



Whistleblowing Policy

Date of Approval:	December 2025
Approved by:	Trust Board
Review Date:	December 2027

Policy Information:

Date of last review	December 2025	Review period	2 years
Date approved	December 2025	Approved by	Trust Board
Policy owner	CEO	Date of next review	December 2027

Updates made since the last review:

Review date	Changes made	By whom
December 2021	List of contents removed.	CEO
December 2022	Page 8 – address updated Re-write using model policy from The Key to move away from BCC Policy (also reviewed other local MAT policies for guidance)	CEO
December 2023	No changes made	CEO
November 2025	Updated with some minor clarifications, but included a section about how the Trust will monitor the effectiveness of this Policy	CEO

Contents

1. Aims	3
2. Legislation	4
3. Definition of Whistleblowing	4
4. Protection of whistleblowers	5
5. Procedure for staff to raise a whistleblowing concern	5
6. Trust procedure for responding to a whistleblowing concern	6
7. Malicious or vexatious allegations	7
8. Escalating concerns beyond the Trust	7
9. Confidentiality and anonymity	7
10. If you are not satisfied	9
11. Recording and monitoring of complaints	9
12. Approval	9
13. Monitoring the effectiveness of this policy	10
13. Links with other policies	10

1. Aims

This policy aims to:

- Encourage a culture of openness and accountability whereby employees feel confident in raising concerns in the public interest about suspected wrongdoing, without fear of reprisals or victimization, even where concerns are not subsequently confirmed by an investigation.
- Encourage individuals to report suspected wrongdoing as soon as possible in the knowledge that their concerns will be taken seriously and investigated, and that their confidentiality will be respected
- Let all staff in the trust know how to raise concerns about potential wrongdoing in or by the trust
- Set clear procedures for how the trust will respond to such concerns
- Let all staff know the protection available to them if they raise a whistle-blowing concern
- Notwithstanding the above, to raise awareness that vexatious or malicious concerns may be considered a disciplinary issue

This policy does not form part of any employee's contract of employment and may be amended at any time. The policy applies to all employees or other workers who provide services to the trust in

any capacity including self-employed consultants or contractors who provide services on a personal basis and agency workers.

2. Legislation

The requirement to have clear whistle-blowing procedures in place is set out in the [Academy Trust Handbook](#).

This policy has been written in line with the above document, as well as [government guidance on whistleblowing](#). We also take into account the [Public Interest Disclosure Act 1998](#).

This policy complies with our funding agreement and articles of association.

3. Definition of whistleblowing

Whistle-blowing covers concerns made that report wrongdoing that is “in the public interest”. Examples of whistleblowing include (but are not limited to):

- Criminal offences, such as fraud or corruption
- Pupils’ or staff health and safety being put in danger
- Failure to comply with a legal obligation or statutory requirement
- Breaches of financial management procedures
- Attempts to cover up the above, or any other wrongdoing in the public interest
- Damage to the environment

A whistleblower is a person who raises a genuine concern relating to the above.

Not all concerns about the Trust count as whistleblowing. For example, personal staff grievances such as bullying, or harassment do not usually count as whistleblowing. If something affects a staff member as an individual, or relates to an individual employment contract, this is likely a grievance, dealt with under the Trust’s Grievance Policy.

When staff have a concern, they should consider whether it would be better to follow our staff Grievance Policy (accessible via FET HUB) or Complaints Procedures (accessible via the Trust’s website).

Protect (formerly Public Concern at Work) has:

- [Further guidance](#) on the difference between a whistle-blowing concern and a grievance that staff may find useful if unsure
- A free and confidential [advice line](#)

If a concern relates to safeguarding and the welfare of pupils at a FET Academy/school, the whistleblower should consider whether the matter is better raised under FET’s Safeguarding & Child Protection Policy and in accordance with the arrangements for reporting such concerns, i.e. via the Designated Safeguarding Lead, although the principles in this policy will still apply.

This Policy should not be used for allegations that fall within the scope of specific statutory procedures (for example child or vulnerable adult protection) e.g. child protection &/or safeguarding matters, which will normally be referred for consideration under the relevant procedure, unless the whistleblower has good reason to believe that the appropriate process is not being followed or will not be followed effectively, in which case the provisions of this policy shall apply in relation to that allegation.

The NSPCC Whistleblowing Advice Line (08000280285) is an alternative route for staff who do not feel able to raise concerns regarding child protection failures internally.

4. Protection for whistleblowers

If a whistleblower makes a disclosure under the Public Interests Disclosure Act (PIDA) that is in the public interest and in accordance with this Policy, they are legally protected from harassment or victimisation and will not be subject to any other detriment as a result of the disclosure.

The person making the disclosure does not have to be directly or personally affected by the concerns raised, but must believe that the disclosure is true, and the disclosure must be made in the public interest.

PIDA will protect the whistleblower, irrespective of whether or not the disclosure relates to information gained in the course of their employment (e.g. a protected disclosure made by a whistleblower acting as a service user would still fall under the PIDA protection).

Any employee who makes a 'protected disclosure' which meets the definition in PIDA is legally protected against victimisation and shall not be subject to any detriment for whistleblowing.

If a whistleblower claims that, despite that commitment to protection from victimisation, they perceive they have he or she has been victimised for making a disclosure, they should make a further complaint under this Policy directly to the CEO, or if the concern relates to the CEO, directly to the Chair of the Board of Trustees.

Any allegation that an employee has been victimised for whistleblowing will be taken seriously by FET and managed appropriately.

5. Procedure for staff to raise a whistleblowing concern

5.1 When to raise a concern

Staff should consider the examples in section 3 when deciding whether their concern is of a whistleblowing nature. Consider whether the incident(s) was illegal, breached statutory or trust procedures, put people in danger or was an attempt to cover any such activity up.

5.2 Who to report to

Staff should report their concern to the Chief Executive Officer via enquiry@fet.ac or ceo@fet.ac. If the concern is about the Chief Executive Officer or it is believed they may be involved in the wrongdoing in some way, the staff member should report their concern to the Chair of the Board of Trustees, using the enquiry@fet.ac email address and marking it for the attention of the Chair of Trustees. The Trust's Senior Administrator has a responsibility to ensure such communication is passed in a timely manner to the Chair of the Trust Board.

Trustees have also appointed a specific Trustee with responsibility for whistleblowing, who will maintain oversight of the effective implementation of this Policy with the Trust CEO and who will be available should staff wish to report something specifically to someone other than the CEO. The details of the Trustee with this designated responsibility are available on the Trust website via this link.

5.3 How to raise the concern

Concerns should be made in writing wherever possible. They should include names of those committing wrongdoing, dates, places and as much evidence and context as possible. Staff raising a concern should also include details of any personal interest in the matter.

6. Trust procedure for responding to a whistleblowing concern

6.1 Investigating the concern

When a concern is received by the Chief Executive Officer - referred to from here as the 'recipient' - they will:

- Meet with the person raising the concern within a reasonable time. The person raising the concern may be joined by a trade union or professional association representative
- Get as much detail as possible about the concern at this meeting and record the information. If it becomes apparent the concern is not of a whistle-blowing nature, the recipient should handle the concern in line with the appropriate policy/procedure
- Reiterate, at this meeting, that they are protected from any unfair treatment or risk of dismissal as a result of raising the concern. If the concern is found to be malicious or vexatious, disciplinary action may be taken (see section 6 of this policy)
- Establish whether there is sufficient cause for concern to warrant further investigation. If there is:
 - The recipient should then arrange a further investigation into the matter, involving the Chair of the Board of Trustees, if appropriate, who may also involve the Trustee with specific responsibility for whistleblowing. In some cases, they may need to bring in an external, independent body to investigate. In other cases, they may need to report the matter to the police
 - The person who raised the concern should be informed of how the matter is being investigated and an estimated timeframe for when they will be informed of the next steps. There is no recognised or prescribed timescale for dealing with whistleblowing concerns, but we will endeavour to provide a complainant with feedback within 14 days of the initial disclosure, but this feedback may be as simple as a confirmation that any investigation is still ongoing.

6.2 Outcome of the investigation

Once the investigation – whether this was just the initial investigation of the concern, or whether further investigation was needed – is complete, the investigating person(s) will prepare a report detailing the findings and confirming whether or not any wrongdoing has occurred. The report will include any recommendations and details on how the matter can be rectified, and whether or not a referral is required to an external organisation, such as the local authority or police.

They will inform the person who raised the concern of the outcome of the investigation, though certain details may need to be restricted due to confidentiality.

Beyond the immediate actions, the headteacher, trustees and other staff, if necessary, will review the relevant policies and procedures to prevent future occurrences of the same wrongdoing.

Whilst we cannot always guarantee the outcome sought, we will try to deal with concerns fairly and in an appropriate way.

7. Malicious or vexatious allegations

Staff are encouraged to raise concerns when they believe there to potentially be an issue. If an allegation is made in good faith, but the investigation finds no wrongdoing, there will be no disciplinary action against the member of staff who raised the concern.

If, however, an allegation is shown to be deliberately invented or malicious, the trust will consider whether any disciplinary action is appropriate against the person making the allegation.

8. Escalating concerns beyond the trust

The trust encourages staff to raise their concerns internally, in line with section 4 of this policy, but recognises that staff may feel the need to report concerns to an external body. A list of prescribed bodies to whom staff can raise concerns with is included [here](#).

The Protect advice line, linked to section 3 of this policy, can also help staff when deciding whether to raise the concern to an external party.

9. Confidentiality & anonymity

The Board of Trustees acknowledges that the best way to raise a concern under this Policy is to do so openly. Openness makes it easier for the employer to assess the issue, to work out how to investigate the matter and to obtain more information. A whistleblower raises a concern confidentially if s/he gives his or her name on the condition that it is not revealed without his or her consent.

PIDA does not specifically require employers to guarantee confidentiality in whistleblowing matters. FET will nevertheless seek to treat all disclosures in confidence as a means of preventing victimisation and will try to avoid disclosing information identifying any whistleblower, even if FET considers that the disclosure falls outside of the scope of a protected disclosure. However, there may be situations where, due to the nature of the wrongdoing being alleged, that it is impossible to avoid disclosing information identifying any whistleblower. If this is the case, the recipient of the whistleblowing concern will consult with the whistleblower about this.

FET may also be required to disclose the identity of the whistleblower to third parties, where necessary for the purposes of undertaking investigations, for example where the disclosure relates to criminal offences and FET considers that the Police should investigate.

There may also be situations where FET is obliged to disclose information, such as where there are legal proceedings following on from investigation of the disclosure. This may require the disclosure of witness statements or correspondence, and there is also the possibility that the whistleblower may be expected to give evidence at any hearing. In these circumstances, FET will discuss the implications for the whistleblower and, where appropriate, discuss appropriate support arrangements.

A whistleblower raises a concern anonymously if they do not give his or her name at all when making a whistleblowing complaint. FET does not encourage whistleblowers to make anonymous disclosures. This is because they can make proper investigation more difficult or impossible if we cannot obtain further information from the whistleblower. It is also more difficult to establish whether concerns raised are credible. In addition, if nobody knows who provided the information, it is not possible to reassure them that they will be protected from suffering a detriment for having raised the concern.

Anonymous disclosures will always be considered but, depending on the information given and the credibility of the evidence, there may not be enough information or sufficient evidence to pursue an investigation without the investigator being able to contact the whistleblower for further information.

Where FET receives anonymous complaints, it will make a determination about whether to investigate based on:

- The seriousness of the issue(s) raised.
- The credibility of the concern(s); and
- The likelihood of confirming the allegation from other sources.

FET is subject to the Freedom of Information Act 2000. This means there is a presumption that it discloses any information it holds, unless that information falls under one or more exemptions and, in most cases, that the application of that exemption is in the public interest.

The Freedom of Information Act 2000 contains exemptions that may be applicable to permit the withholding of information identifying the whistleblower, including:

- s.40 Personal Data.
- s.41 Information which, if disclosed, would give rise to an actionable breach of confidence.

If FET receives a request for information identifying a whistleblower, it will contact the whistleblower to seek their reasonable views in respect of the disclosure or withholding of the information requested and, wherever possible, it will seek to comply with those views.

FET is mindful, in reconciling the legal obligation to disclose information it holds under the Freedom of Information Act 2000, of its legal obligations under the Public Interest Disclosure Act 1998 to avoid the discrimination or victimisation of employees or any other detriment on the part of the employee; and The Health and Safety at Work etc. Act 1974, to protect the health and safety (including mental health) of employees.

As part of the application of this policy, FET may collect, process and store personal data in accordance with our data protection policy. We will comply with the requirements of Data Protection Legislation being (i) the Data Protection Act 2018, (ii) the UK General Data Protection Regulation (UK GDPR) 2018, (iii) the Data (Use & Access) Act 2025, and their subsequent amendments. During the collecting, holding and sharing of information in relation to our workforce,

records will be kept in accordance with our Workforce Privacy Notice, our Retention Policy and in line with the requirements of Data Protection Legislation.

The lawful basis for processing whistleblowing data, particularly that 'safeguarding of children and individuals at risk' is a processing condition that allows practitioners to share special category personal data. The Trust is aware of its obligations as a data controller and has appointed an external DPO (Data Protection Officer) to advise and guide the Trust and its employees.

The Trust is aware that it must show 'due regard' for The Public Sector Equality Duty (PSED) when reviewing school policies and ensuring that they are operationally sound. The Trust assesses whether this Policy has any positive or negative impacts on people with protected characteristics to ensure all staff, regardless of protected characteristics, feel able to raise concerns.

10. If you are not satisfied

Whilst the Board of Trustees cannot always guarantee the outcome that a whistleblower may be seeking under this Policy, it will seek to deal with any concerns raised fairly, consistently and promptly. By using this Policy, whistleblowers can help us to achieve this objective.

If, however, whistleblowers are not happy with the way in which their concern has been handled under this Policy, they may raise this with one of the other key contacts at 8 above. Alternatively, they may contact one of the "prescribed regulators" set out in the whistleblowing toolkit or contact their legal adviser or their MP.

11. Recording & monitoring complaints

FET's Central team shall maintain a confidential log of disclosures made under this Policy from the date that this Policy is ratified (known as the whistleblowing register, which will sit alongside the Complaints register, kept by the Trust's Senior administrator and frequently referred to as the Trust CEO).

The Central team shall review the number and type of internal and/or external complaints being raised by whistleblowers and/or members of the public on an ongoing basis about FET or its staff or practices, with the intention of:

- Preventing the occurrence of similar concerns being raised in the future; and
- Ensuring that a consistent approach and/or strategies are being implemented across FET to minimise such concerns.
- Reporting termly to the Full Board on numbers and nature of concerns raised.

12. Approval

This policy will be reviewed every 2 years.

These procedures have been agreed by the board of trustees, who will approve them whenever reviewed.

13. Monitoring the effectiveness of this Policy

To assess the effectiveness of this policy, the Trust Executive Leaders will gather feedback from our school staff communities, to understand whether the staff understand and use the policy effectively. This can be done via School Review Meetings and Safeguarding Audits to assess whether the contents of this Policy have had any negative implications on wellbeing and workload for staff, as well as assessing understanding and effectiveness. This will also assess whether training has been sufficient.

As the Trust develops its approach to the Public Sector Equality Duty (PSED) the Trust's HR team have commenced an equality analysis, to assess whether this Policy has any positive or negative impacts on people with protected characteristics and consider any equality implications before and during policy development. This will be considered as part of future Policy reviews.

14. Links with other policies

This policy links with the following Trust policies:

- Staff Grievance Policy
- Complaints Policy
- Safeguarding and Child Protection Policy
- Staff Code of Conduct