



Whistleblowing Policy and procedures

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Introduction

Challenge-trg Skills is committed to high standards of openness, probity, accountability and ensuring that we operate in an ethical way. We expect everyone working at Challenge-trg skills to conduct themselves and carry out their role in compliance with relevant policies and procedures, staff code of conduct and relevant professional codes of conduct and best practice.

What is Whistleblowing

Whistleblowing in the context of the Public Interest Disclosure Act 1998 and subsequent amendments provides legal protection for individuals who disclose information to expose acts, such as criminal acts.

Definition

Is the act of disclosing information about a wrongdoing in the workplace. This could mean highlighting possible lawful activities in the organisation, failures to comply with legal obligations, malpractice occurring in the UK, miscarriages of justice or reporting on risks to the health and safety of individuals or to the environment.

Such activities could be a violation of a law, rule or regulation, or a threat to public interest, such as fraud, health and safety violations or financial regulations, corruption or the cover of any other these. By “blowing the whistle” you might highlight illegal activity in the workplace and may protect others in the future.

1.0 Scope and Purpose

This policy on ‘whistle-blowing’ is aimed at employees. The policy is not designed to question financial or business decisions taken by the company, nor should it be used to reconsider any matters that have already been addressed under another relevant policy such as complaint under the code of conduct policy, grievance policy or any other relevant procedural policy or appeal process.

Normally concerns about workplace matter should be raised initially with the individual's immediate line manager or a member of the SLT. However, the company recognises that because of the seriousness or sensitivity of some issues, together with the knowledge of whom the member of staff thinks maybe involved, may make this difficult or impossible to raise personally.

Specific concerns

A “whistle-blower” is legally protected if a disclosure is about one of the specific concerns below. The following are specific concerns which may be raised under this policy and procedure, however this list is not exhaustive and there may be other circumstances where whistleblowing may be appropriate.

- Financial malpractice or impropriety or fraud
- Failure to comply with legal obligation or regulatory statutes
- Any potential criminal activity
- Miscarriage of justice
- Where the health and safety of an individual has been, is being, or is likely to be endangered
- Improper conduct or unethical behaviour
- That the environment has been, is being or is likely to be damaged
- Attempts to deliberately conceal any of the above concerns.

There are a number of other potential policy areas, which managers may need to take into account. These include:

- **Code of Conduct** – which details the manner in which it is expected that employees behave.
- **Equality and Diversity** – outlines the commitment to pursue equality and diversity in all aspects of the company. Sets out the legislations designed to ensure that employees are treated fairly and equitably in the workplace.

- **Harassment Policy** – sets out the procedure followed whereby an employee suffers bullying and harassment at work.
- **Disciplinary Procedure** – outlines the procedure which will be followed where an individual is found to have raised a concern maliciously.
- **Capability Procedure** – sets out the steps to be followed where an individual is underperforming.

Managers should liaise closely with the Managing Director for help and guidance as appropriate.

2.0 Policy Statement

- 2.1 Challenge-trg Skills is committed to the highest possible standards of openness, probity and accountability. Employees who have concerns regarding malpractice are encouraged to report these in the knowledge that their concerns will be listened to and dealt with so that inappropriate practices may be halted.
- 2.2 Individuals should raise any concerns internally at the earliest opportunity in order that the matter can be resolved before the situation deteriorates further.
- 2.3 It is recognised that individuals may be reluctant to come forward for fear of retribution or for fear of appearing disloyal to colleagues. Employees will be provided with support when issues are raised internally and provided with information and support during any subsequent investigation.
- 2.4 All concerns will be treated in confidence and every effort will be made where possible not to reveal an employee's identity if they so wish. Employees will be encouraged however to put their name to an allegation, as concerns expressed anonymously are significantly less powerful and more difficult to tackle.
- 2.5 Challenge-trg Skills will exercise discretion in tackling anonymous allegations. Consideration will be given to the seriousness and credibility of the allegation and likelihood of confirming the allegation from other sources.
- 2.6 The policy applies to permanent and temporary employees.
- 2.7 Employees will be protected from any detriment or disciplinary action for raising, in good faith and within company, any issues covered by this policy. Challenge-trg Skills will take appropriate action to protect employees raising such concerns within the company in good faith.
- 2.8 Where allegations made internally and in good faith are subsequently unsupported by any investigation, action will not generally be taken against the employee. Where however employees make allegations relating to areas outside this policy or raise any allegations frivolously, maliciously or for personal gain, disciplinary action may be taken against them.
- 2.9 The nominated individual with overall responsibility for the maintenance and operation of this policy is the Managing Director. Records will be maintained of the concerns raised and the outcomes achieved.

3.0 General Guidance

- 3.1 Managers should protect employees who raise appropriate concerns internally and bullying and harassment must not be tolerated. This may include arranging interviews in a neutral setting, maintaining confidentiality wherever possible or taking action to deal with any harassment or victimisation.
- 3.2 Managers must treat all concerns in confidence and where possible, respect an individual's desire to keep their anonymous. Employees must be advised however that they may need to be formally interviewed during the course of investigation and that their identity may need to be revealed. In determining a course of action in relation to anonymous allegations, managers must consider the seriousness of the issues raised, the credibility of the concern, and the likelihood of confirming the allegation via other sources.

- 3.3 All instances must be reported to the Managing Director and Human Resources. In some cases, Managers may need to take immediate action before an investigation commences.
- 3.4 Employees should be supported in the knowledge that it may have been difficult for them to come forward and they may be experiencing feelings of unease or disloyalty to colleagues.
- 3.5 Managers should attempt to minimise any difficulties the employee may experience as a result of raising a concern. Where employees are required to give evidence as part of disciplinary or criminal proceedings, Managers should ensure that employees are advised of the procedure being followed. Additional support/counselling can be provided as appropriate.
- 3.6 Managers should write to the employee who has raised the concern internally within 10 working days, acknowledging that the concern has been received and indicating how the company proposes to deal with the matter. Where this cannot be achieved within the agreed timescale, Managers should write to employees, informing them of the new date and giving reasons for the delay.
- 3.7 Where an informal investigation is ongoing or takes place, the investigating officer should keep the employee informed of the progress of the investigation, subject to any legal constraints.
- 3.8 Managers should not take action against employees who have made an appropriate allegation in good faith which is not subsequently supported by the investigation. Where however employees make allegations which do not concern the areas covered by Challenge-trg Skills's policy. Or do not raise any legitimate concerns in good faith (for example frivolously, maliciously, or for personal gain), Managers must consider whether it is appropriate to take disciplinary action. The Operations Director must be consulted before any such action is initiated.
- 3.9 Where an employee raises a concern externally, this may in some circumstances be grounds for disciplinary action. Managers must consult the Operations Director before initiating any such action.

4.0 Whistleblowing procedure

4.1 Protected disclosures

- 4.1.1 This procedure has legislation which protects individuals who, out of sense of public duty, want to reveal suspected wrongdoing, unlawful activities, failure to comply with legal responsibilities, malpractice, miscarriages of justice or reporting risks to health and safety to individuals or the environment
- 4.1.2 The law allows individuals to raise what is defined as a "protected disclosure". To be a protected disclosure, a disclosure must relate to a specific concern, as referred to 4.1.1 and the disclosure must be made in a appropriate way in line with the procedure and clear that it is whistleblowing (See Appendix 1)
- 4.2 Policy is designed to offer protection to those individuals of the company who disclose such concerns provided that:
- a) The disclosure is made in good faith, and the information they are disclosing is true to the best of their knowledge
 - b) The individual has reasonable evidence that the specific concern has happened, is happening or is likely to happen soon
 - c) The individual has reasonable belief the disclosure evidence malpractice or impropriety and they have made the disclosure to an appropriate designated person (Appendix 2)
 - d) There is no evidence of potential malicious or vexatious allegations (this may be identified during any investigation or is subject to any information available in relation to the individual making the disclosure).

5.0 Safeguards and support for individuals

Safeguards for Making a Disclosure

- 5.1 Strict confidentiality is of paramount importance when individuals make a disclosure and will be maintained throughout application of this procedure. Your feedback is important, and any concerns raised under this policy and procedure will be treated with strict confidentiality and in compliance with the Public Interest Disclosure Act 1998 and General Data Protection Act Legislation.
- 5.2 Information will only be shared on a “need to know” basis, and in the pursuance of any investigation required to gain evidence and clarity as to the specific concerns raised. Designated staff will take steps to ensure that the name of the whistle-blower is not referred to during any investigation or documented in any reports and recommendations, unless written consent has been first obtained and/or it is considered safe and appropriate to do so.
- 5.3 It is important to note, that subject to the nature of the specific concern raised, and who may have been involved or who knew or was told about something, it may not always be possible to maintain complete anonymity.
 - 5.3.1 There are situations where the information is so specific it is not possible to maintain anonymity and/or through any investigation it may inevitably reveal the identity of the whistle-blower. In such situations, the designated person will consider the concerns raised and discuss with the whistle-blower and they are made fully aware of the investigation and procedure to protect and support them prior to the start of any investigation.
 - 5.3.2 If an anonymous concern is raised under the whistleblowing policy, this may limit the investigation process. Transparency is essential to enable the designated persons to investigate thoroughly and be able to take appropriate action.
- 5.4 No formal disciplinary action will be taken against an individual on the grounds of making a protected disclosure under this policy and procedure. Any individual who raises specific concerns under this policy and procedure will not suffer dismissal or any detrimental action of any type by the company for making a disclosure in accordance with his policy and procedure. Equally where an individual is threatened, bullied, pressurised, or victimised by a colleague for making a disclosure, disciplinary action will be taken by the company against the colleague in question.
- 5.5 Support for the Whistle-blower
 - 5.5.1 Throughout the investigation the Investigating Officer will maintain regular communication with the whistle-blower to ensure that they feel supported within the workplace and to keep them informed of progress.
 - 5.5.2 Once the investigation and outcome process has been concluded, appropriate support will be offered to the whistle-blower. This may include counselling, mediation, one to one support, as may be appropriate. This will be discussed with the whistle-blower.
- 5.6 Support for Designated Persons
 - 5.6.1 It is recognised that there may be occasions, subject to the nature of the allegations / concerns raised under this procedure that the designated persons involved with discussions relating to the whistleblowing concerns or investigation process may need some advice and support, especially if dealing with highly contentious, sensitive, or safeguarding matters.

6.0 How do I make a disclosure

6.1 Who do I disclose information to?

- Should the concern relate to staff the line manager should be the designated person/Human Resources
- Should the concern relate to manager the Managing Director or they will designate a person to investigate.
- Should the concern relate to a member of the SMT then the chair of the advisory board will be the designated person or will designate a member of the board to investigate

7.0 Whistleblowing – Safeguarding

7.1 Any concerns regarding the safeguarding of children or vulnerable adults must be referred via the Safeguarding Policy and Procedure and reporting matter to either:

- The Designated Safeguarding Lead
- Managing Director

7.1.2 In such situations, it may not be possible, due to the nature of the allegations to maintain the absolute confidentiality of the whistle-blower. Whomever receives the whistleblowing information must contact the whistle-blower and explain that they will need to consult with the DSL and their name may need to be disclosed. The confidentiality of the whistle-blower will be protected as much as possible; however, they need to understand that if there is a safeguarding risk, this must take priority and there are different policies and procedures in place which must be followed to safeguard staff and learners as appropriate.

7.2 What should I disclose?

Disclose to the designated person that you are making a 'protected disclosure' and provide relevant details. **Do not** investigate yourself or take any action such as speaking with anyone directly involve as this may raise suspicions. It is important for you to consider the following and provide as much information as you have initially observed, identified, or have available:

- a) What hard evidence do you have to support your claim? If you have a suspicion, is there evidence you can initially collect discretely to protect.
(Can you provide, dates, times (if known), location, department, who was involved, who knew, what evidence do you have access to? (emails, screen shots, reports, notes of meetings, is there evidence that we could obtain, do you have text messages / phone messages etc etc?)
- b) Consider the seriousness of the issues you are raising. Is there a breach of policy, is there a breach of financial regulations, is it a potential criminal offence?
- c) The credibility of the concerns, and how likely it is that the concern can be confirmed from attributable sources, evidence available.
- d) Are you sure that your concerns could not be raised informally to an appropriate member of the management team to allow them to decide the appropriate policy to apply, or raise your concerns through the usual grievance procedure or, or have you already raised them and believe that no action has been taken or you are not being listened to and need to escalate further?

7.3 How will my disclosure be managed (Refer to workflow)

7.3.1 When an individual makes a disclosure to a designated person they will receive a response in writing within 3 working days (subject absence/work commitments) this may be sooner is a serious issue is disclosed such as safeguarding or serious breach of policy /procedure or if the Police may need to be involved.

7.3.2 The designated individual who received the whistleblowing information will immediately report the concerns to the chair of the advisory board (subject to who the allegations are against and severity)

- 7.3.3 As part of the initial discussion the designated individuals may need to consider whether the matter is referred to the relevant external agency, such as the Police or one of the LADO's (Local Authority Designated Officer), if safeguarding before any action is taken internally by staff.

8.0 The investigation

- 8.1 The Investigating Officer will take appropriate action to investigate the concerns raised as a priority. Subject to the nature of the allegations there may be some urgency required in carrying out initial investigations as it may warrant a member of staff's suspension from employment or to secure specific documentation / information.
- 8.2 The whole investigation process should take no longer than between 20 working days, subject to the nature and complexity of the allegations under investigation. The whistle-blower will be kept informed of progress. Investigation guidance is provided in **Appendix 1**.
- 8.3 Any recommendations for further action will be made by the Investigating Manager to the relevant member of SMT or advisory board as appropriate. The recipient will take necessary steps within their power to ensure the recommendations are implemented unless there is good reason for not doing so
- 8.4 The individual who made the disclosure will be notified of the outcome and any action taken by the company under this policy and procedure within a reasonable period after the investigation is completed.
- 8.5 If the individual is not satisfied that their concern has been appropriately addressed, they can appeal against the outcome by raising the issue with the Managing Director within 5 working days of receiving written notification of the outcome. The Managing Director will make a final decision on action to be taken and notify the individual accordingly.

9.0 Disclosure to external bodies

- 9.1 This policy and procedure is designed and implemented to encourage and enable individuals to raise specific concerns internally within the Company and be assured that appropriate action will be taken. Individuals do however have the right to make a disclosure outside of the Company where there are reasonable grounds to do so in accordance with the law.
- 9.2 Individuals may make disclosures to the appropriate external body prescribed by the law. The list of 'prescribed' organisations can be found on the government whistleblowing website: www.gov.uk/whistleblowing.
- 9.2.1 PROTECT
- 9.2.2 Individuals may also contact PROTECT, which is the UK's whistleblowing charity. They aim to stop harm by encouraging safe whistleblowing. They provide confidential advice line support across all sectors, and conduct research, and help inform public policy and legal protection of whistle-blowers. You can access their support via:

website via: <https://protect-advice.org.uk/>

Email: whistle@protect-advice.org.uk

10.0 Record Keeping

- 10.1 The company will keep all records raised under this policy and procedure in accordance with the General Data Protection Regulations.
- 10.2 All information relating to any whistleblowing disclosure and/ or investigation will be stored confidentially. This means only Challenge email accounts will be used for communicating.
- 10.3.1 For the purpose of this procedure records will refer to everything relating to the initial disclosure, investigation and outcome and will include but is not limited to the following:

- The initial communication in which the whistleblowing was disclosed. This may be letter, email, or any other form of written communication.
- The letter to the individual acknowledging receipt of the disclosure.
- The complaint, whistleblowing form
- Investigation interview transcripts carried out with the individual who made the disclosure, which should be signed as true and accurate
- Investigation interview transcripts carried out with all witnesses which should be signed as true and accurate.
- All documentation requested and obtained as part of the formal investigation
- Physical evidence
- The letter confirming the outcome to the individual who made the disclosure.
- ~~The Complaint/Concern with the Whistleblowing electronic disclosure, which should be signed~~

11. Anonymous Whistleblowing Disclosures

- 11.1 Individuals are required to identify themselves when making a disclosure. If an anonymous disclosure is received, the Company will not be able to notify the individual who raised the concerns of the outcome or of action taken. Anonymity also means that the Company will have difficulty in investigating such a concern, especially if limited information is provided and the designated persons are not able to meet with you to ask questions and clarify concerns raised.
- 11.2 The SMT reserve the right to determine whether to apply this procedure in respect of an anonymous disclosure having considered the following:
- a) The seriousness of the issues raised in the disclosure
 - b) The information that has been provided
 - c) The credibility of the concern
 - d) How likely it is that the concern can be confirmed from attributable sources.

12. Malicious or Vexatious Whistleblowing Concerns

- 12.1 If through the investigation process the evidence collated identifies that the whistleblower has made a malicious or vexatious disclosure, or the disclosure was made to an external organisation without reasonable grounds of foundation/evidence then the relevant evidence must be discussed with an independent /impartial designated person and Director of HR.
- 12.2 It is important that the relevant evidence is fully considered, which may include if procedures have been applied under company policies and a decision made whether to pursue further investigation or action against the whistle blower in line with the company disciplinary policy and procedure.

Appendix 1 Investigation Guidance

1.0 Investigating a Whistleblowing Matter

- 1.1 Carrying out an investigation requires effective planning and a methodical approach considering care and attention. It must take place promptly to avoid potential evidence being tampered with or lost, and so that individual memories do not fade or become distorted by other versions of the truth being discussed and influenced by others.
- 1.2 The investigation will often require the cooperation of managers, staff, governors and possibly students. This may also involve external agencies as may be appropriate.
- 1.3 Whilst the operational business needs should continue to operate effectively you must also consider the nature of the investigation, and the importance of a fair and thorough investigation and resolving the whistleblowing disclosure promptly in the best interest of the College and individuals involved.

2.0 Role of Designated Lead

- 2.1 The designated lead, will work with a Senior Leadership Team Member and will maintain communication with them throughout the investigation process through to conclusion.
- 2.2 Where an external agency is involved in the situation, such as the Police / LADO (Local Authority Designated Officer), they will maintain communication with the designated external agency contact and ensure compliance with advice received.

3.0 Role of the Investigation Manager

3.1 Investigation Purpose

- 3.1.1 The purpose of any investigation is to consider the information received from the whistle-blower, establish the facts, collate relevant information whether physical or documented, analyse all information, and make a judgement, and recommendation as to the outcome and way forward. This will involve, but not be limited to:
 - Interviewing / taking a further statement from the whistle-blower
 - Maintaining strict confidentiality as to the name of the whistle-blower
 - Interviewing / taking a statement from any potential witnesses referred to, or individual who may have relevant information as to the concerns raised.
 - Pursue / investigate all leads, without bias or discrimination, keep an open mind.
 - Collecting and reviewing all relevant documents, whether held manually or electronically.
 - Collecting and reviewing all physical evidence
 - Checking whether there is a custom and practice in place as to “how things are done” within the company
 - Obtaining and checking company policies and procedures and whether complied with or if there are any breaches
 - Obtaining and checking any regulatory documentation including but not limited to awarding bodies, professional bodies and government guidance
 - Checking, are there potential legal implication
 - Making a recommendation to the Whistleblowing Lead as to whether any external agencies need to be involved if further evidence is collated through the investigation which may mean the internal process needs to be placed on hold.

- Analysing the information collated, check dates, times, events, who was / may be involved, individuals' recollection of events noting areas of similarity, potential collusion or disparity which may require further investigation, or which may be significant to the matter under investigation.
- Maintain communication with the Whistleblowing Lead and key designated members on a need-to-know basis and the whistle-blower throughout the investigation process ensuring they are kept informed as to progress.
- Liaise and communicate with all relevant persons related to this investigation.
- Maintain accurate records of all communications and evidence electronically on company systems and using company email addresses.
- Consider whether there is any potential damage to the companies reputation and liaise with the Whistleblowing Lead / Designated Persons as to any appropriate action to take to minimise the risk or deal with any external communications / publicity.
- Produce a written report detailing all the findings and analysis of the evidence collated along with recommendations for the Whistleblowing Lead and designated persons to consider.
- Be mindful about any advice you provide/ If you have any concerns seek advice from the Designated Lead

Interviews

- 3.2.1 When interviewing either the whistle-blower or potential witnesses, the company procedures do allow for them to be accompanied by a work colleague. You must confirm this information to them in any email / letter written communication with them and verbally when talking to them.
- 3.2.2 Arrange a mutually convenient time and location to meet as soon as possible. It should be made clear that there is a priority to investigate and obtain information as soon as possible.
- 3.2.3 Individuals must also be advised that subject to the information / evidence collated the Designated Persons, may need to take further action under relevant company Policies and Procedures and may need to refer to an external agency.
- 3.2.4 Provide reassurance to anyone you are interviewing, to assure them of confidentiality and request that they maintain strict confidentiality to ensure a full, fair, and thorough investigation process. You should also advise them that you may not be able to maintain witness names, subject to the nature of the concerns / allegations made and potential outcomes.

Interview Questions

Ask only questions that relate to the specific concerns / allegations and to uncover the facts and obtain evidence. You may need to establish:

- The sequence of events, dates, times, and locations.
- Who was involved (who did what, and who may have witnessed it and what are their contribution to
- the concerns /allegations raised)?

- What has taken place
 - Have staff complied with and implemented management decisions and whether individuals have questioned any concerns or whether they have had to comply with direct instructions to.
 - What documented evidence is available (e.g.: minutes of meetings, e-mails, mobile phone text messages, letters, employment contracts, 121 meeting notes, performance, and development review documents,
 - What physical evidence is available (e.g.: transcripts of phone messages, text messages, CCTV, photographs_
 - Custom and Practice: Whether there is custom and practice in place as to what 'normally' happens, although
 - it may not be documented in a procedure or document anywhere. It's impossible to document every process or who people report things to for example.
 - What are the working relationships like within the team?
 - Has anything occurred under another policy or procedure involving individuals including in this investigation that may have a bearing or influence on what's been disclosed as part of whistleblowing, or the whistle-blower?
 - Whether there are any whistleblowing circumstances
 - Whether and what policies and procedures may have not been followed or breached, and whether it is a minor or serious breach
- 3.2.5 Prepare your questions in advance of the interviews. Take care to ensure you ask similar / same questions of all subjects to their alleged involvement to cross check evidence collated. The questions may be generic or specific in relation to the concerns / allegations raised, whilst maintaining confidentiality of the whistle-blower. Ask open questions rather than leading questions unless you want to know if a specific incident / action took place. The object is to ask questions to find out what happened, not to catch the individual out, so be mindful of cross-examination questions, or challenging them as to whether they did see / witness something. Remember to go back over your questions at the end of the interview, check you have asked everything you need to, and check your understanding of what the individual has said to ensure you have recorded or understood the situation /what's been said.
- 3.2.7 The individual / witness may ask questions, and you may or may not be able to answer them.
- 3.2.8 Take notes of everything you ask and everything that is said. You may want an official confidential note take present with you. If you do, ensure you tell the whistle-blower witness at the point you contact them and invite them to an investigation interview meeting. Disclose that the notes will not be taken verbatim but should accurately reflect the questions asked and their responses, and the notes will be typed up and sent to them to approve within 2 working days from the date of interview and they need to reply within 2 working days, otherwise they will be taken as accurate for the investigation purpose. Ideally, the notes should be approved by the individual, but this is not always possible.
- 3.2.9 Remember that the individual may feel guilty, scared, and concerned about information they are disclosing or their own involvement. They may also be worried as to any potential impact of them being involved or the information they disclose. Remember to remain calm and

empathetic, never promise anything or provide an assurance on something that you are not able to do.

3.3 Reporting your findings

Once you have concluded your investigation, during your investigation process, you must draft a report.

may appear obvious, but it is suggested the report be broken down into specific sections to help the Whistleblowing Lead / Designated persons to consider the findings, evidence, and recommendations.

a) Cover Page:

This should state it's a management report and its strictly confidential with restricted circulation

b) Contents Page:

Table showing the contents and appendices you may refer to.

c) Methodology / chronology:

What action have you taken to investigate and chronology of timelines may be helpful

d) Introduction:

This should state the purpose of the report, and why the investigation was commenced.

e) Concerns / Allegations:

This section should outline what is alleged to have taken place / what are the specific concerns under investigation

f) Findings:

For each concern raised / allegations you must clearly record:

- Whether the concerns / allegation have been proven, not proven, or whether there is insufficient evidence to prove or refute them.
- A summary of evidence collated from each witness / documentation / physical, referring to appendices
- An analysis, so what if 4 out of 5 witnesses concur the incident took place, or what if one or two did and others did not etc, what is there is contradictory evidence and it's difficult to conclude something did happen
- What documentary / physical evidence is clear and factual and can be undisputed.
- Policies / procedures / regulatory authority / legal: document any breaches whether minor or significant.
- Impact: what is the impact of what's happened?

g) Conclusion:

Summarise your conclusions in relation to each of the concerns /allegations raised. In reaching your conclusion you must focus on hard /factual evidence, and what you reasonably believe to be the facts. You must be fair and consistent and must not discriminate on any grounds. Also be clear we are compliant with employment law, so decisions are made on 'balance of probability', based on the evidence, we are not under criminal law where the burden of proof is 'beyond all reasonable doubt'.

h) Recommendations:

What are your recommendations from the observations and conclusion? This could involve in further action being taken under the relevant company Disciplinary Policy and Procedure.

3.4 Outcome of Investigation

- 3.4.1 The report must be disclosed to the Whistleblowing Lead / Designated Person as appropriate for them to review and decide as to the recommendations.
- 3.4.2 The decision will then be communicated appropriately, along with further action to be taken to the appropriate Senior Management Team
- 3.4.3 The whistle-blower should be informed that the investigation has been concluded and appropriate action will be taken. It is not permitted to disclose to them the full outcome and company's decisions to maintain strict confidentiality of other relevant parties. You may be able to share some of the recommendations.
- 3.4.4 The Designated Persons will report to the Senior Leadership Team and relevant advisory Members the outcome, along with recommendations and action the company will take to minimise / eradicate the risk of any further / similar situations arising.

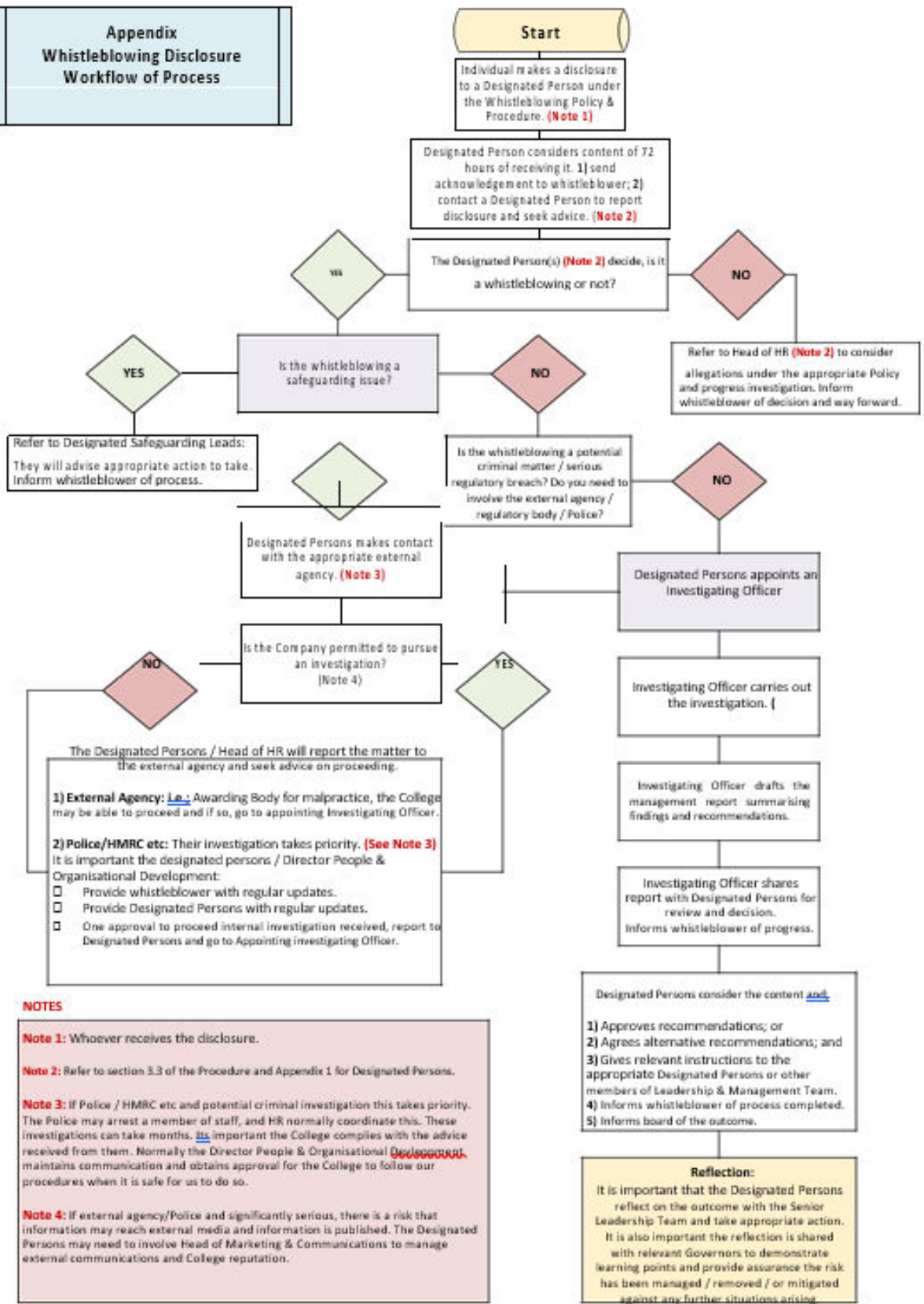
4.0 Record Keeping / Communications

- 4.1 A full copy of all documentation, appendices and everything collated and communicated in relation to the Whistleblowing disclosure, investigation and outcome must be retained in line with GDPR as referred to within the procedure.

5.0 Reflection / Lessons Learnt

- 5.1 It is important to reflect on all concerns / allegations made, and the investigation process to review, reflect and learn from each situation that arises. A meeting should be arranged with the key relevant designated persons, and to have information shared with SMT members / corporation and appropriate.

**Appendix
Whistleblowing Disclosure
Workflow of Process**



NOTES

- Note 1:** Whoever receives the disclosure.
- Note 2:** Refer to section 3.3 of the Procedure and Appendix 1 for Designated Persons.
- Note 3:** If Police / HMRC etc and potential criminal investigation this takes priority. The Police may arrest a member of staff, and HR normally coordinate this. These investigations can take months. It is important the College complies with the advice received from them. Normally the Director People & Organisational Development maintains communication and obtains approval for the College to follow our procedures when it is safe for us to do so.
- Note 4:** If external agency/Police and significantly serious, there is a risk that information may reach external media and information is published. The Designated Persons may need to involve Head of Marketing & Communications to manage external communications and College reputation.