



Whistleblowing Policy

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<i>Unless there are legislative or regulatory changes in the interim, this policy will be reviewed annually. Should no substantive changes be required at that point, the policy will move to the next review cycle</i>	

Version Control		
Version	Date	Changes
1.0	09/07/2026	In-cycle policy review and re-approval

Policy Purpose and Summary:

To ensure staff feel able to report workplace wrongdoing confidentially and without fear of retaliation.

This policy outlines procedures for reporting concerns about illegal or unethical activities, ensuring confidentiality and protection for whistleblowers.

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1. Introduction, scope and purpose

- 1.1 Staff who report workplace malpractice are legally protected from victimisation under the Public Interest Disclosure Act 1998 and the Enterprise and Regulatory Reform Act 2013. To qualify, disclosures must be reasonably believed to serve the public interest and meet the criteria of a protected act.
- 1.2 Trustees expect E-ACT employees to act with integrity and honesty. While all organisations may occasionally encounter issues or unethical behaviour, fostering openness and accountability helps prevent or address such situations.
- 1.3 The Board of Trustees has overall responsibility for ensuring that the Trust maintains effective whistleblowing arrangements and that concerns are investigated appropriately and independently.
- 1.4 This policy is not part of any employment contract and may be changed at any time. Its aims are to:
 - Promote a culture where all staff feel confident raising concerns at an early stage.
 - Encourage staff to promptly report suspected wrongdoing, knowing concerns will be taken seriously, investigated appropriately, and kept confidential.
 - Guide staff on raising concerns.
 - Assure staff they can raise genuine concerns without fear of reprisals, even if mistaken.
- 1.5 This procedure applies to employees, agency staff, contractors, consultants, volunteers, trustees and ambassadors.
- 1.6 An employee working within the school but employed on another organisation's terms and conditions of employment should have the matter managed under their appropriate policy/procedure.

2. What is whistleblowing?

- 2.1 Whistleblowing involves reporting suspected wrongdoing or dangers at work. The law protects workers who make such qualifying disclosures in the public interest, including concerns about:
 - Criminal activity
 - Health and safety risks
 - Environmental harm
 - Breaches of legal, professional, or statutory duties
 - Bribery
 - Financial fraud or mismanagement
 - Negligence
 - Policy/code of conduct violations
 - Unethical conduct
 - Deliberate concealment of any of these
- 2.2 A whistleblower is anyone who raises a genuine concern about these issues. Report concerns under this policy if they relate to the matters above. For personal complaints (e.g., how you are treated), use the Grievance Procedure.
- 2.3 This policy does not restrict staff from fulfilling their obligations under the Department for Education's latest guidance (Keeping Children Safe in Education- updated annually) or the E-ACT Safeguarding and Child Protection Policy.

- 2.4 All safeguarding concerns involving children or young people must be reported immediately. Concerns about colleagues or visitors must go directly to the Academy's Headteacher or Designated Safeguarding Lead (DSL), following the E-ACT Child Protection and Safeguarding Policy.

3. Raising a whistleblowing concern

- 3.1 If you have a concern, you are encouraged to raise it via one of the designated contacts set out in Appendix 1 so that it can be addressed promptly and appropriately.
- 3.2 If you feel more comfortable doing so, you may raise your concern with your line manager. However, the line manager must then promptly refer the matter in accordance with this policy and must not investigate or share the concern more widely. If the concern relates to your line manager, or you prefer not to raise it with them, you should use the alternative reporting routes set out in Appendix 1.
- 3.3 A meeting will be arranged to discuss your concern. You may bring a colleague or union representative, who must keep the matter confidential.
- 3.4 We'll provide a written summary of your concern after the meeting, along with information on next steps.

4. Receiving a whistleblowing concern

- 4.1 Any member of staff who receives a whistleblowing concern (either formally or informally) must not investigate, share, or escalate the matter outside of the formal whistleblowing procedure.
- 4.2 The concern must be reported promptly and confidentially to one of the designated recipients listed in Appendix 1.
- 4.3 Under no circumstances should the concern be shared more widely (including with colleagues, other managers, or through informal channels), as this may:
- Compromise the integrity of any investigation
 - Breach confidentiality obligations
 - Place individuals or the Trust at risk
- 4.4 Failure to comply with this requirement may be treated as a disciplinary matter.

5. Confidentiality and data protection

- 5.1 Staff may raise whistleblowing concerns either openly or confidentially as outlined in this policy. If a concern is raised confidentially, efforts will be made to maintain the individual's anonymity. If disclosure of identity is required for investigative purposes, this will be discussed with the individual concerned.
- 5.2 Anonymous disclosures are not recommended due to potential limitations in conducting a comprehensive investigation without further information from the whistleblower, and challenges in establishing the credibility of allegations. Staff concerned about possible reprisals if their identity is disclosed can contact one of the alternative points listed in appendix 1, where measures to preserve confidentiality may be considered. Advice can also be obtained from Protect, an independent whistleblowing charity offering confidential guidance at Helpline: (020) 3117 2520, E-mail: whistle@protect-advice.org.uk, Website: www.protect-advice.org.uk.

- 5.3 Anonymous complaints will be investigated to the extent deemed reasonable, considering factors such as:
- The seriousness of the issue
 - The credibility of the concern
 - The likelihood of corroborating the allegation from other sources
- 5.4 The Trust may collect, process and store personal data as part of this policy in accordance with its data protection policy. Compliance with Data Protection Legislation- including the General Data Protection Regulation ((EU) 2016/679), its UK implementations, and any successor legislation - will be observed in relation to collecting, retaining, and sharing workforce information. Records will be maintained following the Trust's Retention Policy and relevant legal requirements.

6. External disclosures

- 6.1 The purpose of this policy is to establish an internal process for reporting, investigating, and addressing potential wrongdoing in the workplace. In most situations, external notification is not expected to be necessary.
- 6.2 Legal provisions recognise that, in certain cases, reporting concerns to an external body such as a regulator may be appropriate. It is uncommon for such concerns to be reported to the media. Seeking advice before making any external report is recommended. Protect maintains a list of prescribed regulators relevant to specific types of concern; their contact details can be found in paragraph 5.2.
- 6.3 Whistleblowing matters generally pertain to the conduct of staff, though they may occasionally involve third parties, such as contractors, suppliers, or service providers. In some circumstances, legal protections apply if concerns are raised directly with a third party where there is reasonable belief that the issue primarily concerns their actions or responsibilities. Nonetheless, reporting concerns internally is preferred.

7. Investigation and outcome

- 7.1 Upon receiving your concern, we will conduct an initial assessment to determine the appropriate scope of investigation and whether the whistleblowing policy applies. You will be notified of the outcome of this assessment. You may be asked to attend further meetings to provide additional information as needed.
- 7.2 In certain cases, we may designate an investigator or a team of investigators, comprising staff with relevant investigative experience or specialised knowledge of the subject matter. Where appropriate, an external individual or organisation may be appointed to carry out the investigation. The investigator(s) will compile findings and may make recommendations for change to help minimise the risk of future wrongdoing. These recommendations will be forwarded to the CEO for action.
- 7.3 We are committed to keeping you informed regarding the progress, anticipated timescale, and duration of the investigation. However, confidentiality requirements and GDPR may limit the details we can share about the investigation or any resulting disciplinary actions. You are expected to treat all information related to the investigation as confidential.

- 7.4 If an allegation is found to be deliberately false and made in bad faith, this may result in disciplinary action. However, individuals who raise concerns in good faith will not be subject to disciplinary action if their concerns are not upheld.

8. Protection for whistleblowers

- 8.1 Whistleblowers are protected from unfair dismissal immediately upon joining an organisation, without a qualifying service period, and compensation limits do not apply in these cases. This protection extends to all workers, including those on casual, freelance, seconded, trainee, and agency contracts, as well as to ex-employees making disclosures after leaving employment. The Government may also extend protections to job applicants to prevent blacklisting due to previous whistleblowing.
- 8.2 We recognise that whistleblowers may fear repercussions; we encourage openness and support anyone raising concerns in good faith, even if mistaken.
- 8.3 Staff must not face any mistreatment- such as dismissal, discipline, threats, or other negative actions- for raising genuine concerns. If you experience such treatment, notify a contact listed in appendix 1. If unresolved, escalate it via the Grievance Procedure.
- 8.4 Retaliating against whistleblowers is strictly prohibited and will result in disciplinary action.

9. Notification

- 9.1 All whistleblowing disclosures must be handled in accordance with this policy and must not be investigated outside of these reporting arrangements.
- 9.2 Following receipt of a whistleblowing concern via the reporting routes set out in this policy, the Deputy Chief Executive Officer (DCEO) must be notified of any disclosure within 24 hours.
- 9.3 The DCEO must notify the Chief Executive Officer (CEO) and Chair of the Audit and Risk Committee within 24 hours of receiving notice of a disclosure and before beginning an investigation. Where the concern relates to the CEO, the DCEO must notify the Chair of Trustees.
- 9.4 Investigation outcomes must be reported to the Chair of the Audit and Risk Committee and discussed at its next meeting. An annual whistleblowing summary, including lessons learned and process impacts, will also be provided to the Committee.
- 9.5 Key reporting contacts if unsure:
- Governance Team: Head of Governance
 - Trust Contact: Deputy Chief Executive Officer
 - Trustee Contact: Chair of Audit and Risk Committee

10. Related policies

- Grievance Policy
- Complaints Policy
- Health and Safety Policy
- Child Protection and Safeguarding and Policy
- Information and Records Retention Policy

Appendix 1: Procedure for Raising a Whistleblowing Concern

STAGE ONE

Suspected wrongdoing should be reported through the Trust's formal whistleblowing procedure.

- For academy-based staff, the Headteacher is the designated initial recipient of whistleblowing concerns and must escalate all concerns in accordance with Section 9 of this policy.
- For national and shared services staff, the Deputy Chief Executive Officer is the designated initial recipient.

All concerns must be handled in accordance with this policy and must not be shared more widely or addressed outside of these procedures.

Response:

A formal response will be provided within **five working days** of receipt by the Deputy Chief Executive Officer (DCEO). This response will specify which individuals have been informed, outline any actions taken (subject to third-party rights), and provide an anticipated timeline for the investigation. Investigations will be conducted in accordance with the whistleblowing policy.

Escalation:

Escalation is appropriate under the following circumstances:

- If the designated recipient of the disclosure is implicated, escalate to the next individual listed.
- If the DCEO is implicated, proceed directly to Stage Two.
- If no response is received within five working days, proceed to Stage Two.

STAGE TWO

If necessary, report the suspected wrongdoing to the Chief Executive Officer (CEO).

Response:

Within **five working days** of receiving the disclosure, the CEO will issue a response specifying the parties notified, any actions taken (subject to third-party rights), and the proposed investigation timeline.

Escalation:

Escalation to the next stage occurs as follows:

- If the CEO is implicated, proceed to Stage Three.
- If no response is received within five working days, proceed to Stage Three.

STAGE THREE

Report the suspected wrongdoing to the Chair of the Audit and Risk Committee (whistleblowing@E-ACT.org.uk) on behalf of the Board of Trustees.

Response:

A response will be provided within **ten working days** of the Chair of the Audit and Risk Committee becoming aware of the disclosure. This response will include information regarding whom the disclosure has been notified to, any action taken, and the intended timetable for the investigation.

Escalation:

You may escalate your concern if:

- No response is received after ten working days; in this case, proceed to Stage Four.

STAGE FOUR

You should only escalate to Stage Four upon completion of all prior steps in the procedure.

If you do not receive a response within the specified timescales, you are entitled to notify an appropriate external body, which may include:

- The Health and Safety Executive (HSE)
- The Environment Agency
- The Information Commissioner
- The Department for Education (DfE)
- The Department for Business, Innovation and Skills (BIS)
- The Police
- The Charity Commission
- Ofsted
- Audit Commission
- Recognised trade union
- The Pensions Regulator

Contact Details and Queries

Should you require clarification regarding the identities of staff referenced above, please consult the up-to-date staff lists available on the Academy or E-ACT website. Email contact details can be found via your Outlook address book.

If further uncertainty remains regarding whom to contact, please email Governance.Team@E-ACT.org.uk. Your concerns are important, and we will ensure they are addressed at the appropriate level.

Roles and names

Chief Executive Officer	Tom Campbell
Deputy Chief Executive Officer	Julie Lombardo
Chair of Audit and Risk	David Roper
Head of Governance	Emma Myers