

Introduction

1.1 The College is committed to operating in an ethical and principled manner. The aim of this policy and procedure is to provide staff and employees (referred to as ‘members of staff’ in this policy) with a means for raising genuine concerns of suspected bribery, financial impropriety, breaches of the law, fundraising malpractice, including fraud and other serious wrongdoings.

1.2 The College encourages members of staff to raise genuine concerns about suspected wrongdoing at the earliest practicable stage. This policy and procedure is intended to provide safeguards to enable members of staff to raise concerns about malpractice in connection with the College.

1.3 Members of staff are encouraged to raise genuine concerns through internal College procedures without fear of adverse repercussions being taken against them. The law allows members of staff to raise such concerns externally and this policy informs how they can do so. However, a failure to raise a concern under this procedure may result in a disclosure losing its protected status under the law.

1.4 This policy and procedure seeks to balance the need to allow a culture of openness against the need to protect other members of staff from vexatious allegations or allegations which are not well-founded.

1.5 The principles of openness and accountability which underpin legislation protecting whistleblowers are reflected in this policy and procedure. The College is also committed to ensuring compliance with the Bribery Act 2010.

1.6 Learners and customers of the college should raise any concerns under the RHACC Complaints Policy and procedure.

Scope

2.1 This policy applies to all:

- Members of staff of the College
- Governors
- Apprentices
- Volunteers
- Casual workers
- Workers of subcontractors
- Agency workers

2.2 Members of staff might be unsure whether it is appropriate to raise their concern under this policy and procedure or whether it is a personal grievance, which is more appropriate to raise under the College’s Grievance Procedure. Any member of staff in this situation is encouraged to approach the Head of HR in confidence for advice. Personal grievances will not be investigated under whistleblowing if it is established that the issue relates to a grievance.

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2.3 Definitions

2.3.1 *Whistleblower* – any person who, in good faith, reports concerns about wrongdoing, misconduct or unethical behaviour.

2.3.2 *Public Interest* – the welfare and wellbeing of the general public and society at large.

3. Protected disclosures

3.1 The law protects members of staff who, out of a sense of public duty, want to reveal suspected wrongdoing or malpractice.

3.2 The law allows members of staff to raise what it defines as a ‘protected disclosure’. In order to be a protected disclosure, a disclosure must relate to a specific subject matter (See Section 4 below) and the disclosure must also be made in an appropriate way (See Section 5). A ‘protected disclosure’ must, in the reasonable belief of the person making it, also be made in the public interest. A protected disclosure must consist of information supported by evidence and not merely be allegations of suspected malpractice.

4. Specific Subject Matter

4.1 If, in the course of employment, a member of staff becomes aware of information which they reasonably believe tends to show one or more of the following, they must use this policy and procedure:

- That a criminal offence has been committed, is being committed or is likely to be committed;
- That financial impropriety, bribery and/or fraud is being, is likely to or has taken place;
- That an individual has failed, is failing or is likely to fail to comply with any legal obligation which they are subject;
- That a miscarriage of justice has occurred, is occurring, or is likely to occur.
- That the health or safety of any individual has been, is being, or is likely to be, endangered:
- That concerns about poor or unsafe practice and potential failures in the college’s safeguarding and Prevent regime are not being addressed:
- That the environment, has been, is being, or is likely to be damaged:
- That information tending to show any of the above, is being, or is likely to be, deliberately concealed.

This list is not intended to be exhaustive.

5. Procedure for making a disclosure

5.1 Information which a member of staff reasonably believes tends to show one or more of the situations given in Section 4 should promptly be disclosed to a member of the Executive Team preferably in writing, and copied to the Clerk to the Board so that any appropriate action can be taken. (For confidentiality purposes, if the member of staff requests to raise their concern

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verbally, this will be allowed and will then be confirmed in writing by the member of the executive team the verbal concern was raised with.

5.2 In the event that the disclosure relates to the Clerk of the Board, a member of staff can raise the issue with the Chair of the Governing Body. Disclosure may also be made directly to the Principal if, in the opinion of the person making such a disclosure, they have not had a satisfactory response.

The Chair of the Governing Body and the Chair of the Audit Committee will be informed of any Whistleblowing disclosures by the Principal or, if the disclosure relates to the Principal, by the Clerk to the Board.

5.3 Members of staff are encouraged to identify themselves when making a disclosure. The identity of any person making a disclosure shall, if desired, be kept confidential for as long as this is feasible, provided that this is compatible with a proper investigation. If an anonymous disclosure is made, the College will not be in a position to notify the individual making the disclosure of the outcome of action taken by the College. Anonymity also means that the College will have difficulty in investigating such a concern.

The College reserves the right to determine whether to apply this procedure in respect of an anonymised disclosure in light of the following considerations:

- The seriousness of the issues raised in the disclosure;
- The credibility of the concern; and
- How likely it is that the concern can be confirmed from attributable sources.

5.4 For further guidance in relation to this policy and procedure, or concerning the use of the disclosure procedure generally, members of staff should speak in confidence to the: Head of HR.

6. Procedure for investigation of a disclosure

6.1 When a member of staff makes a disclosure, it's receipt will be acknowledged, in writing, by the member of the Executive Team receiving the disclosure within 5 working days.

6.2 It will be determined if the disclosure has sufficient substance or merit. This determination will be made by the relevant member of the Executive Team to whom the disclosure has been made in consultation with the Chair of the Audit Committee, who may, if appropriate, consult with the Chair of the Board and/or the Clerk to the Board. If it is considered that the disclosure does not have sufficient substance or merit to warrant further action, the member of staff will be notified in writing of the reasons for the decision and advised that no further action will be taken under this policy and procedure. Considerations to be taken into account when making this determination may include the following:

- If they are satisfied that a member of staff does not have a reasonable belief that suspected malpractice is occurring; or
- If the matter is already the subject of legal proceedings or appropriate action by an external body; or

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- If the matter is already subject to another, appropriate College procedure.

6.3 When a member of staff makes a disclosure which has sufficient substance or merit warranting further action, the relevant member of the Executive Team will take action they deem appropriate (including action under any other applicable College policy or procedure). Possible actions could include internal investigation; referral to the College's auditors; or referral to relevant external bodies such as the police, OFSTED, funding bodies, Health and Safety Executive or the Information Commissioner's Office.

6.4 If appropriate, an investigation will be conducted by a manager appointed by the person to whom the disclosure has been made and who has no direct association with the individual to whom the disclosure relates, or by an external investigator appointed by the College as appropriate. Each stage of the process should be recorded, in writing, by the investigating manager

6.4.1 Any additional issues raised by the whistleblower during the process of the investigation will need to be treated as a separate submission.

6.5 Any recommendations for further action made by the investigating manager will be addressed to the Principal and/or Chair of the Audit Committee as appropriate in the circumstances. The recipient will take all steps within their power to ensure the recommendations are implemented unless there are good reasons for not doing so.

6.6 A report to the Chair of the Audit Committee, with recommendations, will be produced within 20 working days by the investigating manager. If the matter being investigated is of such complexity that an extension of the period is required, the discloser will be advised that there will be an extension of the investigation period by a further 20 working days.

6.6.1 Extremely complex or wide-ranging whistleblowing claims may be subject to extended review timeframes in order to facilitate an appropriately thorough investigation. Whistleblowers will be notified of the expected timeframe for completion within the initial 20 working days and will be kept updated if this timeframe is subject to change.

6.7 The member of staff making the disclosure will be notified of the outcome of any action taken by the member of the Executive Team to whom the disclosure was originally made under this policy and procedure within a reasonable period of time. If the member of staff is not satisfied that their concern has been appropriately addressed, they can appeal against the outcome by raising the issue with the Principal within 5 working days of receiving the outcome. The Principal will make a final decision on action to be taken and notify the member of staff making the disclosure. This will be in writing and sent to the member of staff's home address. If investigations into the concern are prolonged, the investigating manager will keep the member of staff concerned updated as to the progress of the investigation and an estimated timeframe for its conclusion will be provided.

The Chair of the Board, Chair of the Audit Committee and the Clerk will be updated on progress by the investigating manager throughout the course of any whistleblowing investigation.

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7. Safeguards for members of staff making a disclosure

7.1 A member of staff making a disclosure under this procedure can expect their matter to be treated confidentially by the College and, where appropriate, so far as is possible their name will not be disclosed to anyone implicated in the suspected wrongdoing.

7.2 The College will take all reasonable steps to ensure that any report of recommendations, or other relevant documentation, produced by the College does not identify the member of staff making the disclosure without their written consent, or unless the College is legally obliged to do so, or for the purposes of seeking legal advice.

7.3 No formal disciplinary action will be taken against a member of staff on the grounds of making a disclosure made under this policy or procedure. This does not prevent the College from bringing disciplinary action against a member of staff where the College has grounds to believe that a disclosure was made maliciously or vexatiously, or where a disclosure is made outside the College without reasonable grounds.

7.4 A member of staff will not suffer dismissal or any detrimental action or omission of any type (including informal pressure or any form of victimisation) by the College for making a disclosure in accordance with this policy and procedure. Equally, where there is evidence that a member of staff is threatened, bullied, pressurised or victimised by a colleague for making a disclosure, disciplinary action will be taken by the College against the colleague in question.

8. Disclosure to external bodies

8.1 This policy and procedure has been implemented to allow members of staff to raise disclosures internally within the College. A member of staff has the right to make a disclosure outside of the College where there are reasonable grounds to do so and in accordance with the law, however, it is expected that usually the internal procedure would have been exhausted before doing so.

8.2 Members of staff may make a disclosure to an appropriate external body prescribed by the law. This list of 'prescribed' organisations and bodies can be found in information on the GOV.UK website. General advice about whistleblowing can be found here:

<https://www.gov.uk/whistleblowing>

8.3 The NSPCC whistleblowing helpline is available for staff who do not feel able to raise concerns regarding child protection failures internally. Staff can call 0800 028 0285 – line is available from 8:00 AM to 8:00 PM, Monday to Friday and email: help@nspcc.org.uk

8.4 Members of staff can also make disclosures on a confidential basis to the College's internal auditors or a practising solicitor or barrister.

8.5 If a member of staff seeks advice outside of the College, they must be careful not to breach any confidentiality obligations or damage the College's reputation in so doing.

9. Accountability

9.1 The Clerk to the Board will report all concerns raised under this policy and procedure (including cases where the College deems that there is no case to answer and therefore that no action should be taken) to the Audit Committee at the first available meeting.

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9.2 The Clerk to the Board will keep a record of all concerns raised under this policy and procedure (including cases where the College deems that there is no case to answer and therefore that no action should be taken) and will report to the College’s Board of Governors on an annual basis as appropriate.

10. Further assistance for Members of Staff

10.1 The College will not tolerate any harassment or victimisation of members of staff who make disclosures. If, at any stage of this procedure a member of staff feels that they are being subject to informal pressures, bullying or harassment due to making a disclosure, they should raise this matter, in writing, to the Principal or the Head of HR. If that is not appropriate, then in writing via the Clerk, to the Chair of Governors.

10.2 A member of staff making a disclosure may want to confidentially request counselling or other support from the College’s occupational health service. A request for a referral to the Occupational Health Service should be addressed to the Head of HR. Such a request would be made in confidence. Counselling can be accessed from an independent counselling service on a confidential basis to discuss any work or non-work related matters. The contact number of 0117 934 2121 (the service is free to all members of staff)

10. Members of staff can also contact the charity Protect, Speak Up, Stop Harm for confidential advice on whistleblowing issues. Contact details are as follows: The Green House 244-254 Cambridge Heath Road, London E2 9DA. Whistleblowing Advice Line: 020 3117 2520

[Protect - Speak up stop harm - Protect - Speak up stop harm \(protect-advice.org.uk\)](https://protect-advice.org.uk)

11. Communication and Training

11.1. This policy will be available on the college website.

11.2 The College will provide appropriate awareness training to workers during their induction and encourage the promotion of a culture of openness and integrity.

12. Related references, policies, procedures, forms and other appendices

12.1 Complaints Policy and Procedures

12.2. Employee grievance Policy and Procedures

12.3 Disciplinary Procedure.

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