

## **Pearson plc: Code of Conduct** **Whistleblowing – Privacy Policy**

### **1. Objective**

To define the procedures and process to protect an employee's right to privacy and fair treatment with regard to the operation of the company's whistleblowing arrangements.

### **2. Scope**

All Pearson businesses globally where Pearson's ownership exceeds 50 percent.

### **3. Background**

Pearson's Code of Conduct (the Code) outlines the principles the company expects from its employees when conducting business, externally and internally, and carrying out their daily job responsibilities. Its aim is to ensure that Pearson conducts business on a legal and ethical basis, in all countries, and that employees are treated fairly. It also describes unacceptable behaviour.

The Code is posted on the Pearson corporate website and intranet ([www.pearson.com](http://www.pearson.com) and [www.pearson.com](http://www.pearson.com)) as well as individual operating company (Opco) intranets. Opco senior management are responsible for ensuring the Code is circulated within their business and understood by their staff. Annually, employees are asked to confirm their understanding of the Code and to report any potential breaches in the Code they may be aware of.

The Code also enables Pearson to comply with UK and US corporate governance requirements relating to the reporting of fraud, particularly those concerned with accounting, auditing and financial reporting matters. In particular it allows the company to comply with its obligations under the US Sarbanes-Oxley Act of 2002 (SOX).

### **4. Reporting breaches in the Code**

The section of the addendum to the Code ("Spreading the Word about the Pearson Code of Conduct") headed "Making sure we comply with the Code" describes the reporting procedures that employees should follow if they believe the Code is being breached.

Employees should report their concerns to:

- Their direct manager,
- Their operating company's People Department director (formerly 'human resources'),
- Group Legal Counsel, ([robert.dancy@pearson.com](mailto:robert.dancy@pearson.com), +1-201-236-3427) or Group Internal Audit ([susan.rudolph@pearson.com](mailto:susan.rudolph@pearson.com), +1-212 641 2406), or
- Pearson's CEO ([marjorie.scardino@pearson.com](mailto:marjorie.scardino@pearson.com))

Pearson has also established a free, confidential whistleblowing telephone hotline and online reporting system ([www.PearsonEthics.com](http://www.PearsonEthics.com)). Employees can use the hotline or the online reporting tool to report any concerns they may have about any behaviour that is inconsistent with the Code.

One of the purposes of the whistleblowing reporting systems is to enable Pearson to meet its obligations under SOX regarding the adoption of formal procedures, by the Audit Committee, for addressing complaints relating to fraud, accounting and auditing matters.

For local regulatory reasons, reports made via these reporting systems by employees based in certain European Union countries, or about incidents that took place in these countries, may be limited to the fields of accounting, internal accounting controls, auditing matters, the fight against bribery including conflicts of interest, banking and financial crime.

#### **4.1 Procedures for dealing with a complaint**

To protect an individual employee's legal rights and privacy, the following procedures have been adopted:

On receipt of a complaint the Group Legal Counsel, People Department and Head of Group Internal Audit will consult on the steps to be taken. If appropriate, an investigation will be initiated based on the criteria described below. If no action is required, because the information provided is inadequate and/or unclear, the report will be archived, deleted or anonymised as appropriate. Appropriate resources, internal and external, will be engaged on a need to know basis to assist with any investigation, which will be overseen by the Head of Group Internal Audit.

#### **4.2 Protection of reported information**

- 4.2.1 The Pearson Information Security policy (see <http://intranet.pearson.com/index.cfm?a=cat&cid=844>) defines the policies and procedures adopted by Pearson to secure all information, both in electronic and paper formats.
- 4.2.2 The whistleblowing reporting systems are managed by a third party, EthicsPoint, on Pearson's behalf and incorporate the strictest levels of security, confidentiality and standards, through a combination of best practices to protect systems using industry standards, including ISP 17799, COBIT and BS 7799. The role of EthicsPoint is to **record complaints only**; all investigations are conducted by Pearson senior management as described elsewhere in this policy.
- 4.2.3 The EthicsPoint service is a secure system, located in the US. EthicsPoint is compliant with appropriate US, European Union and other international laws in relation to individual employee's rights under data privacy legislation.
- 4.2.4 Within Pearson, access to reported information is restricted (using strict password security) to the Group Legal Counsel, Head of Group Internal Audit and two designated Audit Managers within the Group Internal Audit function.
- 4.2.5 To comply with EU rules on the transfer of personal information outside of the EU, information reported by employees based in EU countries for, certain types of reports, can only be accessed by the Group Legal Counsel and Head of Group Internal Audit.
- 4.2.6 For People Department type matters, reports can be also be accessed directly by the People Department US Senior VP and two of their designated senior managers.
- 4.2.7 Where necessary, on a temporary basis only, selected managers may be given access to the EthicsPoint system by the Head of Group Internal Audit to assist in an investigation. This access is restricted solely to the complaint being investigated.

#### **4.3 Investigation criteria**

- 4.3.1 People Department issues not involving alleged fraudulent activity and/or a serious breach in the Code will be passed back to local People Department function to deal with under standard Opco People Department policies and procedures.

4.3.2 Allegations of fraud (including conflicts of interest), accounting matters, internal accounting control, audit matters, bribery, banking and financial crime (“Qualifying Allegations”) will be investigated via the Group Internal Audit and Group Legal functions. The Head of Group Internal Audit will engage resources, internal and external, as deemed necessary on a need to know basis.

#### **4.4 Reporting of allegations/investigations**

The conclusion of the investigation will be communicated to the employee. Any necessary action, including disciplinary action as defined under the operating company’s standard People Department policies and practices, will be taken as appropriate. Findings will be kept confidential and only reported to the following management as needed:

- Local Opco senior management - CEO or equivalent, People Department Director and relevant functional management on a need to know basis
- Opco Regional Management – CEO or equivalent, People Department Director and relevant functional management on a need to know basis
- Pearson plc – Group Legal Counsel, Head of Group Internal Audit, Director of People and Pearson Management Committee (PMC) member responsible for the business/function

#### **4.5 Recordkeeping and document retention**

4.5.1 A secure log of all whistleblowing allegations is maintained and accessed by Head of Group Internal Audit. The log is a simple record of:

- Individual’s name (if given) making allegations
- Pearson unit
- Brief description of allegation
- Brief description of results of investigations
- Status of investigation, i.e. in-progress or closed

4.5.2 Paper copies of the log and relevant supporting documentation on completion of an investigation are securely maintained under the supervision of the Head of Internal Audit.

4.5.3 Log and supporting documentation regarding investigations are maintained for a period up to 7 years where deemed necessary to provide evidence to relevant authorities and support any legal claims. Local Opcos will maintain all detailed records for People Department issues.

4.5.4 Personal data relating to reports that are found to be entirely unsubstantiated will be deleted without delay where this is legally required, subject to legal or regulatory data retention requirements.

4.5.5 The PwC senior partner has supervised access to the log and EthicsPoint systems as part of annual external audit process.

#### **4.6 Employee notification and communication**

4.6.1 We encourage all employees to include their name and operating company when making a report to aid the investigation. The identity of all callers will be treated confidentially, unless otherwise legally required.

4.6.2 No action will be taken against any employee reporting actual or suspected wrongdoing.

4.6.3 Any use of the whistleblowing reporting systems for reporting of frivolous or defamatory allegations or for personal reasons is unacceptable. The making of such reports is in itself a breach of the Code and will be treated extremely seriously.

Employees who make any such reports will be subject to disciplinary action under our standard People Department policies.

- 4.6.4 Where required for legal reasons, employees that are the subject of a report will be notified as soon as appropriate that information is held about them, by whom and for what purpose. They will also be notified of their rights of access, and of rectification and erasure of incorrect information, and whom they should contact with queries. This notification to an employee will take place once it is decided that the notification would not jeopardise the company's ability to investigate the allegation.

#### **4.7 Annual employee confirmation exercise**

Employees are asked annually to confirm their awareness of the Code and report any known breaches in the Code they may be aware of. The confirmation is in the form of a simple yes/no questionnaire – no information on alleged breaches is asked for at this stage of the confirmation process. This exercise is overseen by the Head of Group Internal Audit. Where an employee indicates they are aware of a breach they are contacted directly by the Head of Group Internal Audit (or his/her designated proxies) to discuss the nature of the alleged breach. Depending on the allegations the procedures outlined in this policy will be instituted.

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**1 November 2010**