

WHISTLEBLOWER POLICY

Policy number	2.14	Version	V5 2023
Responsible Person	CFOO	Approval date	28-11-2023

INTRODUCTION

ASHM Health (ASHM) is committed to the highest standards of conduct and ethical behaviour in all its activities. The organisation promotes and supports a culture of honest and ethical behaviour, legislative compliance, and good corporate governance.

As part of this commitment, ASHM encourages the reporting of any instances of suspected unethical, illegal or fraudulent conduct involving ASHM's activities and provides protections and measures so that those persons who choose to make a report under this Whistleblower Policy may do so confidentially and without fear of victimisation, reprisal or discriminatory treatment. ASHM is equally committed to complying with relevant legislation, including the specific whistleblower protection provisions contained in the Corporations Act 2001 (Cth). The Corporations Act provides specific legal protections to Whistleblowers, provided certain conditions are met. To the extent of any inconsistency between this document and the Corporations Act, the Corporations Act prevails.

This policy is available on SharePoint, HRIS (Employment Hero) and on ASHM's website.

In contemplating the use of this policy and procedure, a person should firstly consider whether the matter may be more appropriately raised via less formal direct discussion with their Supervisor, the CEO, or another person with authority at ASHM. ASHM believes that many concerns that may be raised in relation to its business activities could be effectively resolved through routine channels of communication with appropriate supervisors and managers. ASHM also recognises that in certain situations, due to the seriousness of the concerns being raised or other personal or specific circumstances, a person may prefer to avail themselves of the formal and independent processes, anonymity provisions, and other Whistleblower protections afforded by making a report as a Whistleblower under this Whistleblower Policy.

POLICY OBJECTIVES

- Articulate ASHM's commitment to conducting business in an open and honest manner.
- Maintain the highest ethical standards to mitigate the regulatory, financial, legal and reputational risks to ASHM.
- Promote a culture of "speaking up" (at ASHM) in which honesty, integrity and business ethics are a part of everyday behaviour.
- Provide a framework to:
 - Encourage all Workers to report any concerns about actual or suspected misconduct.
 - Assure all Workers that ASHM will provide protection and measures so that the person(s) who makes a report may do so confidentially and without fear of intimidation, disadvantage or reprisal.

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- Provide guidance on how a whistleblower should report their concern/s, including their right to remain anonymous, and what happens when they report their concerns.
- Describe how ASHM receives, assesses and investigates reports from Whistleblowers in a way that protects the identity of the Whistleblower and provides confidentiality and secure storage of the information provided.

SCOPE

- This policy applies to all -personnel (past and present) at ASHM as well as all people performing work at the direction of, in connection with, or on behalf of ASHM such as contractors, agents, consultants, interns, temporary staff, volunteers, course and conference attendees and speakers, affiliates, advisers, fellows and secondees etc., collectively referred to as 'Workers' in this policy.
- This policy and its procedures relate to matters of misconduct that may be illegal, unethical, negligent, detrimental to ASHM or improper according to ASHM's constitution and policies.
- This policy and its procedures do not apply to a personal work-related grievance as defined in the Corporations Act.

Item	Definition	
Reportable conduct	Any past, present, or likely future activity which:	
	 Is dishonest, corrupt, or unethical. Involves theft, fraud, money laundering or misappropriation of funds. Is a systemic, wilful, or serious breach of the law as it relates to ASHM, or its internal policies or processes. Involves offering or accepting a bribe from any person. Is illegal (e.g., illicit drug sale or use, violence or threatened violence and criminal property damage). Presents a significant or serious threat to the health and safety of Workers. Involves victimisation of someone for reporting a Reportable Conduct. Involves any instruction to cover up or attempt to cover up serious wrongdoing. Interferes with any impending audit processes. Presents a serious risk to the reputation or financial wellbeing of ASHM 	
Not reportable conduct	This Policy is not intended to apply to disclosures relating to conduct concerning a person's individual employment (other than as set out in	

DEFINITIONS

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	Reportable Conduct) such as:	
	 Personal, work-related grievances such as those relating to harassment, discrimination, or disciplinary matters. Alleged workplace discrimination or bullying. Personal disputes between staff. 	
Detrimental conduct	 Any reprisal, discrimination, harassment, victimisation, retaliation, or threats of retaliation against a person making a report. This may include: Dismissal, suspension, or demotion. Alteration of a person's position or duties to their disadvantage. Disciplinary action. Harassment or intimidation. Discrimination. Harm, including psychological harm or injury. Damage to the person's property, business, or financial position. 	
Whistleblower	A person who, whether anonymously or not, makes a report of a concern about actual or suspected misconduct in accordance with this policy and procedure.	
Whistleblower Protection Officer	An ASHM employee who has been nominated by the ASHM Board as a person to whom a Whistleblower can make a report. This person has been allocated the authority to communicate with the ASHM Board through its Finance, Risk Management, and Audit, (FRMA), Committee should the circumstances of a Whistleblower report require that to occur.	
Whistleblower Investigation Officer	An ASHM nominated person under the whistleblower policy who is responsible for investigating disclosures of reportable conduct and while safeguarding and ensuring the integrity of the reporting mechanism.	

RELATED POLICIES

- 2.05 Anti-Bullying Policy
- 2.06 Misconduct Policy
- 2.10 External Complaints Policy
- 3.06 Fraud and Corruption Management
- 3.14 Confidentiality Policy
- 4.24 Staff Complaints and Grievance Policy

AUTHORISATION

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HISTORY

Version	Approved Date	Comments/ Amendments
2018v1	20-06-2018	First version
2018v2	07-04-2020	Added statement regarding the obligations under the
		Corporations ACT and ASIC corporations.
2021v3	N/A	New template
2022v4	17-03-2022	Add eligible whistle-blower definition. Difference between
		this policy and staff complaints and grievances. Policy
		compliance reviewed and checked.
2023v5	28-11-2023	Extensive rewrite to enhance definitions, and to clarify
		responsibilities and procedures

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WHISTLEBLOWER PROCEDURE

Procedures number	2.14	Version	2023v5
Responsible person	CFOO	Approval date	28-11-2023

RESPONSIBILITIES

Role	Responsibilities	
ASHM Board	 Approve the policy and its procedures Nominate ASHM's Whistleblower Protection Officers 	
Chief Executive Officer (CEO)	 Communicate support of the policy and procedures to all ASHM Board and Workers. Communicate the integrity of the process including bypassing the CEO should the CEO be potentially implicated, and that the CEO may not always be made aware of confidential details of reports made. Ensure investigations into reports by Whistleblowers are adequately resourced and conducted as soon as reasonably practicable. 	
Whistleblower Protection Officer(s)	 Undertake the applicable actions set out in the Policy procedures section. Maintain the anonymity of the Whistleblower as far as possible under law if requested by the Whistleblower. Maintain strict security and confidentiality of information provided by the Whistleblower. 	
Workers	• Make a report if they become aware of actual misconduct or suspect on reasonable grounds of misconduct that is reportable under this policy which cannot or is not being resolved through other reporting mechanisms.	

PROCEDURES

1. Reporting "Reportable Conduct"

- i. ASHM encourages a culture of speaking up and coming forward if a person is aware, has knowledge of, or reasonably suspects, that someone has, or will, commit *Reportable Conduct*.
- ii. A Worker can make a report by contacting an ASHM Whistleblower Protection Officer

Chief Financial and Operating Officer Deputy Chief Executive Officer

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- iii. If a Whistleblower would prefer to raise the matter with someone other than a Whistleblower Protection Officer, they can make a report, either in writing or orally to any of the following:
 - The President of the ASHM board and/or the Chair of ASHM's FRMA Committee.
 - ASHMs appointed external auditor, partner level.
- iv. Whilst internal reporting is always encouraged, if a Worker is of the view that there is an exceptionally serious issue which warrants reporting to an external body, the Worker can also report to the Australian Charities and not-for-profits Commission (ACNC) using an <u>online form</u> or by calling on 13 22 62. <u>Read</u> what ACNC can do before raising a concern.
- v. Reports and disclosures can be made verbally or in writing and can be anonymous.
- vi. A person making a report must not make a false or vexatious claim. Protections under this Policy will not be applied to false reports or vexatious claims. ASHM may apply disciplinary proceedings to any ASHM *personnel* making them.

2. Anonymous Reporting and Confidentiality

- i. All reports can be made anonymously and still receive the protection provided under this Policy. However, when deciding whether to make a report anonymously, please be aware that anonymity may limit ASHM's ability to investigate the matters reported. ASHM encourages you to disclose your identity when making a report under this Policy, as this will also enable us to monitor your wellbeing and protect you from any retaliation or detriment.
- ii. ASHM will treat all reports, as well as all confidential information acquired in the course of investigating a report, with the strictest confidence. Subject to compliance with legal requirements ASHM will only disclose the identity of the person who made the report, or any other information that is likely to lead to the identification of that person, with their prior consent or otherwise in the limited circumstances listed below.
- iii. In limited circumstances, ASHM may need to disclose the identity of the person making the report without their consent to certain third parties, such as:
 - The Australian Securities and Information Commission (ASIC).
 - The Australian Charities and Not-for-profits Commission (ACNC).
 - The Australian Federal Police / State Police.
 - Any third party where the investigating authority, public authority, officer or public official is of the opinion that disclosure of your identity is necessary to investigate the matter effectively, or it is otherwise in the public interest to do so.

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3. Protection from Detrimental Conduct

- i. ASHM understands that the decision to make a report can be a difficult one to make. ASHM is committed to ensuring that every person feels safe in making a report. When a report in relation to *Reportable Conduct* is made, the identity of the person making the report will remain confidential and the person will be protected from *Detrimental Conduct* for making the report.
- ii. Under this Policy, any *Detrimental Conduct* against a person reporting *Reportable Conduct* will be treated as a serious wrongdoing. These protections will apply even where it is subsequently determined that a report was mistakenly made or not substantiated.
- iii. If a person makes a report and subsequently faces any kind of *Detrimental Conduct*, they are encouraged to notify the *Whistleblower Protection Officer*. The Whistleblower Protection Officer will ensure the matter is investigated promptly.
- iv. Any person found to have disadvantaged or retaliated against another person for the submission of a report, will be subject to disciplinary action that may include dismissal.
- v. ASHM understands that there may also be some serious repercussions for individuals who are mentioned in a report. Accordingly, ASHM will ensure their fair treatment and will extend the protections stated above to these individuals where appropriate.

4. Receiving and Responding to "Reportable Conduct" Report

Any eligible person to whom a report is made under this policy shall:

- i. Inform the Whistleblower that they will not be disadvantaged for the act of making a report.
- ii. If the Whistleblower makes a request for anonymity, preserve the Whistleblower's anonymity.
- iii. Ask the Whistleblower to put their report in writing where possible and provide, as appropriate, details of as much information as possible, including the details of the misconduct, people involved, dates, locations etc.
- iv. Ask the Whistleblower to provide any further evidence to support their concerns at this time (if it exists). It is worth noting that while the absence of supporting evidence is considered in determining whether to open an investigation into the matter or not, it doesn't necessarily mean an investigation won't take place.
- v. Make an initial assessment of the report to determine whether the matter falls under this Policy.
 - If they believe that a report does not fall under or relate to *Reportable Conduct*, advise the person making the report and advise them of how to initiate the process to have the matter more appropriately handled under a different policy or procedure.

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- 2. If they believe that the report is unquestionably trivial:
 - a. Dismiss the allegation and advise the Whistleblower of their decision.
 - b. Advise the President of the Board or Chair of the FRMA committee of the Whistleblower report and their decision.
 - c. Prepare records of the same and store them in a protected repository maintained for this purpose.
 - d. Be accountable for the dismissed allegation if the Whistleblower chooses to escalate their concerns.
- 3. If they believe that the report may not be trivial:
 - a. Inform the Whistleblower that an investigation will be established.
 - b. Advise the President of the Board or Chair of the FRMA committee of the Whistleblower report and that it will be investigated.

5. Investigating "Reportable Conduct" Report

Once a report is determined not to be trivial, the matter will be investigated as soon as practicable. The person to whom the report has been made may appoint another person or persons to undertake or assist in the investigation of the report. Depending upon the nature of the report, the investigation may be conducted by an internal or external investigator. The person(s) who have been appointed to undertake or assist in the investigation of the report shall

- i. If the report is not anonymous, contact the Whistleblower to discuss the investigation process including who may be contacted and such other matters as are relevant to the investigation.
- ii. Be responsible for the investigation being conducted in an objective and fair manner, supportive of the rights of both the Whistleblower and all persons implicated in relation to the reported conduct.
- iii. Prepare the terms of reference for the investigation, in consultation with the President of the Board or Chair of the FRMA committee to clarify the key issues to be investigated.
- iv. Develop an investigation plan to ensure all relevant witnesses are interviewed, all relevant questions are addressed, all relevant documents are assessed, the scale of the investigation is in proportion to the seriousness of the allegation(s) and sufficient resources are allocated.
- v. Source internal or external support if required or deemed appropriate.
- vi. Conduct the investigation in a manner that is reasonable and appropriate having regard to the nature of the reported conduct and the circumstances.
- vii. Conduct the investigation in an objective and fair manner.
- viii. Where appropriate, provide feedback to the Whistleblower from time to time throughout the investigation regarding the investigation's progress and/or

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outcome (subject to considerations of the privacy of those against whom allegations are made).

- ix. Ensure strict security and confidentiality are maintained during the investigative process by all parties involved.
- x. Ensure records of all discussions, phone calls and interviews are made, with interviews recorded where possible.
- xi. Ensure all information obtained is properly secured to prevent unauthorised access and held in a protected repository maintained for this purpose.
- xii. Produce a report of the findings as soon as reasonably practicable.

The person or persons undertaking the investigation must ensure the principles of procedural fairness (natural justice) are observed. Where adverse comment/s about any person is likely to be included in an investigation or findings report, the person affected will be given an opportunity to comment on the reported concerns during the investigation and any comments will be considered before the findings report is finalised.

6. Reporting findings from an investigation arising from a Whistleblower's report

Subject to the preservation of the anonymity of the Whistleblower and the privacy considerations of those people involved in any way in the investigation, the person(s) undertaking the investigation shall:

- i. Prepare a report of the findings that will include:
 - 1. The allegation/s.
 - 2. All relevant facts and the evidence relied upon in reaching any conclusions.
 - 3. Conclusions reached (including any damage caused, any impact on the organisation and/or other affected parties, and any risks identified) and their basis.
 - Recommendations based on those conclusions to address any wrongdoing identified and any other matters arising during the investigation such as any lessons to be learnt or ways to prevent a recurrence of the situation.
- ii. Store the findings report in a protected repository maintained for this purpose.
- iii. Provide a copy of the findings report to the President of the Board or Chair of the FRMA committee.

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