occupational hygiene. To ensure that the Code is effective, the Faculty has the power to enforce the Code through any and all the measures below:
 - 2.3.1. investigation of breaches of the Code of Ethics;
 - 2.3.2. the imposition of sanctions or restrictions;
 - 2.3.3. recommending or requiring development and support;

- 2.3.4. publication of outcomes of such investigation.
- 2.4. By becoming a member of the Faculty or becoming a registered practitioner of the Professional Register, the individual has agreed to abide by the Code of Ethics and has consented to participate in this procedure.
- 2.5. This procedure is designed to help you understand how the Code will be enforced when use of this procedure is found to be necessary.
- 2.6. This procedure is:
 - 2.6.1. intended to be a practical document to guide you through the complaint procedure;
 - 2.6.2. not of itself a legal commitment by the Faculty of the Society.
- 2.7. The procedure may be subject to change (with notice) to ensure fairness and compliance with the Society's legal obligations.
- 2.8. This procedure is reviewed annually by the Faculty and the Society's complaints team to ensure it reflects our obligations and your rights.
- 2.9. If you have any queries, observations or issues with this procedure, please contact complaints@bohs.org.

PLEASE NOTE: Members of the Board are governed by the Board's Code of Conduct and volunteer conduct will be covered by a volunteer Code of Conduct. Complaints about the conduct of people other than Faculty members should therefore be directed to the CEO (as well as any complaints about service or a member of staff). BOHS individual membership (non-Faculty members) is by general subscription and open to anyone with an interest in occupational hygiene. Therefore, individual members, who are not members of the Faculty, the Board or working as volunteers are not formally regulated by the Society.

3. General issues

- 3.1. The responsibility for the administration of the Code of Ethics lies with the Chief Executive Officer (CEO) of the Society (or the CEO's delegate).
- 3.2. The CEO acts under the direction of the Registrar (unless otherwise directed by the Board).
- 3.3. The CEO and Registrar or other person, as stated above in 3.1 may seek confidential advice in relation to the most appropriate operation of this procedure from any members of the Board or Faculty Committee (or from external

- professionals, acting under a duty of confidentiality, such as solicitors) who are reasonably believed to be unconnected with the Code of Ethics issue under consideration.
- 3.4. Officers and volunteers involved in the administration of this procedure do so at the request and under the direction and authority of the Society.
- 3.5. In administering this procedure or any other actions arising out of an alleged breach of the Code of Ethics, the Society and Faculty will be guided by:
 - 3.5.1. non-discrimination in all matters:
 - 3.5.2. the normal principles of natural justice and fairness (including the right not to be subject to bias and the right to a fair hearing);
 - 3.5.3. the desire to balance a swift resolution with a rigorous and fair process, bearing in mind that the processes rely upon the voluntary engagement of all parties;
 - 3.5.4. respect for the data rights of all the parties concerned;
 - 3.5.5. transparency in the processes, but also in the publication of outcomes, where it is appropriate to do so;
 - 3.5.6. the commitment to individual and collective learning and development for the improvement of the Occupational Hygiene profession and members of the Faculty;
 - 3.5.7. the principle of proportionality and applicability, balancing the impact and appropriateness of any outcome for a member or registered practitioner with the nature of any breach and the consideration of the profession and the public.
- 3.6. This is not a legal process, other than a means by which the Society determines whether a member is in breach of the Code of Ethics, which forms part of the rules of the Society. This procedure is to help you to understand how the Society decides whether there has been a breach of those rules and, if so, what the Society thinks is the most appropriate course of action. A member may, at any time, choose to leave the Faculty, in which case, they will no longer be subject to its Code of Ethics and this procedure. It is important to note:

- 3.6.1. Nothing in this procedure is intended to give rise to a legal right or expectation;
- 3.6.2. BOHS is not a statutory body and engagement by complainants in this procedure is voluntary;
- 3.6.3. Any timeframes outlined are indicative only;
- 3.6.4. The Society may be required to deviate from the procedure in order to comply with statutory obligations
- 3.7. If you feel dissatisfied with the way in which this procedure is being administered, you should make your concerns known immediately to complaints@bohs.org. If you do make the Society aware of an issue when it arises during the process, this may be taken into account should you later decide to appeal.
- 3.8. If you have a complaint about the administration of this procedure (other than an appeal by a member against the outcome of the investigation of a complaint), this should be addressed in the first instance to the CEO and/or Registrar. If a complaint cannot be resolved at this level, a complaint may be escalated to the Honorary Secretary of the Society.
- 3.9. For full details of the processes please see the BOHS Complaints Procedure.

4. Enquiries about the Code of Ethics and its administration

- 4.1. Members of the public, institutions, companies, and members may have queries about the scope, applicability and operation of the Code of Ethics or its administration. These enquiries, and the way in which they are handled, are very important as they will sometimes enable the Faculty to deal promptly with matters.
- 4.2. To effectively deal with such enquiries, they should:
 - 4.2.1. not be anonymous;
 - 4.2.2. not relate to easily identifiable members.
- 4.3. The Society's complaints team will reply to an enquiry within 28 days. If the complaints team cannot deal with the issues alone, advice may be sought from Faculty Committee members before answering the enquiry. The enquiry and its answer will be reported to the Faculty Committee and to the next Board Meeting in the Registrar's Report.
- 4.4. Replies to such enquiries will be necessarily general and are constrained by the information provided by the person enquiring. Responses therefore do not

constitute advice and the information provided in them should not be taken as predicting the outcome of any investigation. Enquirers should not act in reliance on them. Where an issue of conduct of a member or registered practitioner needs to be determined, this can only be determined through this Code of Ethics complaints procedure.

4.5. Enquiries about the Code of Ethics and its administration should be addressed to complaints@bohs.org

5. Receipt of a complaint

- 5.1. An allegation of a Code of Ethics breach by a member of the Faculty or a registered practitioner of the Professional Register will relate to a named or identifiable individual or individuals.
- 5.2. Where an allegation relates to conduct by a company or other organisation, the complaint will be taken in relation to any member of the Faculty or registered practitioners of the Professional Register who is a director of the company and/or any member(s) of the Faculty or registered practitioners of the Professional Register who have been responsible for the provision of the service complained about.
- 5.3. The Society is unable to investigate anonymous or historic complaints and complaints must be made directly to complaints@bohs.org in writing. A complaints form is available to help with speedier processing of complaints.
- 5.4. On receipt of a complaint, the complaints team will promptly:
 - 5.4.1. note the date of receipt of a complaint and allocate a unique complaint number and open an electronic complaints file in a secure confidential area;
 - 5.4.2. check the details provided and check contact details to verify the complainant and that the individual complained of is a member of the Faculty and record the checks as completed on the file;
 - 5.4.3. send a written acknowledgement of receipt of the complaint, together with a copy of the Code of Ethics and this complaints' procedure;
 - 5.4.4. include an offer to send materials in a more accessible/different format if required;
 - 5.4.5. notify the Registrar and the CEO and enable access for both to the confidential secure area for this complaint;

5.4.6. inform the Board that a complaint has been received, but not pass on any further details

6. Initial evaluation of a complaint

- 6.1. An initial evaluation of the complaint by the Registrar is to determine whether the nature of the complaint is one that falls within the scope of the Code of Ethics.
- 6.2. The Registrar will evaluate whether the information contained in the complaint falls within the Code of Ethics, by considering:
 - 6.2.1. the BOHS membership status of the person complained about;
 - 6.2.2. the nature of the activity complained about;
 - 6.2.3. the nature of the relationship of the member to the complainant;
 - 6.2.4. any other relevant considerations.
- 6.3. In evaluating a complaint, the Registrar (or designate) may seek confidential advice and information from another Registrar, any member of Head Office or an external professional who operates under a duty of confidentiality. This should be done promptly, but in any case, no later than two weeks from the date of receipt of the complaint from Head Office.
- 6.4. The evaluation will be noted in writing on the file and the complainant will be notified in writing of whether:
 - 6.4.1. the complaint falls within the scope of the Code of Ethics and the next steps to be taken;
 - 6.4.2. the complaint does not fall within the Code of Ethics and the reasons why it does not:
 - 6.4.3. the complaint contains insufficient information to evaluate it and what information is missing.
- 6.5. If it is decided to proceed with a complaint, the Registrar will inform the individual(s) named of the allegation in writing [template letter]. The letter will include a copy of the Code of Ethics, this guide (and an offer of an accessible version) and a clear outline of the next steps. The Faculty reserves the right to suspend any member or registered practitioner (with or without notice)whilst an investigation is taking place and in some cases, dependant on the severity of the complaint, the matter may be escalated to the Health and Safety Executive (HSE).

7. Informal settlement of a complaint

- 7.1. Informal settlement of a complaint is to enable quick and fair resolution of a complaint by mutual agreement without recourse to the full Complaints Procedure.
- 7.2. The formal complaints procedure can be demanding and takes time. In some instances, the Society may be able to help parties to resolve issues in a faster and less formal way. This may be an approach which is relevant to a minor dispute between members.
- 7.3. When evaluating a complaint (6.2), the Registrar may form the view that informal resolution may be an option to consider. This will be appropriate only where the alleged conduct is not deemed to be serious in relation considerations including:
 - 7.3.1. its impact on the complainant;
 - 7.3.2. its impact on the profession or professional standards;
 - 7.3.3. the reflection on the competence of the member;
 - 7.3.4. the potential for risk to others in the future;
 - 7.3.5. the complexity of the complaint.
- 7.4. If the Registrar decides that an informal settlement may be an option, then both parties will be offered this opportunity with a suggested outline of how the process might take place. The Registrar and the parties are at liberty to agree a process which satisfies all of the fairness of the procedure.
- 7.5. The Registrar may designate a mutually agreed party to act as mediator, arbitrator, or conciliator as is appropriate for the process.
- 7.6. The outline of this procedure, including agreed timeframes, will be recorded in writing, and notified to both parties.
- 7.7. The complainant and the member need to agree to be bound by the outcome of the process, prior to the commencement of the agreed procedure. The proceedings will be recorded in writing and the outcome will be notified in writing to both parties.
- 7.8. The outcome will be recorded in the secure confidential area and all copies of material and correspondence will be directed to be destroyed by the complaints team. Access to that area will be restricted to the complaints team, the Registrar, and the CEO.
- 7.9. The Board will be notified that the complaint has been concluded by way of informal settlement.

- 7.10. The Registrar reserves the right, based on any new facts that arise as a result of the informal resolution to proceed to a formal complaint if it is in the best interests of the profession and the protection of the public.
- 7.11. Parties should carefully consider whether informal resolution is a relevant option in relation to the resolution of a complaint.

8. Proceeding to investigation

- 8.1. The decision to proceed to an investigation means that a complaint will be dealt with in accordance with this procedure.
- 8.2. If the Registrar evaluates the complaint as falling within the scope of the Code of Ethics, and informal settlement is not appropriate, this will trigger the setting up of an Investigating Committee.
- 8.3. The Registrar will promptly:
 - 8.3.1. notifying the complaints team and the CEO to enable the proper management of data;
 - 8.3.2. notify the Faculty Committee of the:
 - 8.3.2.1. name of the complainant;
 - 8.3.2.2. name of the member complained of; and
 - 8.3.2.3. the general nature of the complaint to enable the proper management of potential conflicts of interests.
- 8.4. The Faculty Committee Members will:
 - 8.4.1. confirm that they have no conflicts of interest that they are aware of, and any associations which they have with the parties;
 - 8.4.2. advise on the composition of an Investigating Committee.

9. Appointing an Investigating Committee

- 9.1. The purpose of an Investigating Committee is to enable fair, independent, and professionally competent peer review of a complaint on behalf of the Society.
- 9.2. The Investigating Committee membership is designated by the Registrar on the advice of the Faculty Committee and will normally be made up of:
 - 9.2.1. three current Fellows in good standing of the Faculty, excluding current members of the Faculty Committee or the Board; and

- 9.2.2. One lay-person, dependent on the nature of the complaint. The lay-person is to be independent of the Occupational Hygiene profession and not on the Register of Occupational Hygiene Professionals. .
- 9.3. The Faculty Committee may co-opt other members of the Faculty (or another Faculty) to assist them in their deliberations and handling of the process, based on their expertise and experience.
- 9.4. The Faculty Committee should normally complete the designation of an Investigating Committee within three weeks of notification of the outcome of the evaluation by the Registrar. If the process is to take longer, the parties to the complaint will be notified in writing of the delay and the reason for it by the complaints team on behalf of the Committee.
- 9.5. Designated members of the Investigating Committee will be contacted in writing by the Registrar, initially with the names only of the parties involved.
- 9.6. On confirmation that there are no apparent conflicts of interest, the Registrar shall direct the complaints team to enable access for the potential members of the Investigating Committee to the secure confidential area. The complaints team will provide instructions and support to enable this.
- 9.7. Designated members of the Investigating Committee may individually review the complaint material to confirm that:
 - 9.7.1. there are no potential conflicts of interest; and
 - 9.7.2. that they feel qualified to make a judgement on the evidence and the seriousness of the complaint.
- 9.8. Designated members of the Investigating Committee should confirm to the Registrar and the complaints team whether they feel able to proceed or not. If they are unable to do so, the Registrar will promptly inform the Faculty Committee to enable the designation of another member.

10. Initial Review by the Investigating Committee

- 10.1. The purpose of an Initial Review by the Investigating Committee is to determine whether the complaint meets a sufficient threshold of evidence or seriousness to merit mounting a full investigation.
- 10.2. The Investigating Committee will:

- 10.2.1. meet as soon as is practicable (and normally no later than 14 days) after their designation of the committee;
- 10.2.2. nominate a Chair from among them;
- 10.2.3. consider the evidence in a fair and professional manner;
- 10.2.4. draw conclusions based on the evidence available to it;
- 10.2.5. reach a majority view on the recommended course of action;
- 10.2.6. ask for any practical support it reasonably requires from the complaints team;
- 10.2.7. provide the Registrar with an Initial Review Report containing:
 - 10.2.7.1. the determination of whether the complaint should be further investigated;
 - 10.2.7.2. brief reasons for their decisions, identifying the relevant part of the Code of Ethics the complaint concerns;
 - 10.2.7.3. dates of meetings and attendance at meetings;
 - 10.2.7.4. the names of any persons contacted for advice and the date when contacted;
 - 10.2.7.5. any deviations from normal process and the reasons for it.
- 10.2.8. provide the Initial Review Report to the complaints team who will add stthese to the record in the secure confidential area.
 - 10.3. The Investigating Committee will not normally:
 - 10.3.1. call witnesses;
 - 10.3.2. keep a permanent record of their discussions;
 - 10.3.3. inform any person, other than the Registrar and the complaints team of any matter relating to their deliberations;
 - 10.3.4. reveal the identities of parties involved.
 - 10.4. The Investigating Committee may normally:
 - 10.4.1. meet virtually or in person;
 - 10.4.2. ask the complainant for information in addition to the original complaint;
 - 10.4.3. seek confidential advice from the Faculty and complaints team.

- 10.5. There may be occasions where a complaint contains more than one element and not all elements merit further investigation. Where some elements of a complaint are determined to merit investigation, but other elements are not, the Initial Report should identify which elements merit further investigation, and which do not.
- 10.6. The Registrar will share the Initial Review Report confidentially with the Faculty Committee.
- 10.7. The Faculty Committee will satisfy itself that any deviations from normal process have not undermined the fairness or effectiveness of the Investigating Committee. If it is not satisfied, then it should designate a new Investigating Committee in accordance with this procedure.

11. Recommendation not to proceed to full investigation

- 11.1. If, after reading the Initial Review Report, the Faculty Committee recommends that the complaint should not be investigated further, the Registrar will promptly:
 - 11.1.1. inform the member complained of in writing and the reasons provided in the Investigating Committee report;
 - 11.1.2. offer the option to the member of publishing the finding, (only applicable if the complainant has put the complaint in the public domain);
 - 11.1.3. inform the complainant of the outcome in writing, the reasons provided in the Initial Review Report and notify them whether the finding will be published;
 - 11.1.4. notify the Board of the outcome and the Society at the next Annual General Meeting (AGM).
- 11.2. Where the Initial Review Report determines that some elements of the complaint do not merit further investigation, the complainant and the member or registered practitioner should be informed of this in accordance with this part of the procedure. These elements of the complaint should not normally be considered further by an Investigating Committee.
- 11.3. The Initial Review Report will be archived in the secure confidential area and all copies of material and correspondence (other than those in the area) will be directed to be destroyed by the complaints team. Access to that area will be restricted to the complaints team, the Registrar, and the CEO.
- 11.4. Where a complaint is determined not to merit further investigation by an Investigating Committee then the complaint is dismissed. It cannot be reopened at

a future date without substantial new evidence that was not available at the time of the original allegation.

12. Recommendation to proceed to full investigation

- 12.1. If, after reading the Initial Review Report, the Faculty Committee recommends that the complaint should proceed to full investigation, the Registrar will promptly:
 - 12.1.1. inform the member complained of in writing and the reasons provided in the Initial Review Report and draw their attention section 12 and onwards of this procedure;
 - 12.1.2. inform the complainant of the outcome in writing, the reasons provided in the Initial Review Report and draw their attention to section 12 and onwards of this procedure;
 - 12.1.3. advise both parties to seek independent advice before further publicising the complaint.
- 12.2. The purpose of a full investigation is to determine whether it is more likely than not (on the balance of probabilities) that the complaint is partly or wholly merited.
- 12.3. In conducting the full investigation, the Investigating Committee will:
 - 12.3.1. meet as soon as is practicable (and normally no later than 14 days) after the notification of the Faculty Committee of their Initial Review Report;
 - 12.3.2. conduct a thorough, timely and fair investigation, based on the resources and evidence reasonably available to it;
 - 12.3.3. consider the evidence in a fair and professional manner;
 - 12.3.4. seek additional evidence and information necessary to enable a fair, thorough, timely and informed investigation;
 - 12.3.5. seek confidential advice from the Faculty Committee and the complaints team;
 - 12.3.6. offer reasonable opportunities (in person or in writing) for the member or registered practitioner to explain their perspectives on the complaint and provide further evidence in support of it. This will normally be by way of providing supporting witness evidence and attendance at a hearing;
 - 12.3.7. take advice from the complaints team about how to ensure that the process is conducted in a way that is accessible to parties with disabilities and in a non-discriminatory way;

- 12.3.8. ask for any support it reasonably requires from the complaints team, including the provision of a confidential minute taker;
- 12.3.9. maintain records of meeting attendance, evidence considered and the purpose of the meeting, but will not record details of their deliberations;
- 12.3.10. meet together at the same time at least once virtually or in person, other than at a hearing for a member or registered practitioner.
- 12.4. The Investigating Committee will not inform any persons, other than the Registrar and the complaints team of any matter relating to their deliberations.
- 12.5. As the process is not a legal process, there is no automatic entitlement of parties to legal representation. However, on advice of the Registrar, the Investigating Committee may permit the complainant and member or registered practitioner concerned to be accompanied by another person or an intermediary if it is in the interests of fairness and equality to do so.

13. Hearing oral evidence

- 13.1. The purpose of hearing oral evidence is to enable fairer, more timely, more robust, and better-informed decision-making by the Investigating Committee.
- 13.2. Oral complaints hearings are not formal legal processes, and the management of oral evidence will be a matter for the Investigating Committee to determine in accordance with what it believes to be the most effective way of conducting a proper investigation. Oral evidence may be taken face to face or virtually.
- 13.3. The Investigating Committee may hear oral evidence from any witness from inside or outside the profession, including those witnesses proposed by the member or registered practitioner under investigation.
- 13.4. Where oral evidence is to be received, the Investigating Committee may make such arrangements, with the support of the complaints team as may be reasonably required to enable this to be done fairly, without discrimination or prejudice to rights and without inconvenience to the witness, including taking evidence virtually.
- 13.5. Each and every member of the Faculty or registered practitioner of the Professional Register called to give information will cooperate to the best of their abilities.
- 13.6. The Investigating Committee will examine each witness separately without other people being present.

- 13.7. The Investigating Committee may seek support and advice from the Registrar and the complaints team in managing and administering the process of hearing oral evidence.
- 13.8. No permanent audio or visual record will be made of oral evidence, but a temporary recording may be made for the purposes of the accurate processing of the evidence.
- 13.9. A written note of the key points of evidence and any questions asked will be prepared by the Investigating Committee or the complaints team under the supervision of the Investigating Committee.

14. Hearing oral evidence from the member/registered practitioner under investigation

- 14.1. It is to be presumed by the Investigating Committee that a member under investigation will normally wish to explain their perspective on a complaint and the Investigating Committee will do as much as is reasonably practicable to enable this, bearing in mind the need for an appropriate and timely resolution of the complaint.
- 14.2. A hearing of evidence by a member or registered practitioner who is the subject of a complaint is an opportunity by which a member can provide explanation and clarification to enable the Investigating Committee to reach a fair and balanced conclusion.
- 14.3. There is no obligation on the member or registered practitioner to attend an oral hearing, but if they are not available or willing to give oral evidence, the Investigating Committee will need to form their views based on the evidence that is available to them.
- 14.4. In the absence of oral evidence, the Investigating Committee will always request a written statement from the member or registered practitioner who is under investigation and allow reasonable time for its preparation.
- 14.5. Because of the potential implications for the professional status of the member or registered practitioner, the Investigating Committee will make every reasonable effort to ensure that there are appropriate safeguards for a fair hearing of oral evidence by the member or registered practitioner.
- 14.6. In furtherance of a fair hearing of evidence, the Investigating Committee will:

- 14.6.1. agree a date for the hearing of oral evidence, no less than 30 days from the date it informs the member or registered practitioner of their request to hear oral evidence;
- 14.6.2. make reasonable arrangements to enable the attendance of the member or registered practitioner, either virtually or in person, taking into account the personal and professional circumstances of the member;
- 14.6.3. endeavour to ensure that the member or registered practitioner is provided with as much information as lawfully permissible or reasonably practicable in relation to the complaint in a timely manner;
- 14.6.4. not unreasonably prevent the presence of, or representation by, one other person (normally a Faculty member or legally qualified adviser), as well as any interpreter or intermediary as may be required for comprehension of the proceedings;
- 14.6.5. permit the submission of comments by the member or registered practitioner in advance of any hearing;
- 14.6.6. enable witnesses to be called by the member or registered practitioner, so far as is reasonably practicable.
- 14.7. The member or registered practitioner under investigation is not entitled to question another witness but is entitled to a record of any evidence that they provide, which the Investigating Committee intends to use to form the basis of their decision.

15. Preparation of a Final Report of the Investigating Committee

- 15.1. The Final Report of the Investigating Committee constitutes a confidential recommendation to the Faculty Committee.
- 15.2. In determining the outcome of the full investigation, the Investigating Committee will:
 - 15.2.1. draw conclusions based on all the evidence available to it and maintain that evidence in recorded form.
 - 15.2.2. reach a majority view on the recommended course of action.
 - 15.2.3. provide the Registrar with a Final Report containing:
 - 15.2.3.1. a list and/or summary of the evidence it considered, including a view of its reliability and consistency with other evidence.
 - 15.2.3.2. reasons for their decision;

- 15.2.3.3. recommendations for any remedial actions, sanctions, restrictions or support for the member under investigation and suggested length of sanctions or restrictions if appropriate;
- 15.2.3.4. a note of whether it was a unanimous decision;
- 15.2.3.5. dates of meetings and attendance at meetings;
- 15.2.3.6. the names of any persons contacted for advice and the date when contacted:
- 15.2.3.7. any deviations from normal process and the reasons for it.
- 15.2.4. provide the Final Report to the complaints team who will add these to the record in the secure confidential area.
- 15.3. There may be occasions where a complaint contains more than one element and not all elements are found to be justified. Where some elements of a complaint are found to be justified, but other elements are not, the Final Report should identify the elements which are not upheld and the elements which are upheld.
- 15.4. The Registrar will share the Final Investigation Report confidentially with the Faculty Committee.
- 15.5. The Faculty Committee will satisfy itself that any deviations from normal process have not undermined the fairness or effectiveness of the Investigating Committee.

 If it is not satisfied, then the Faculty Committee should:
 - 15.5.1. designate a new Investigating Committee in accordance with this procedure; or (exceptionally)
 - 15.5.2. may determine that there would be undue prejudice to one or other party in continuing with the complaint.
- 15.6. If a complaint investigation is discontinued to prevent prejudice to a party, arising out of a deviation from process or any other material reason, then the Faculty Committee:
 - 15.6.1. should report this promptly to the Board, together with the reasons for doing so:
 - 15.6.2. direct the complaints team that the investigation should now be closed.

16. Action where a complaint is unfounded

16.1. The Faculty Committee may conclude, based on the Final Report, that the complaint is unfounded, in which case:

- 16.1.1. the Registrar will promptly inform the parties in writing of the outcome of the investigation together with brief reasons for that finding;
- 16.1.2. the Final Report will be archived in the secure confidential area and all copies (other than those in the area) of evidence, material and correspondence will be directed to be destroyed by the complaints team. Access to that area will be restricted to the complaints team, the Registrar, and the CEO;
- 16.1.3. the member under investigation will be given the option of the outcome being publicised, although the privacy of the complainant should be maintained unless the matter is already in the public domain;
- 16.1.4. the general fact that an Investigating Committee had been set up and concluded its work will be promptly reported to BOHS Board and at the next Annual General Meeting of the Society;
- 16.1.5. the complaint will be closed.

17. Action where a complaint is founded

- 17.1. The Faculty Committee may conclude, based on the Final Report, that the complaint is founded, in which case it will:
 - 17.1.1. decide on the measures that need to be taken in respect of the member under investigation;
 - 17.1.2. decide on the appropriate length of restrictions or sanctions or the length of time by which the member needs to comply with the measures imposed on them. The length of restrictions or sanctions will be influenced by the type and severity of the breach
 - 17.1.3. consider any further action which is merited in relation to broader issues of standards for the Faculty;
 - 17.1.4. make a recommendation to the Board about the publication of the findings of the investigation and, where appropriate, the measures decided by the Investigating Committee;
 - 17.1.5. make a determination on the duration of publication of any disciplinary outcome in relation to a member or registrant, based upon a balance of public interest and the member or registrant's rights;
 - 17.1.6. review any ongoing measures on a quarterly basis as required.

- 17.2. In determining whether or not to publicise the outcome of the investigation and any consequent measures taken, the Faculty Committee and the Board will have regard:
 - 17.2.1. to the public interest in being made aware of the complaint being upheld;
 - 17.2.2. the interests of the profession in being seen to maintain high professional standards:
 - 17.2.3. in the case of a minor breach of the Code of Ethics, whether the public interest and professional benefit is proportionate to the potential prejudice to the member in question;
 - 17.2.4. the privacy and data rights of the complainant and other parties.
- 17.3. If the Faculty Committee finds that the complaint is founded:
 - 17.3.1. the Registrar will promptly inform the parties in writing of the outcome of the investigation together with reasons for that finding and the right to appeal;
 - 17.3.2. the Registrar will consult the complainant about publicising the findings of the Investigating Committee once the period of notice for Appeal has expired without an Appeal being lodged;
 - 17.3.3. the Final Report will be archived in the secure confidential area and all copies (other than those in the area) of evidence, material and correspondence will be directed to be destroyed by the complaints team. Access to that area will be restricted to the complaints team, the Registrar, and the CEO;
 - 17.3.4. the complaint will be closed.

18. Appeals by members who have been found to be in breach of the Code of Ethics

- 18.1. A member who has been found to be in breach of the Code of Ethics may seek to appeal in accordance with this procedure.
- 1.1. An appeal against the decision of the Investigating Committee should be made to the Registrar by submitting full grounds of appeal in writing to the Registrar within 10 working days of receiving the Investigating Committee's decision.
- 18.2. Examples of grounds of appeal may include, but are not limited to, any or all of the following:

- 18.2.1. serious errors in the procedure followed by the Investigating Committee.
- 18.2.2. the imposition of an unreasonably excessive sanction by the Investigating Committee.
- 18.2.3. the emergence of new material evidence, which could not reasonably have been submitted to the Investigating Committee.
- 18.3. On receipt of the appeal from the member, the Registrar will promptly inform the Faculty Committee that an appeal has been submitted.
- 18.4. If the appeal provides a substantive basis for reviewing the original decision, the Faculty Committee will set up an Appeals Committee to review the case.
- 18.5. If the appeal does not provide a substantive basis for reviewing the decision, the member concerned will be informed in writing promptly after the decision, with brief reasons why the appeal will not be proceeded with.
- 18.6. An appeal will not normally be permitted later than 30 days after the notification of the outcome of the original decision.

19. The Appeals Committee

- 19.1. The purpose of an Appeals Committee is to review the decision arrived at by the Investigating Committee.
- 19.2. The Appeals Committee will be appointed by the Faculty Committee and consist of three Fellows of the Faculty (or another Faculty), excluding current members of the Faculty Committee, the Board and excluding members of the Investigating Committee.
- 19.3. An Appeals Committee will operate in accordance with the principles and procedure laid down for an Investigating Committee undertaking a full investigation.
- 19.4. The Final Report of an Appeals Committee will be acted upon in accordance with the same principles and procedure laid down for an Investigating Committee undertaking a full investigation.
- 19.5. The Faculty will review the effectiveness of this procedure in the light of any successful appeal.

20. Privacy, fairness, and data protection

20.1. All correspondence and proceedings will be in writing, recorded electronically or a written record kept and maintained in the confidential secure area only. Any local

- computer or paper copies will be kept securely and the complaints team will direct that they are returned or destroyed on closure of the complaint or as soon as a participant is no longer involved.
- 20.2. All members of Faculty, the Board and staff are under a duty to avoid conflicts of interest and to do the utmost to maintain the confidentiality of all parties. If at any time a person involved in the process becomes aware of the potential for a conflict of interest, this should be reported to the Registrar, CEO and/or the complaints team.
 - 20.2.1. A conflict of interest arises in this context wherever an individual might be seen by reason of business or personal relationship to have a material business or personal interest in the complaint being decided in favour of one party over another.
 - 20.2.2. Information and data collected for the purposes of a Code of Ethics investigation may not be held by BOHS or BOHS members involved in the process, other than for the purposes of the fair investigation of the complaint and a definitive file of all current information must be maintained in the secure confidential area only.
 - 20.2.3. BOHS will archive investigation material as a basis for the development of professional standards guidance, to enable consistency in the application of decision-making, to enable the development of training materials for future investigators and for the purposes of discharging its ongoing legal duties.
 - 20.2.4. Wherever it is lawful, we will endeavour to give parties access to data and information about them that is contained in the complaint file. However, access to personal data held in a complaint file is a complex area and access to some elements of the complaints file during or after the investigation may not be lawfully permissible. BOHS follows the guidance and practice issued by the Information Commissioner's Office on this matter.
 - 20.2.5. Should you wish to understand your rights in this respect, please refer to the latest version of 'Access to information held in complaints files' available at https://ico.org.uk

21. Payment of expenses

- 21.1. The Faculty may, with the agreement of Board, make ex-gratia payments to cover expenses of any of those involved in the above procedure. These must comply with the Society's current financial procedures in force and any applicable HMRC rules. The following guidelines indicate those expenses that may be met at the discretion of the Faculty Committee:
- 21.2. Expenses may be paid for:
 - 21.1.1. travel and overnight expenses and subsistence of:
 - 21.1.1.1. any members of Investigating or Appeals Committees;
 - 21.1.1.2. members or registered practitioners subjected to investigation;
 - 21.1.1.3. their representatives and/or interpreters;
 - 21.1.1.4. witnesses called by Investigating or Appeals Committees.
 - 21.1.2. Fees of witnesses called by Investigating or Appeals Committees at rates agreed on a case-by-case basis by the Faculty Committee in consultation with the Board.
- 21.2. Expenses will not normally be paid for:
 - 21.2.1. the travel and overnight expenses and subsistence of witnesses called by members or registered practitioners subject to investigation.
 - 21.2.2. the fees of witnesses called by those members or registered practitioners.
 - 21.2.3. the fees of any solicitor or barrister representing those members or registered practitioners.