WHISTLEBLOWING

POLICY

JULY 2026

THE GOOD SHEPHERD TRUST

WHISTLEBLOWING POLICY

This policy is prescribed by The Good Shepherd Trust. References to "the Trust" include all Trust schools, the central team and subsidiary organisations.

Date adopted	01/07/2022
Last reviewed	21/07/2026
Review cycle	Annual, or sooner following legislative, regulatory or organisational change
Is this policy statutory?	Yes
Approval	Trust Board
Author	Head of HR, Whistleblowing Link Director
Policy owner	Head of HR
Whistleblowing Link Director	Stewart Lancaster, Trustee Director
Staff whistleblowing contact(s)	David Bird, Head of HR
Next review date	July 2027

REVISION RECORD

Revision	Date	Revised by	Approved date	Comments
1	23/06/2026	D Bird	DD/MM/YYYY	Complete policy rewrite; statutory compliance retained and governance, safeguarding, reporting, investigation, protection, learning and usability strengthened.
2	DD/MM/YYYY	Head of HR / Whistleblowing Link Director	DD/MM/YYYY	Trustee review and external benchmarking amendments.

CONTENTS

1. PURPOSE AND PRINCIPLES

The Good Shepherd Trust is committed to a culture in which people can speak up early, safely and responsibly. Speaking up is a positive contribution to safeguarding, governance, financial stewardship, legal compliance and continuous improvement.

This policy reflects GST's vision of Flourishing Together and its values of kindness, integrity and resilience. The Trust recognises that failures, mistakes or wrongdoing can occur in any organisation. The earlier concerns are raised, the more effectively the Trust can protect children, staff, public funds and the integrity of its governance.

The Trust will listen carefully, respond fairly, protect those who raise concerns from detriment, and learn from matters raised. No confidentiality clause, settlement agreement or non-disclosure agreement can prevent a worker from making a protected disclosure.

Individuals raising concerns will be treated with respect, listened to carefully and supported throughout the process. The Trust will approach concerns constructively and will not treat a concern as unfounded merely because it is not ultimately substantiated.

2. LEGAL AND GOVERNANCE FRAMEWORK

This policy has been prepared with reference to the Public Interest Disclosure Act 1998, the Employment Rights Act 1996, relevant amendments to whistleblowing protection relating to sexual harassment disclosures, the Academy Trust Handbook 2025, Keeping Children Safe in Education 2025, DfE whistleblowing guidance, and the current GOV.UK list of prescribed persons. This policy complies with the Trust's funding agreement and articles of association. The Trust Board owns and approves this policy. The Board must publish the procedure on the Trust website, appoint at least one trustee and one member of staff whom staff may contact to report concerns, ensure staff are aware of the process, and ensure that concerns are handled properly and fairly.

This policy does not form part of any employee's contract of employment and may be amended by the Trust from time to time, subject to the approval arrangements set out in this policy.

3. SCOPE

This policy may be used by anyone connected with the Trust, including:

- employees and headteachers
- central team staff
- agency workers, casual workers, contractors and consultants
- volunteers
- Local Committee members
- Trustee Directors and Members
- workers in subsidiary organisations and those providing services to the Trust

Statutory whistleblowing protection applies mainly to workers. Volunteers, non-executive directors and some governance volunteers may not have identical statutory protection, but the Trust will receive and consider genuine concerns from all individuals listed above and will not tolerate retaliation against anyone who raises a concern under this policy.

4. WHAT IS WHISTLEBLOWING?

Whistleblowing is the reporting of information which the person reasonably believes is in the public interest and tends to show that wrongdoing has occurred, is occurring or is likely to occur. The individual does not need to prove the wrongdoing before raising it.

The examples below are not exhaustive. Individuals should raise any concern where they reasonably believe that wrongdoing has occurred, is occurring or is likely to occur and that disclosure is in the public interest.

Examples include actual or suspected:

- criminal offences, fraud, bribery, corruption or financial irregularity
- misuse of public funds or serious failure of financial control
- safeguarding failures, child protection concerns or unsafe practice
- safer recruitment failures or breaches of statutory safeguarding obligations
- danger to health and safety
- environmental damage
- modern slavery or human trafficking
- examination, assessment or data malpractice
- falsification, destruction or concealment of records
- sexual harassment, particularly where there may be wider public-interest, safeguarding, cultural or organisational implications
- abuse of authority, victimisation, discrimination or serious misuse of power
- serious misconduct by senior leaders, governance volunteers, trustees or members
- conflicts of interest, related-party concerns or governance failures
- deliberate concealment of any of the above.

A concern does not need to affect large numbers of people to be in the public interest. Concerns relating to safeguarding, financial propriety, statutory compliance, serious misconduct or systemic cultural issues may constitute whistleblowing even where a small number of people are directly affected.

5. WHAT IS NOT NORMALLY WHISTLEBLOWING?

This policy is not normally intended for personal employment disputes or dissatisfaction with management decisions where there is no wider public-interest concern. These matters should usually be raised under the Grievance Policy, Dignity at Work Policy, Complaints Policy or other relevant procedure. Examples include:

- pay disputes
- personal contractual matters
- working relationships
- bullying affecting only the individual complainant and not indicating wider failings
- dissatisfaction with a management decision that does not involve wider wrongdoing

Some concerns may involve both personal circumstances and wider public-interest issues. In those cases, the Trust will decide the most appropriate route and may operate more than one procedure concurrently.

6. SAFEGUARDING AND CHILD PROTECTION CONCERNS

Nothing in this policy must delay safeguarding action. Where there is reason to believe that a child is suffering, is likely to suffer harm, or is in immediate danger, the Trust's Safeguarding and Child Protection Policy must be followed immediately. This may include reporting to the Designated Safeguarding Lead, Trust DSL, Local Authority Designated Officer, local authority children's services and/or police.

Whistleblowing principles still apply where the concern is about poor or unsafe safeguarding practice, a failure to follow safeguarding procedures, a failure to act on concerns, or a wider safeguarding culture issue. Safeguarding investigations and whistleblowing investigations may run in parallel where appropriate.

Where an individual does not feel able to raise a child protection concern internally, they may contact the NSPCC whistleblowing advice line or the appropriate local authority/police route. Emergency safeguarding concerns must be reported without delay.

7. WHO TO RAISE A CONCERN WITH

Concerns should be raised with the most appropriate person, taking account of seriousness, urgency and any conflict of interest. A concern may be raised verbally or in writing. The following routes are available.

Situation	Normal route	Alternative / escalation route
School-based staff concern	Line manager or Headteacher	Head of HR, Head of Governance, CEO, Whistleblowing Link Director, Chair of Trustees
Concern about a Headteacher	CEO or Head of HR	Whistleblowing Link Director or Chair of Trustees
Central team concern	Line manager, Head of HR or relevant executive leader	CEO, Whistleblowing Link Director or Chair of Trustees

Concern about the CEO	Chair of Trustees	Whistleblowing Link Director or Vice-Chair, subject to conflict
Concern about the Chair of Trustees	Vice-Chair or Whistleblowing Link Director	Members / Diocesan Corporate Member, subject to governance advice
Concern about a Trustee Director, Member or governance volunteer	Chair of Trustees or Head of Governance	Whistleblowing Link Director or Members, subject to conflict
Urgent safeguarding concern	DSL / Trust DSL / LADO / local authority children's services / police	NSPCC whistleblowing advice line for child protection concerns where internal reporting is not appropriate

Where the concern relates to one of the individuals in the route, the concern should be reported to the next appropriate person. No person implicated in a concern should decide the triage, investigation or outcome of that concern.

Any person receiving a whistleblowing concern must refer it promptly through the appropriate Trust reporting route and must not investigate it unless formally appointed to do so. This includes line managers, Headteachers, central team leaders, Local Committee members, Trustee Directors and governance volunteers.

8. HOW TO RAISE A CONCERN

Concerns should be raised as soon as reasonably possible after the individual becomes aware of the issue. Written concerns are helpful but not required. The individual should provide, where available:

- a clear description of the concern
- relevant dates, times and locations
- names or roles of individuals involved
- any documents or evidence available
- any personal interest the person raising the concern may have in the matter
- whether the issue has already been raised and with whom
- whether there is any immediate safeguarding, health and safety, financial or reputational risk

The person raising the concern does not need to investigate the matter or obtain proof before reporting it. They should not attempt to gather evidence in a way that breaches safeguarding, confidentiality, data protection, IT security or other Trust policies.

9. CONFIDENTIALITY AND ANONYMITY

The Trust will take reasonable steps to protect the identity of an individual who raises a concern and asks for confidentiality. Confidentiality cannot be guaranteed where disclosure is necessary for safeguarding, legal, regulatory, criminal, disciplinary or investigation reasons.

Anonymous concerns will be considered and investigated where sufficient information is provided. However, anonymity may limit the Trust's ability to investigate, protect the individual from detriment, or provide feedback. When considering anonymous concerns, the Trust will consider the seriousness of the issue, the credibility of the information and the likelihood of corroboration from other sources.

10. INITIAL ASSESSMENT AND URGENT ACTION

The Trust will normally acknowledge receipt of a concern within five working days, unless the concern is anonymous or acknowledgement would create risk.

An initial assessment will be carried out by an appropriate person who is not implicated in the concern. The assessment will determine:

- whether the concern falls within this policy or another procedure
- whether immediate safeguarding, health and safety, financial, legal, regulatory or criminal action is required
- whether any person needs immediate protection or support
- whether records, evidence, systems or public funds need to be secured
- who should investigate and whether external investigation is required
- what feedback can be provided to the person raising the concern

The Trust will aim to complete initial assessment promptly and, where possible, within ten working days of acknowledgement. More urgent matters will be escalated immediately.

11. INVESTIGATION

Where an investigation is required, the Trust may appoint an internal investigator, a panel of investigators or an appropriately qualified external investigator. Senior, complex, conflicted, safeguarding-sensitive, financial or governance-sensitive concerns should be considered for external or independent investigation.

Investigations will be fair, proportionate, objective and documented. Terms of reference should normally be agreed, setting out the concern, scope, investigator, timetable, reporting route and confidentiality arrangements.

Individuals invited to meetings under this policy may be accompanied by a workplace colleague or trade union representative. A governance volunteer may be accompanied by an appropriate person agreed by the Trust, subject to confidentiality and conflict considerations.

The Trust will seek to keep the person raising the concern informed of progress where appropriate, while respecting confidentiality, safeguarding, employment and legal obligations. Where possible, the Trust will explain how the matter is being handled and provide an indicative timeframe for the next update. For longer-running investigations, progress updates will normally be provided at reasonable intervals, unless doing so would prejudice safeguarding, legal, regulatory, employment or investigation obligations.

12. OUTCOME AND FEEDBACK

At the conclusion of an investigation, the Trust will determine whether the concern is substantiated, partly substantiated, unsubstantiated or incapable of determination, and what further action is required. Possible actions include:

- safeguarding referral or action
- disciplinary, capability, conduct or management action
- financial control remediation or audit review
- policy, training or process change
- external referral to a regulator, prescribed person, local authority or police
- no further action, with reasons recorded

Where appropriate, an outcome statement will be provided to the person who raised the concern. Detailed findings, personal data or disciplinary outcomes may not be shared where confidentiality or legal obligations prevent this.

13. PROTECTION AND SUPPORT

The Trust will not tolerate victimisation, retaliation, intimidation, discrimination, exclusion from opportunities, bullying, harassment or any other detriment because a person has raised a concern they reasonably believed to be true and in the public interest. Any person who victimises or retaliates against someone for raising a concern may be subject to disciplinary or governance action. The Trust will consider and, where appropriate, provide support to the individual who made the disclosure. Support may include HR support, welfare meetings, Occupational Health, Vivup Employee Assistance Programme support, line management support, reasonable temporary workplace adjustments and signposting to independent advice.

The Trust may also provide appropriate welfare and wellbeing support to individuals who are the subject of concerns while investigations are undertaken. Being the subject of a concern does not, of itself, mean wrongdoing has occurred.

14. FALSE, MALICIOUS OR DELIBERATELY MISLEADING ALLEGATIONS

The Trust encourages individuals to raise concerns where they reasonably believe wrongdoing may have occurred, is occurring or is likely to occur. No action will be taken against a person simply because their concern is not substantiated.

Knowingly false, malicious or deliberately misleading allegations may result in disciplinary or governance action. This provision must not be used to deter genuine concerns or to penalise someone whose concern was not ultimately proven.

15. EXTERNAL DISCLOSURES AND INDEPENDENT ADVICE

The Trust encourages internal reporting where this is appropriate, because it allows the Trust to act quickly. However, individuals do not need the Trust's permission to make a protected disclosure to an appropriate prescribed person or to seek independent advice.

Relevant external routes may include, depending on the subject matter:

- Department for Education / Secretary of State for Education
- Ofsted
- Local authority children's services or LADO
- Police
- Health and Safety Executive
- Information Commissioner's Office
- Teaching Regulation Agency
- External auditor, internal auditor or other assurance provider where the Trust determines that referral is appropriate for financial-control, fraud or governance concerns. Individuals seeking statutory protection for an external disclosure should ensure that the recipient is an appropriate prescribed person.Charity Commission where the concern falls within its remit
- Other prescribed persons identified by GOV.UK

Protect is the UK's independent whistleblowing charity and provides confidential advice. It is an advice route, not a Trust approval step. Individuals may also seek advice from a trade union, legal adviser, Acas or Citizens Advice.

Protect (Independent Whistleblowing Charity)

Telephone: 020 3117 2520

Email: whistle@protect-advice.org.uk

Website: https://protect-advice.org.uk

Individuals considering disclosure to the media or to any non-prescribed external route should seek independent advice first, as legal protection is more limited and will depend on the circumstances.

16. DATA PROTECTION AND RECORD KEEPING

The Trust will maintain confidential records of concerns raised, triage decisions, investigators appointed, actions taken, referrals made, investigation steps, decisions reached, outcomes communicated, support provided and lessons learned. Records will be handled in accordance with data protection legislation, safeguarding requirements and the Trust's retention schedule.

Access to whistleblowing records will be restricted to those with a legitimate need to know. Governance reports will normally be anonymised and thematic, unless the Board needs identifiable information to discharge its duties lawfully and safely.

17. GOVERNANCE OVERSIGHT AND ORGANISATIONAL LEARNING

The Board will appoint a Whistleblowing Link Director. The role is to oversee the integrity and effectiveness of the whistleblowing framework, provide an alternative reporting route, ensure appropriate escalation where necessary, and support the Board in promoting an open, accountable and safe speak-up culture. The Whistleblowing Link Director will not normally act as operational investigator.

The Head of HR, supported by the Head of Governance, will maintain oversight of whistleblowing activity and the confidential case log. An annual confidential whistleblowing assurance report will be presented to the Trust Board through the Risk & Audit Committee. The report should include, where appropriate and anonymised:

- number of concerns raised, including nil returns
- reporting routes used
- categories and themes
- timeliness of acknowledgement, triage and closure
- outcomes and referrals
- retaliation or detriment allegations
- safeguarding, financial control, governance or culture themes
- lessons learned and actions taken
- open actions and overdue items

Staffing, welfare or cultural themes may also be reported to PARC. Safeguarding-system themes may be reported through existing safeguarding governance arrangements. Significant or urgent matters should be escalated to the Chair of Trustees and/or Board outside the annual cycle where necessary.

18. AWARENESS AND TRAINING

The Trust will ensure that all staff are aware of this policy, know who they can contact, understand the areas of wrongdoing covered, and understand the protection available when they raise concerns. Whistleblowing will be included in staff induction and regular safeguarding training. Managers, Headteachers and central team leaders who may receive concerns should receive appropriate guidance on how to respond, record and escalate concerns.

Governance volunteers should be made aware of this policy as part of induction and annual governance training, particularly where they may receive safeguarding, conduct, financial or governance concerns from staff, parents or the community.

19. MONITORING AND REVIEW

This policy will be reviewed annually by the Head of HR in consultation with the Whistleblowing Link Director, Head of Governance, Trust DSL and other relevant leaders. It will be reviewed sooner if required by changes in law, statutory guidance, Trust governance arrangements, safeguarding requirements, regulatory expectations, or learning from a significant case. Material changes will need to be approved by the Trust board.

20. RELATED POLICIES AND PROCEDURES

- Safeguarding and Child Protection Policy
- Allegations of Abuse Against Adults Policy
- Staff Code of Conduct
- Governance Code of Conduct
- Grievance Policy
- Dignity at Work Policy
- Complaints Policy
- Disciplinary Policy
- Data Protection Policy and Privacy Notices
- Anti-Fraud, Bribery and Corruption Policy / Finance Policy
- Health and Safety Policy
- Safer Recruitment Policy
- Records Retention Schedule

APPENDIX A - ONE-PAGE REPORTING ROUTE

Concern type	Immediate action	Whistleblowing route
Immediate child safety risk	Contact DSL / Trust DSL / LADO / local authority children's services / police immediately.	Do not wait for whistleblowing triage. Raise wider failure concerns under this policy once urgent action is taken.
Fraud, financial irregularity or misuse of public funds	Preserve records and do not alert implicated individuals.	Head of HR / CFOO / CEO / Whistleblowing Link Director / Chair depending on conflict.
Concern about Headteacher	Do not raise with the Headteacher if implicated.	CEO / Head of HR / Whistleblowing Link Director / Chair.
Concern about CEO or senior executive	Avoid implicated route.	Chair / Whistleblowing Link Director / Vice-Chair.
Concern about Chair or Trustee Director	Avoid implicated route.	Vice-Chair / Whistleblowing Link Director / Members / Head of Governance.
Personal employment issue only	Use appropriate HR route.	Normally Grievance or Dignity at Work, unless there is wider public-interest wrongdoing.

APPENDIX B - ANNUAL ASSURANCE REPORT TEMPLATE

Area	Information to report
Volume	Total concerns received; nil return if none; split by school/central team only where anonymity is preserved.
Category	Safeguarding, financial, health and safety, governance, HR/culture, data protection, other.
Route	Line manager, Headteacher, Head of HR, CEO, trustee, external, anonymous.
Timeliness	Acknowledgement within five working days; triage within target; average days to closure; overdue cases.
Outcome	Substantiated, partly substantiated, unsubstantiated, unable to determine, referred externally, no further action.
Protection	Support offered; detriment/retaliation allegations; action taken.
Learning	Policy, training, control, safeguarding, governance or culture actions arising.
Open actions	Outstanding management actions, owners and due dates.

APPENDIX C - INITIAL TRIAGE RECORD

Triage question	Record
Date received and recipient	
Person raising concern and confidentiality request	
Summary of concern	
Immediate safeguarding, health and safety, financial or legal risk	
Conflicts of interest identified	
Procedure to be followed	☐ Whistleblowing ☐ safeguarding ☐ grievance ☐ complaints ☐ disciplinary ☐ other ……
Investigator or decision-maker appointed	
External referral or advice required	
Support offered to whistleblower and subject of concern	
Next action and owner	