



Whistleblowing Policy & Procedure

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The British Association of Barbershop Singers is committed to the highest standards of openness, probity and accountability. An important aspect of accountability and transparency is a mechanism to enable volunteers and other members of the organisation to voice concerns in a responsible and effective manner. It is a fundamental term that a volunteer will faithfully serve the organisation and not disclose confidential information about the organisation's affairs. Nevertheless, where an individual discovers information which they believe shows serious malpractice or wrongdoing within the organisation then this information should be disclosed internally without fear of reprisal, and there should be arrangements to enable this to be done independently of line management (although in relatively minor instances the line manager would be the appropriate person to be told).

The Public Interest Disclosure Act, which came into effect in 1999, gives legal protection to individuals against being dismissed or penalised by their organisation as a result of publicly disclosing certain serious concerns. This policy applies to all permanent and short-term, external contractors and agency Employees of the organisation.

It should be emphasised that this policy is intended to assist individuals who believe they have discovered malpractice or impropriety. It is not designed to question financial or business decisions taken by the organisation nor should it be used to reconsider any matters which have already been addressed under other procedures. Once the whistleblowing procedures are in place, it is reasonable to expect individuals to use them rather than air their complaints outside the organisation.

There are procedures in place to enable individuals to put forward a grievance relating to their own role or where they believe they have been subject to detrimental behaviour within the organisation. The organisation's other policies and procedures should be referred to in these circumstances. This Whistleblowing policy is intended to cover issues of probity and honesty that fall outside the scope of the grievance procedures.

Scope of Policy

This policy is designed to enable individuals to raise concerns internally and at a high level and to disclose information which the individual believes shows malpractice or impropriety. This policy is intended to cover concerns which are in the public interest and may at least initially be investigated separately but might then lead to the invocation of other procedures

e.g. disciplinary. These concerns could include;

- Financial malpractice or impropriety or fraud

- Failure to comply with a legal obligation or Statutes
- Dangers to Health & Safety or the environment
- Criminal activity
- Improper conduct or unethical behaviour
- Attempts to conceal any of these

Safeguards

I. Protection

This policy is designed to offer protection to those individuals who disclose such concerns provided the disclosure is made:

- a. in good faith
- b. in the reasonable belief of the individual making the disclosure that it tends to show malpractice or impropriety and if they make the disclosure to an appropriate person. It is important to note that no protection from internal disciplinary procedures is offered to those who choose not to use the procedure. In an extreme case malicious or wild allegations could give rise to legal action on the part of the persons complained about.

II. Confidentiality

The organisation will treat all such disclosures in a confidential and sensitive manner. The identity of the individual making the allegation may be kept confidential so long as it does not hinder or frustrate any investigation. However, the investigation process may reveal the source of the information and the individual making the disclosure may need to provide a statement as part of the evidence required.

III. Anonymous Allegations

This policy encourages individuals to put their name to any disclosures they make. Concerns expressed anonymously are much less credible, but they may be considered at the discretion of the organisation.

IV. Untrue Allegations

If an individual makes an allegation in good faith, which is not confirmed by subsequent investigation, no action will be taken against that individual. In making a disclosure the individual should exercise due care to ensure the accuracy of the information. If, however, an individual makes malicious or vexatious allegations, and particularly if he or she persists with making them, disciplinary action may be taken against that individual.

Procedures for Making a Disclosure

Due to the varied nature of these sorts of complaints, which may involve internal investigators and /or the police, it is not possible to lay down precise timescales for such investigations. However the investigating officer should ensure that the investigations are undertaken as quickly as possible without affecting the quality and depth of those investigations. If the investigation is prolonged all parties should be kept informed of it's progress, in writing. Complaints of malpractice in the first instance should be reported to the Chair, unless the complaint is against or related to the Chair. In such cases a complaint should be passed to a board member, who will nominate a board member or manager to act as the alternative investigating officer if he/she feels that the management without any conflict of interest can more appropriately investigate the complaint.

Written acknowledgement of the concern to the complainant & report back with the outcome of the investigation & actions proposed.

The investigating officer should follow these steps:

Step One:

Full details and clarifications of the complaint should be obtained and written acknowledgement provided of the concern to the complainant.

Step Two:

The investigating officer should inform the individual against whom the complaint is made as soon as is practically possible. The individual will be informed of their right to be accompanied by a representative at any future interview or hearing held under the provision of these procedures.

The investigating officer should consider the involvement of the Company auditors and the Police at this stage and should consult with the Chair, unless the comment is about the Chair. If appropriate a copy of the outcomes will be passed to a company legal or HR advisor.

Step Three:

The allegations should be fully investigated by the investigating officer with the assistance where appropriate, of other individuals / bodies.

Step Four:

A judgment concerning the complaint and validity of the complaint will be made by the investigating officer. This judgment will be detailed in a written report containing the findings of the investigations and reasons for the judgment. The report will be passed to the Chair as appropriate.

The Chair will decide what action to take, unless the comment is about the Chair. If the complaint is shown to be justified, then they will invoke the disciplinary or other appropriate organisation procedures.

Step Five: Outcomes

If appropriate a copy of the outcomes will be passed to a company legal or HR advisor. Both individuals involved in any whistleblowing process will receive a written copy of the details of the claim being made, with a copy being stored by the organisation.

If the complainant is not satisfied that their concern is being properly dealt with by the investigating officer, they have the right to raise it in confidence with the Chair or one of the board members.

If the investigation finds the allegations unsubstantiated and all internal procedures have been exhausted, but the complainant is not satisfied with the outcome of the investigation, the organisation recognises the lawful rights of individuals to make disclosures to prescribed persons (such as the Charity Commission), or, where justified, elsewhere.

Policy review: This policy will be reviewed and amended (if necessary) by the Board of Trustees at their annual planning meeting . It will also be reviewed in response to changes in relevant legislation, good practice, or in response to an identified failing in its effectiveness.



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Shanna Wells
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Version Control - Approval and Review

Version No	Approved By	Approval Date	Main Changes	Review Period
1.0	Board	July 2024	Initial draft approved	Annually
1.0.1	Board	July 2025	None	Annually