

# Whistleblowing Policy

**Date Issued:** September 2017  
**Review Date:** January 2019  
**Approved by:** Board of Directors  
**Approval Date:** 28<sup>th</sup> March 2019

## **Data Protection Statement**

*The procedures and practice created by this policy have been reviewed in the light of our Data Protection Policy. All data will be handled in accordance with the Sola Fide CE Multi Academy Trust Data Protection Policy.*

## **1. Purpose**

The purpose of this policy is to specify the Sola Fide Trusts Whistleblowing Policy (sometimes known as 'making a disclosure in the Public Interest' or 'Public Interest Disclosure Policy') for all members of the Trust.

Whistleblowing is the process by which an employee in an organisation raises concerns about possible unethical behavior, fraud, crime, danger or other serious risk that could threaten customers, colleagues, stakeholders, the public or the Trusts own reputation. Essentially whistle blowing is the raising of a concern about a danger or risk so that it may be investigated.

This policy has been developed in the context of the following legislation:

- Employment Rights Act 1996
- Public Interest Disclosure Act 1998 (PIDA)
- Bribery Act 2010
- Enterprise and Regulatory Reform Act 2013

## **2. Scope**

This policy applies to all Staff, Associates and all members of the Trust. This policy does not apply to students, parents of students or visitors, unless they are deemed employees of the Trust. Staff at affiliated organisations should follow their own whistle blowing policy and procedure.

Where disclosures from an affiliated partner are received, the recipient will record the disclosure and discuss the disclosure with their line manager to determine whether any action is required by the Trust. (action may be required for example in situations where there is potential impact on the reputation of the Trust).

The policy is designed to enable an employee to raise concerns at a high level and/or disclose information which the individual believes to show serious malpractice and/or impropriety within the organisation.

The disclosure should be in the 'public interest'; therefore, the policy cannot be used to raise purely private matters (e.g. relating to a member's individual contract) or in relation to a grievance that seeks to redress a wrong done to oneself.

The policy is not designed to provide an avenue for employees to question financial or business decisions taken by the Trust and it cannot be used as an avenue to reconsider matters which should or have already been addressed under other associated policies.

## **3. Policy Statement**

### **3.1 Protected Disclosure**

The Trust is committed to the highest standards of ethics, openness, probity and accountability. It seeks to conduct its affairs in a responsible manner taking into account the requirements of the funding bodies and the standards in public life set out in the reports of the Nolan Committee and the associated legislation. It requires all employees and other members of the Trust to conduct themselves in a manner consistent with these values.

Within the UK, there is legal protection to employees against being unfairly dismissed; penalised by their employer; or harassed by their colleagues if they make a disclosure (that is in the public interest) about wrongdoing / malpractice in their organisation.

All Members of the Trust Community are protected, from unfair dismissal or being penalised or harassed as a Whistleblower if they:

- reasonably believe that malpractice (Section 3.2) in the workplace is happening, has happened in the past or is likely to happen in the future;
- are making the disclosure in the public interest;
- follow the whistleblowing procedure (Section 3.3)

### **3.2 Qualifying Disclosure**

A 'qualifying disclosure' means any disclosure of information where the employee reasonably believes (and it is in the public interest to report it) that one or more of the following matters is either happening, has taken place or is likely to happen in the future:

- A criminal offence
- The breach of a legal obligation
- A miscarriage of justice
- A danger to the health and safety of any individual (includes risks to the general public as well as other employees or students of the Trust);
- Damage to the environment;
- Deliberate attempt to conceal any of the above.

### **3.3 Whistleblowing Procedure**

Disclosures or 'blowing the whistle' on malpractice should be made as follows:

1. Where employees are able to do so, they should make the disclosure in writing to their line manager.  
  
Employees will not be expected to prove the wrongdoing, but will need to demonstrate to the person contacted that there are sufficient grounds for concern.
2. Where an employee is unable to make the disclosure to their line manager, they should make their disclosure to the Executive Head/CEO of the Trust.
3. Where an employee is unable to make the disclosure to the Executive Head/CEO of the Trust, they should make their disclosure to the Chair of the Sola Fide Board of Directors.
4. Where an employee is unable to make the disclosure to the Chair of the Sola Fide Board of Directors, they should make their disclosure to the Chair of the Members Board.
5. Where an employee is unable to make the disclosure within the internal environment of the Trust, the matter should be directed in the first instance to the Academy Lead Officer within the DFE. The DFE will have its own procedures for dealing with such matters and will ensure relevant officers within the Trust are informed and will advise the governing body of the appropriate steps to take.

### **3.4 Principles for handling a disclosure (and any subsequent investigation)**

- All concerns raised by an individual will be treated fairly and properly
- Disclosures will be treated in a confidential and sensitive manner and all related material will be stored securely

- The information produced when handling a disclosure will be kept confidential, limiting access to those people relevant to the investigation. This includes the identity of the individual making a disclosure (where the identity is known)
- Official written records will be kept at each stage of the whistleblowing investigation process.
- Any individual making a disclosure can retain their anonymity unless they agree otherwise. It must be noted that anonymous concerns carry less credibility and the Trust will have discretion in each case whether to continue with an anonymous disclosure. In exercising discretion, consideration will be given to;
  - The seriousness of the issues raised;
  - The degree of credibility of the concern;
  - The likelihood of confirming the allegation from alternative credible sources;
- To protect individuals and the Trust, initial enquiries will be made to decide whether an investigation is appropriate and, if so, what form it should take.
- Based upon the nature of the disclosure, an individual (designated person), will be assigned with responsibility for reviewing the disclosure.
- Disclosures will be investigated as sensitively and speedily as possible;
- The Trust will not tolerate reprisals against, harassment or victimisation of any individual raising a genuine concern.
- On receipt of the disclosure, the designated person will consider the disclosure and the information made available to him/her and decide whether prima facie the disclosure falls within the scope of this policy or whether it would be more appropriately considered through another policy.
- Most matters will initially, be investigated internally. Concerns or allegations which fall within the scope of current policy and procedure (for example, child protection or discrimination issues) will normally be dealt with through those routes.
- The designated person dealing with the disclosure will issue an acknowledgement of receipt of the disclosure to the individual making the disclosure (where their identity is known).
- Where the disclosure falls within the scope of the Whistleblowing Policy, the designated person dealing with the disclosure will decide whether:
  - The disclosure should be investigated internally, and who should be consulted;
  - The disclosure should be investigated externally; or
  - The matter should be referred to another body e.g. police / professional body
- Where reasonably practicable the investigation should be completed within 20 working days.

### **3.5 Untrue Allegations**

If an individual makes an allegation in good faith, which is not confirmed by subsequent investigation, no action will be taken against the individual.

If an individual makes malicious or vexatious allegations, and particularly if that individual persists in making malicious or vexatious allegations, disciplinary action may be taken against the individual concerned.

### **3.6 Action following investigation of disclosure**

Once an investigation (whether internal or independent inquiry) has been completed, a written report will be prepared by the designated person, including a recommended course of action. This might include invoking other Trust Policies or reference to an external agency as appropriate.

The report will be reviewed by one of the following members of the Trust Leadership Team

- Executive Head/CEO
- Chair of Directors Board
- Chair of Trust Members Board

The individual who made the disclosure, will where their identity is known, be informed of the outcome of the investigation of the disclosure.

If no action is to be taken, the individual will be informed of the reason for this and advised that, if they are dissatisfied with this outcome, they may make the disclosure to the Executive Head/CEO of the Trust.

If the original disclosure was made to that Executive Head/CEO, the disclosure can be made to the Chair of the Board of Directors, and if the disclosure was made to the Chair of the Board of Directors, the disclosure can be made to the Chair of the Members Board. This person will either confirm the decision that no further action be taken or will determine what further action is to be taken and process by which that action will be taken.

If the individual remains dissatisfied with the outcome they should seek the assistance of "Public Concern at Work" on 0207 404 6609.

For any concerns taken outside of the Trust, this policy will not apply and any employee raising issues on a wider basis, e.g. with the press, without following the procedure in this policy may be liable to disciplinary action. If employees do feel it necessary to take a matter outside the Trust, they must ensure that they do not disclose confidential information. The law on disclosure is complex. The Trust would advise that the employee seek specific legal advice in this case.

### **4. Record-Keeping**

The Executive Head/CEO Teacher will maintain records of all disclosures, their subsequent investigations and outcomes.

### **5. Who is responsible for this policy?**

The Trust Members Board has overall responsibility for ensuring this policy complies with our legal and ethical obligations, and that all staff comply with it.

The Executive Head/CEO has day-to-day responsibility for implementing this policy, and for monitoring its use and effectiveness. Management at all levels are responsible for ensuring those reporting to them are made aware of and understand this policy.

### **6. Monitoring and Review**

The Executive Head//CEO will monitor the effectiveness and review the implementation of this policy, considering its suitability, adequacy and effectiveness. Any improvements identified will be made as soon as possible. Internal control systems and procedures will be subject to regular audits to provide assurance that they are effective.

This policy may be amended at any time.