Whistleblowing Policy and Procedure 2026-2029

St Bartholomew's CE Multi Academy Trust

7 October 2026

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St Bartholomew's CE Multi Academy Trust is a private company limited by guarantee, with charitable status, registered in England and Wales (company number: 10312858) and whose registered office address is at St Bartholomew's Church of England Primary School, Sedgley Road, Penn, Wolverhampton WV4 5LG.

St Bartholomew's CE Multi Academy Trust Whistleblowing Policy and Procedure

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1. Policy statement

1.1 St Bartholomew's CE Multi Academy Trust ('us' / 'we' / 'our') is committed to maintaining the highest standards of integrity, honesty, accountability and transparency. We are committed to fostering a culture in which employees, workers, contractors, volunteers, trustees, governors, suppliers and other stakeholders feel able to raise genuine concerns about wrongdoing, malpractice, unethical conduct, breaches of regulatory requirements or risks to pupils, staff, the Trust or the wider public, without fear of reprisal, victimisation or detrimental treatment.

1.2 We recognise that whistleblowing plays an important role in supporting effective governance, safeguarding, financial propriety, regulatory compliance, examination integrity and public confidence. Concerns raised under this policy will be taken seriously and handled appropriately, fairly, sensitively and, so far as reasonably practicable, confidentially.

1.3 In implementing this policy, we aim to comply with relevant legislation, including the Public Interest Disclosure Act 1998 and the Employment Rights Act 1996. We will also have regard to applicable statutory and sector guidance, including Keeping Children Safe in Education, the Academy Trust Handbook, DfE whistleblowing guidance, JCQ regulations and awarding body requirements where relevant.

1.4 The Academy Trust Handbook provides the overarching framework for financial governance, management and controls for academy trusts in England. Compliance with its requirements is a condition of academy trust funding agreements. Trustees, accounting officers, principals, senior leaders and others with responsibility for governing, managing or auditing an academy trust are expected to understand and adhere to it. This policy is therefore intended to support the Trust in meeting those governance and accountability expectations.

1.5 Grievances regarding the employment of an individual (for example bullying, harassment, discrimination) are not covered by whistleblowing law, unless the particular case is in the public interest.

1.6 We are committed to equality, values diversity and will apply this policy in accordance with its duties under the Equality Act 2010 and the Public Sector Equality Duty. All individuals involved in the application of this policy are expected to act fairly, objectively and without discrimination.

1.7 If you consider that any of our practices, policies or procedures may be indirectly discriminatory, you should report your concerns and the basis for them to your line manager, who will take appropriate action and ensure that you receive a written response in respect of the concerns that you have raised.

1.8 Where applicable, data will be kept in line with our retention schedule. Retention of data will be proportional to the purpose for which the data is collected, whilst taking into account any legal statutory requirements in terms of retention periods.

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1.9 This policy does not form part of your contract of employment with us. We reserve the right to amend this policy at any time.

2. Scope

2.1 This policy applies to all employees and workers employed or engaged by the Trust. Other individuals, including contractors, agency workers, consultants, trustees, governors, volunteers, suppliers, former employees and other stakeholders, are also encouraged to raise concerns under this policy where they reasonably believe that wrongdoing, malpractice or serious misconduct has occurred, is occurring or is likely to occur.

2.2 This policy applies to concerns raised internally and, where applicable, to concerns escalated to or received by the Chair of the Trust Board, Chief Executive Officer (CEO), Executive Leaders, Headteacher, Head of School, or other designated person.

2.3 This policy is not intended to replace other policies or procedures. Personal employment concerns, such as concerns about an individual's own terms and conditions, workload, management relationship, bullying, harassment or discrimination, will usually be dealt with under our Grievance, Dignity at Work Policies and Procedures or another relevant procedure, located within SharePoint unless the concern also raises a wider public interest issue.

2.4 Safeguarding concerns should be raised in accordance with our Safeguarding and Child Protection Policy and Procedures. However, where a member of staff believes that safeguarding concerns have not been addressed appropriately, or that there has been a serious failure in safeguarding practice, this may also amount to a whistleblowing concern. Keeping Children Safe in Education emphasises that safeguarding is everyone's responsibility and that staff should act immediately and report concerns without delay.

2.5 Concerns relating to examination compliance, suspected malpractice or maladministration may fall within this policy, but they must also be handled in accordance with JCQ and awarding body requirements where applicable.

3. Aims and Principles

3.1 We will take all whistleblowing concerns seriously and will assess them promptly, fairly and objectively. We will maintain confidentiality as far as reasonably practicable and will share information only where there is a legitimate need to know, including where sharing information is necessary to investigate the concern, obtain advice, comply with legal or regulatory obligations,

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protect individuals, safeguard pupils, preserve examination integrity or enable appropriate governance oversight.

3.2 No assumptions will be made before concerns have been properly considered or investigated. Individuals who are the subject of concerns will be treated fairly and with appropriate regard to confidentiality and procedural fairness.

3.3 The aim of this policy is to ensure that qualifying disclosures can be raised without fear of reprisal, victimisation, or dismissal, and dealt with properly and with due consideration.

3.4 Conflicts of interest will be identified and managed at the earliest opportunity. Where required, external advice may be sought to ensure that our approach is appropriate and defensible.

3.5 We will take particular care to protect future decision-making. This means that individuals who may be required to sit on a potential disciplinary panel, appeal panel, grievance panel, dismissal panel, governance review or other decision-making body should not be unnecessarily exposed to detailed allegations, evidence or investigation material before their formal involvement is required.

4. What is Whistleblowing?

4.1 Whistleblowing is the disclosure of information which, in the reasonable belief of the person making the disclosure, is made in the public interest and tends to show that wrongdoing, malpractice or serious misconduct has occurred, is occurring or is likely to occur.

4.2 This policy covers qualifying disclosures of:

- A criminal offence
- A failure to comply with legal or regulatory obligations
- A miscarriage of justice
- Safeguarding Failures
- Serious governance failures or an abuse of authority
- Conduct or behaviour which falls below established standards of good practice
- Unethical conduct or malpractice
- A danger to the health and safety of any individual
- Damage to the environment
- Financial malpractice, fraud, bribery, corruption, improper use of public funds
- Sexual harassment, sexual misconduct, harassment or discriminatory practices
- Examination or assessment malpractice or maladministration.
- Failure to report suspected malpractice, safeguarding concerns or other reportable matters where required.

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- The deliberate concealment of information about any of the above

4.3 The individual raising the concern does not need to prove that wrongdoing has occurred. However, to be protected under whistleblowing legislation, they must reasonably believe that the disclosure is in the public interest and that the information tends to show one or more of the matters covered by this policy. A concern may still be a qualifying disclosure even if the individual is not personally affected by the issue raised.

5. Procedure

5.1 Anyone considering raising a concern may wish to seek advice before doing so. Advice may be sought from a trade union or professional association representative, Protect, an HR representative, a senior leader, our designated whistleblowing contact, the NSPCC whistleblowing advice line where the concern relates to child protection or safeguarding, or an appropriate external body or prescribed person where applicable.

5.2 Seeking advice does not prevent an individual from raising a concern under this policy. We will not tolerate any attempt to prevent an individual from raising or pursuing a genuine whistleblowing concern.

6. Reporting Arrangements

6.1 Concerns may be raised orally or in writing. You are encouraged to provide as much detail as possible, including the nature of the concern, relevant dates, times and locations, the names of individuals involved, any witnesses, documents or other evidence available, whether the concern has previously been raised and what action, if any, the individual believes may be appropriate.

6.2 We will maintain a confidential register of qualifying disclosures raised under this policy. The register should record sufficient information to demonstrate that concerns have been considered properly, without including unnecessary personal data or information which could compromise confidentiality, investigation integrity or future decision-making.

7. Stage 1 Raising a Concern

7.1 Where an individual wishes to raise a concern under this policy, they may initially wish to discuss the issue informally and in confidence with an appropriate person, such as a line manager, senior leader, trade union representative, HR representative or the Trust's designated whistleblowing contact.

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7.2 Where informal discussion is not appropriate, or where the individual wishes to raise the matter formally, the concern should be raised in accordance with this policy.

7.3 A formal concern may be raised orally or in writing. The individual should set out the concern clearly and provide as much detail as possible. Where the identity of the whistleblower is known, we will acknowledge receipt of the concern in writing within five working days, unless there is a reasonable reason why this is not possible.

7.4 The acknowledgement will normally confirm that the concern has been received, who will undertake the initial assessment, whether further information is required, an invitation to a meeting to discuss the concerns, the right to be accompanied by a trade union representative or work colleague and any immediate next steps.

7.5 Where the concern is anonymous, we may not be able to acknowledge receipt or seek further information. However, the concern will still be considered in accordance with this policy.

8. Concerns Involving the CEO, Executive Leaders, the Chair /Vice Chair of the Trust Board or a Headteacher/Head of School

8.1 Where a concern relates to a headteacher, head of school, executive leader, or other individual in a position of significant responsibility, the concern should be escalated to the CEO.

8.2 Where the concern relates to the CEO or Trustee/Governor, it should normally be reported to the Chair of the Trust Board. Where the concern relates to the Chair of the Trust Board, it should normally be reported to the Vice Chair of the Trust Board or Governance Professional. Where the concern relates to both the Chair and Vice Chair, the Trust should seek external governance, HR and/or legal advice to identify an appropriate route for handling the matter.

8.3 Where a concern relates to examination compliance and involves the Exams Officer or senior leadership, we will ensure that an appropriate independent person is identified to assess and progress the matter in accordance with JCQ and awarding body requirements.

9. Stage 2 Investigation

9.1 Following receipt of a concern and if applicable following the initial meeting, the appointed person will determine whether an investigation is required. The decision will depend on the nature of the concern, the information available, the seriousness of the issue, the individuals involved, and whether the matter falls within this policy or should be dealt with under another procedure.

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9.2 Where an investigation is required, the appointed person will appoint an appropriate investigating officer. In determining who should investigate the matter, the appointed person will consider the nature and seriousness of the concern, the individuals involved, any actual, potential or perceived conflict of interest, the need for independence and impartiality, whether specialist knowledge is required, whether the matter involves safeguarding, finance, governance, examination compliance or regulatory requirements, and whether an external or independent investigator should be appointed.

9.3 The investigating officer will be provided with written terms of reference setting out the scope of the investigation, the concerns to be considered, the evidence to be reviewed, the individuals to be interviewed where appropriate, any relevant policies or regulatory requirements, the anticipated reporting arrangements, confidentiality requirements and any safeguarding, regulatory or external reporting considerations.

9.4 The investigation will be conducted fairly, objectively and without unreasonable delay. It will be conducted in accordance with any applicable policies and procedures, ACAS guidance on workplace investigations where relevant, JCQ or awarding body requirements where the concern relates to examinations, and any statutory or regulatory obligations which apply.

9.5 The appointed person may need to take immediate steps during an investigation to protect individuals, secure evidence, preserve examination integrity, comply with regulatory obligations or manage organisational risk. Any such steps will be considered on a case-by-case basis and recorded.

10. Stage 3 Outcome and Feedback

10.1 Following the investigation, the appointed person will consider the investigation findings and determine what further action, if any, is required. Possible outcomes may include;

- no further action
- informal resolution
- management advice
- recommendations for improvement
- referral under another policy or procedure
- external notification, notification to an awarding organisation, governance or audit review, policy changes, training or other procedural improvements.

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10.2 The individual who raised the concern will be informed of the outcome or next steps in writing where their identity is known. While we will aim to provide appropriate feedback, detailed information may not always be shared where this would breach confidentiality, data protection obligations, safeguarding requirements, examination regulations, legal obligations or the rights of others. We will not normally disclose disciplinary, personal or confidential information relating to another individual.

11. Stage 4 Appeal

11.1 Where you feel that your disclosure has not been satisfactorily resolved you will have the right to appeal. An appeal should be submitted to the Trust Governance Professional within five working days of receiving the letter in writing, clearly stating your grounds for appeal.

11.2 The appeal should clearly set out the grounds of appeal. These may include that the process was not followed properly, relevant evidence was not considered, new evidence has become available which could not reasonably have been provided earlier, the outcome does not adequately address the concern, or the individual believes the matter should have been escalated or reported externally.

11.3 If the nature of the appeal is unclear or insufficient information is provided, clarification will be sought before any Appeal Hearing takes place.

11.4 On receipt of the appeal letter arrangements for your appeal will be made in accordance with the Scheme of Delegation. The panel members will be impartial and will have had no previous involvement in the handling of the disclosure.

11.5 You will receive an acknowledgement of receipt of your appeal within ten working days of receipt. Arrangements will be made to invite you to Appeal Hearing. You will have the right to be accompanied at the Appeal Hearing by a work-based colleague or trade union representative and should be provided with at least five working days' notice of the Appeal Hearing. If, however, arrangements can be mutually agreed for the Appeal Hearing to take place within a shorter timescale the Appeal Hearing should proceed without delay.

11.6 The remit of the Appeal Hearing will be to consider the grounds for appeal and review the manner in which the original whistleblowing procedure at stage 2 and outcome at Stage 3 was managed. As such it will not be a re-hearing, but in the event that relevant new evidence comes to light which, with good reason, was not available at the time at which the outcomes of stage 3 of the process were determined, the Panel may decide to consider the new evidence. New evidence will be shared where appropriate to relevant parties and the relevant parties will be given chance to respond to the new evidence. The Panel will consider the terms of reference for the investigation, in order to determine whether further investigation is required to ensure the grounds of appeal are fully considered.

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11.7 In this event it may be necessary to allow you and the appointed person responsible for stage 2 and 3 of the process to call witnesses or to provide documentation. The names and positions of witnesses, the reasons for calling them and any documentation to be considered, must be provided to the Panel at least three working days prior to the Appeal Hearing, or as soon as possible where shorter timescales have been agreed.

11.8 The procedure to be followed at the Appeal Hearing is set out in Appendix B. In response to the appeal the Panel may uphold the appeal and determine that alternative action is to be taken, may uphold the decision/s made at the stage 3 and reject the appeal, or may determine that an alternative outcome is appropriate.

11.9 You will receive written confirmation of the outcome of the appeal within five working days of the outcome of the Appeal Hearing being determined. The decision of the Appeal Committee will be final.

12. Confidentiality and Data Protection

12.1 We recognise the importance of confidentiality in whistleblowing matters. Confidentiality will be maintained as far as reasonably practicable throughout the process. Information will only be shared with those who have a legitimate need to know, including where this is necessary to assess the concern, conduct an investigation, obtain advice, protect individuals, safeguard pupils, preserve the integrity of examinations or assessments, comply with legal or regulatory obligations, report matters to an appropriate external body, ensure procedural fairness or enable appropriate governance oversight.

12.2 The identity of the whistleblower will not normally be disclosed without their consent unless disclosure is required by law, by a relevant regulator, awarding organisation, court or statutory body, or where it is otherwise necessary and proportionate in order to address the concern fairly and effectively. Where it becomes necessary to disclose the identity of the whistleblower, we will, where reasonably practicable and appropriate, discuss this with the individual in advance.

12.3 Individuals involved in the process must maintain confidentiality. Unauthorised disclosure of confidential information may be dealt with under our Disciplinary Policy and Procedure located on SharePoint. Records will be retained securely and in accordance with our Data Protection Policy, Record Retention Schedule and applicable data protection legislation.

13. Anonymous Disclosures and Confidentiality

13.1 You are encouraged to raise concerns openly wherever possible. This will allow us to seek clarification, obtain further information and provide feedback. We recognise that individuals may

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sometimes feel unable to identify themselves, therefore we encourage anonymous reporting over remaining silent. Anonymous concerns will be considered however are much less powerful and can only be investigated where sufficient information is available.

13.2 When considering anonymous concerns, we will take into account the seriousness of the issues raised, the credibility of the concern, the level of detail provided, whether the concern can be verified from other sources, whether there is an immediate risk to pupils, staff, the Trust or the public, and whether external reporting obligations may arise.

13.3 Where an anonymous concern relates to suspected examination malpractice or maladministration, we will still consider whether the matter requires further enquiries, preservation of evidence or referral to the relevant awarding organisation. The fact that a concern has been raised anonymously will not, of itself, prevent us from taking appropriate action. We may be unable to provide feedback to an anonymous whistleblower.

14. Untrue, Malicious or Vexatious Disclosures

14.1 If an individual raises a concern which they reasonably believe to be true and which is not confirmed by investigation, no action will be taken against them solely because the concern was not substantiated

14.2 However, we will not tolerate allegations that are knowingly false, malicious, vexatious or made for personal gain. Where there is evidence that an individual has knowingly made a false or malicious allegation, the matter may be considered under our Disciplinary Policy and Procedure located within SharePoint. Before taking disciplinary action in relation to an allegedly false or malicious disclosure, we will seek appropriate HR and/or legal advice.

15. Raising Concerns Externally

15.1 If the whistleblower is not satisfied about the way the qualifying concern has been dealt with or does not believe that we will deal with this appropriately, they may raise their concerns externally.

15.2 External bodies may include a legal adviser where disclosure is made for the purpose of obtaining legal advice, a prescribed person or regulator, the Department for Education, Ofsted, the Health and Safety Executive, the Information Commissioner's Office, Ofqual, an awarding organisation where the concern relates to examinations or assessment malpractice, the Local Authority Designated Officer where safeguarding thresholds are met, or the police where criminal conduct is suspected.

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15.3 A full list of prescribed persons is available from the Government website. Individuals are encouraged to seek advice before making an external disclosure, including from their trade union, professional association or Protect.

15.4 Disclosure to the media is not encouraged and will rarely be appropriate. Individuals considering disclosure to the media are strongly advised to seek advice before doing so, as such disclosure may affect the legal protections available.

16. Protect and Other Sources of Support

16.1 Protect is an independent charity which provides confidential advice to individuals who are concerned about malpractice in the workplace. Protect can be contacted on 020 3117 2520 or via its website.

16.2 If you do not feel able to raise child protection concerns internally, the NSPCC whistleblowing advice line is available on 0800 028 0285 or by email at help@nspcc.org.uk. You may also seek advice from their trade union or professional association.

17. Role of the Chair of the Trust Board

17.1 Where a whistleblowing concern is received by, or escalated to, the Chair of the Trust Board, the Chair of the Trust Board will ensure that the concern is considered promptly, fairly and in accordance with this policy. The Chair of the Trust Board may take initial advice from appropriate sources, including governance advisers, HR advisers, legal advisers, safeguarding leads, finance or audit advisers, examination compliance specialists, external professional advisers or relevant regulatory or statutory bodies where appropriate.

17.2 Where the concern relates to the Chief Executive Officer, trustee, governance arrangements, financial propriety, safeguarding, examination compliance, regulatory compliance or any matter which may present a significant risk to the Trust, the Chair of the Trust Board will determine the appropriate next steps. This may include acknowledging receipt of the concern where the identity of the whistleblower is known, undertaking an initial assessment, identifying whether any immediate safeguarding, regulatory, financial, operational or reputational risk exists, considering whether external advice is required, identifying whether an investigation is required and deciding whether an independent or external investigator should be appointed.

17.3 The Chair of the Trust Board may also determine whether written terms of reference are required, whether any external notification is required, whether any interim protective or risk management measures are necessary and how confidentiality, impartiality and procedural fairness will be protected.

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17.4 The Chair of the Trust Board should ensure that a written record is maintained of key decisions and the rationale for the chosen approach. This record should demonstrate that the Chair of the Trust Board has considered the nature of the concern, any relevant advice, the Trust's governance responsibilities, the Academy Trust Handbook, statutory and regulatory obligations, the need for confidentiality, the risks of unnecessary disclosure and the need to preserve future decision-making.

18. Disclosure to the Trust Board

18.1 The Chair of the Trust Board may, where appropriate, notify the Trust Board that a whistleblowing concern has been received. In doing so, the Chair of the Trust Board will exercise discretion as to the level of information shared. The purpose of any disclosure to the Board is to enable trustees to discharge their governance responsibilities, not to invite premature findings or expose trustees unnecessarily to detailed evidence.

18.2 When deciding what information to share, the Chair of the Trust Board should consider the nature and seriousness of the concern, whether the matter falls within the Board's governance responsibilities, whether there are any immediate risks requiring Board oversight, whether external advice has been obtained, whether disclosure is necessary to enable trustees to discharge their duties, whether sharing detail may prejudice an investigation, whether trustees may be required to participate in a future panel or decision-making process, confidentiality obligations, data protection requirements, safeguarding or regulatory duties, and the need to protect both the whistleblower and any person who is the subject of the concern.

18.3 In most cases, information shared with the Board should be limited to confirmation that a whistleblowing concern has been received, the broad subject matter of the concern, whether the concern has been assessed as requiring further action, whether external advice has been sought, whether an independent investigator has been or will be appointed, any immediate safeguarding, regulatory, financial, operational or reputational risks requiring Board oversight, any requirement to notify an external body, regulator, awarding organisation or statutory agency, the proposed next steps and the governance arrangements for oversight of the matter.

18.4 The Chair of the Trust Board would not normally share the full disclosure, supporting evidence, witness material, personal data or the identity of the whistleblower with the full Trust Board unless there is a clear and necessary governance reason to do so. Detailed allegations, investigation material, commentary on the credibility of the concern or any view on whether allegations are substantiated should not normally be shared before the process has concluded.

18.5 Where trustees may be required to participate in a future disciplinary, grievance, appeal, dismissal, regulatory or governance decision-making process, the Chair of the Trust Board should take particular care not to share detailed allegations, investigation material or evidence which could compromise impartiality.

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18.6 Where appropriate, the Chair of the Trust Board may identify a smaller committee, panel or designated group of trustees to provide oversight, with other trustees kept separate in order to preserve independence for any subsequent stage.

18.7 Any trustee who receives information about a whistleblowing concern must treat that information as strictly confidential and must not discuss it outside the authorised governance process. Trustees/Governors must declare any actual, potential or perceived conflict of interest at the earliest opportunity. Where a conflict exists, or where a trustee's involvement may reasonably call into question the fairness of the process, the trustee may be excluded from further involvement.

19. Recording Decisions and Maintaining an Audit Trail

19.1 We will maintain a clear and proportionate audit trail of decisions taken under this policy. This is particularly important where the concern involves the Chair of the Trust Board, CEO, Headteacher, Head of School, trustees, governors, financial management, safeguarding, examination compliance, regulatory compliance or other matters that may be scrutinised by an external body.

19.2 The person responsible for managing the concern, which may be the Chair of the Trust/Governing Board, CEO, CFO, Executive Leaders Headteacher, designated senior leader or another appropriate person, should record the key decisions made at each stage of the process. The record should be factual, concise and sufficient to demonstrate that the matter has been considered properly and in accordance with this policy.

19.3 The decision record should normally capture the date the concern was received, who received it, how it was raised, the broad nature of the concern, whether it appears to fall within this policy or another procedure, any immediate risks identified, any safeguarding, examination, regulatory or financial reporting considerations, any advice sought, who has been informed, why disclosure was considered necessary, what information was shared, what information was withheld and why, whether conflicts of interest were considered, whether an investigation is required, who will investigate, the rationale for appointing an internal or external investigator, the terms of reference, the outcome or next steps, and the arrangements for retaining records securely.

19.4 The Chair of the Trust Board, CEO, Executive Leader, Headteacher, Head of School or another appropriate person should avoid recording personal opinions, assumptions or premature conclusions about the truth or otherwise of the concern before the matter has been investigated. Records should distinguish clearly between facts, allegations, decisions, advice received and rationale. Where advice is privileged or confidential, the record should note that advice was obtained without unnecessarily reproducing privileged content.

19.5 The audit trail should be retained securely in accordance with data protection and records

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retention arrangements. Access should be restricted to those with a legitimate need to know. Where the concern relates to examination malpractice or regulatory reporting, records should also be retained in accordance with any applicable JCQ, awarding body or regulatory requirements.

20. Protection For Whistleblowers

20.1 Individuals who raise genuine concerns in the public interest have the right not to be subjected to detrimental treatment because they have raised a whistleblowing concern. Detrimental treatment may include dismissal, disciplinary action, threats, victimisation, harassment, bullying, loss of work or opportunities, unfair treatment or any other disadvantage because the individual has raised a concern.

20.2 We will not tolerate victimisation or retaliation against anyone who raises a genuine concern under this policy. If you believe that you have been subjected to detrimental treatment because you have raised a whistleblowing concern, you should report this to the Trust Governance Professional. Alternatively, you may raise the matter under our Grievance Policy and Procedures located within SharePoint.

20.3 Any suspected victimisation or retaliation will be considered under our Dignity at Work, Grievance and/or Disciplinary Policies and Procedures, as appropriate. The activation of this policy will not automatically halt the operation of other procedures which may apply to the whistleblower or other individuals.

21. Examination Compliance, Malpractice and JCQ Reporting

21.1 We are committed to maintaining the integrity of examinations, assessments, non-examination assessments, controlled assessments and qualifications. Concerns relating to the conduct, administration, security or integrity of examinations and assessments may amount to suspected examination malpractice or maladministration.

21.2 For the purposes of this policy, examination malpractice includes acts, omissions or failures which may breach JCQ regulations, awarding body requirements or established examination and assessment procedures, and which may prejudice candidates, compromise public confidence in qualifications, compromise the integrity or validity of an assessment, result or certificate, or damage the authority, reputation or credibility of an awarding body or centre.

21.3 Suspected examination malpractice may include breach of examination security, unauthorised access to or disclosure of confidential examination or assessment materials, improper assistance to candidates, failure to follow procedures for coursework or non-examination assessments, failure to implement approved access arrangements, inappropriate conduct during examinations

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or assessments, plagiarism or misuse of artificial intelligence, failure to authenticate candidate work appropriately, or failure to report suspected malpractice to the relevant awarding organisation.

21.4 All staff involved in examinations and assessments have a responsibility to report concerns promptly where they reasonably believe that malpractice or maladministration has occurred, is occurring or may occur. Concerns should normally be reported to the Headteacher/Head of School in the first instance, unless the concern relates to those individuals or there is a reasonable belief that reporting through that route would be inappropriate.

21.5 Where the concern relates to the Headteacher/Head of School, or where there is a potential conflict of interest, the concern should be reported to the Chief Executive Officer, or Chair of the Trust Board.

21.6 Where suspected examination malpractice or maladministration is identified, we will take prompt steps to secure relevant evidence, protect the integrity of the examination or assessment process, consider whether immediate action is required, avoid unnecessary disclosure of confidential examination material, notify the relevant awarding organisation where required, cooperate fully with any awarding body investigation, ensure that staff, candidates and other individuals involved are treated fairly, and maintain appropriate records.

21.7 Where a concern also relates to safeguarding, criminal conduct, fraud, data protection, professional misconduct or regulatory non-compliance, we will consider whether additional referrals are required.

22. Breaches of this Policy

22.1 Any breaches of this Policy will be managed under our Disciplinary Policy and Procedure, located within SharePoint. This may include failure to maintain confidentiality, victimisation or retaliation against a whistleblower, failure to cooperate with an investigation, knowingly providing false or misleading information, deliberate concealment of relevant information, failure to report suspected examination malpractice where required, or failure to comply with external regulatory or awarding body requirements.

22.2 Where a breach relates to examination compliance, we will consider whether the matter also needs to be reported to the relevant awarding organisation or regulator.

St Bartholomew's CE Multi Academy Trust is a private company limited by guarantee, with charitable status, registered in England and Wales company number: 10312858 and whose registered office address is at St Bartholomew's Church of England Primary School, Sedgley Road, Penn, Wolverhampton WV4 5LG.

Appendix A

Flow Chart of the Whistleblowing Process

CONCERN IDENTIFIED
Wrongdoing, malpractice, serious misconduct or risk is suspected. Safeguarding and examination concerns must also follow the relevant statutory, JCQ or awarding body route.

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PERSONAL EMPLOYMENT CONCERN?	SAFEGUARDING / EXAMINATION ISSUE?	POTENTIAL WHISTLEBLOWING CONCERN
Use the Grievance, Dignity at Work or other relevant procedure, unless a wider public-interest issue is also raised.	Act without delay. Follow safeguarding, JCQ and awarding body requirements alongside this policy, including any required external referral.	Proceed where the disclosure is reasonably believed to be in the public interest and tends to show a matter covered by the policy.

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STAGE 1 - RAISE AND ACKNOWLEDGE THE CONCERN
Raise orally or in writing, informally or formally, with as much detail as possible. If the identity is known, acknowledge in writing within five working days (unless there is a reasonable reason this is not possible), identify the initial assessor, request further information if needed, invite the individual to a meeting and confirm the right to be accompanied.

REPORT TO THE APPROPRIATE PERSON

NORMAL ROUTE	IFTHE CONCERN RELATES TO A HEADTEACHER / HEAD OF SCHOOL	IF THE CONCERN RELATES TO THE CEO OR A TRUSTEE	IF THE CONCERN RELATES TO AN EXECUTIVE LEADER	IF THE CONCERN RELATES TO THE CHAIR OR VICE CHAIR OF THE TRUST BOARD
your line manager or senior leader.	Report to the Chair of the Local Governing Board	Report to the Chair of the Trust Board.	Report to the CEO	Report to the Governance Professional, or obtain external governance, HR and/or legal advice to identify an appropriate route.

▼

STAGE 2A - INITIAL ASSESSMENT	STAGE 2B - INVESTIGATION REQUIRED?
Record the concern in the confidential register. Decide whether it falls under this policy or another procedure. Identify conflicts, immediate safeguarding, regulatory, examination, financial or operational risks, external reporting duties, and whether protective action or evidence preservation is required.	If yes, appoint an impartial investigator, considering independence, conflicts and specialist expertise. Issue written terms of reference. Investigate fairly, objectively and without unreasonable delay. If no investigation is required, record the reasons and determine the appropriate next step.

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STAGE 3 - OUTCOME AND FEEDBACK	STAGE 4 - APPEAL
The appointed person considers the findings and decides the action required. Possible outcomes include no further action, informal resolution, management advice, improvement recommendations, referral under another procedure, external notification, governance or audit review, policy change or training. Provide proportionate written feedback where the whistleblower is known, subject to confidentiality and legal restrictions.	If dissatisfied, submit a written appeal within the policy timescale, stating the grounds. A previously uninvolved, impartial panel reviews the grounds and how the process was managed. It is not normally a re-hearing, although relevant new evidence may be considered. The final decision is confirmed in writing.

Appendix B

Procedure to be followed at the Appeal Hearing

1. Introductions and housekeeping

2. Chair of the Appeal Committee to explain the purpose of the Hearing, the format for the Hearing and the potential outcomes.

3. Any person present may request an adjournment.

4. The employee and their representative will be invited to present the employee's grounds for appeal.

5. The appointed person and any HR professional accompanying them may ask questions of the employee.

6. The Committee and their Adviser may ask questions of the employee.

7. The appointed person will respond to the employee's appeal.

8. The employee and their representative may ask questions of the appointed person.

9. The Committee and their Adviser may ask questions of the Chair of the Formal Hearing Committee

10. The appointed person will be invited to make a concluding statement.

11. The employee and their representative will be invited to make a concluding statement.

12. The Appeal Hearing will adjourn, and all parties will withdraw with the exception of the Committee, and their Adviser.

13. Where it is possible for a decision to be made within a reasonable timescale, the Appeal Hearing will be reconvened, and the decision communicated to the employee. The decision will be confirmed in writing within five working days of the appeal hearing taking place. Where a longer period of time is required to make a decision, the Appeal Hearing will close, and the outcome will be communicated to the employee within five working days.

14. The decision of the Appeal Committee is final and there will be no further right to appeal.

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