

Whistleblower Policy

Policy Statement Catholic Healthcare promotes and values a culture of honesty, openness and respect and is committed to providing suitable avenues for people to confidentially report matters of misconduct without fear of reprisal.

Scope This policy applies to all people employed by Catholic Healthcare, volunteers, contractors, residents, clients, patients and their families, as well as any party that has service dealings with the organisation.

1. Introduction

As a trusted provider of aged, health and community services, it's essential that we have processes in place that enable people to confidentially report matters of serious misconduct so that appropriate action can be taken. This policy outlines these processes.

2. Definitions

'Whistleblowing' is the act of raising and reporting suspected matters of Serious Misconduct within Catholic Healthcare in circumstances where such concerns were unable to be raised:

- Through other CHL complaint and grievance processes; or
- Where the above internal processes have failed to respond to a Disclosure; or
- Where the Whistleblower genuinely fears victimisation or harassment if he or she attempts to use other internal mechanisms.

A **'Whistleblower'** can be any past or present, employee, director, resident, client, patient, supplier, volunteer, or relative who, whether anonymously or not, makes or attempts to make a disclosure of Serious Misconduct as set out in this policy.

"Serious Misconduct" means any corrupt, unethical or illegal practice that may include:

- Serious neglect of duty;
- Mistreatment of residents, clients or patients;
- Extreme inefficiency or incompetence;
- Gross insubordination or serious and wilful disobedience;
- Bribery, corruption, fraud and other illegal practices;
- Theft of Catholic Healthcare property;
- Drunkenness (safety) in the workplace;
- Substantial mismanagement or waste of Catholic Healthcare resources;
- Conduct that creates substantial risk to the health and safety of people or the environment;
- Misuse of private organisational or personal information/material acquired by employees during their work;
- Serious cases of Bullying or Sexual Harassment; and

- Any other conduct that causes or could cause serious detriment to Catholic Healthcare, its residents, clients, patients, staff or reputation, or to the communities that Catholic Healthcare serves.

Detriment above means any actual or threatened action against a person that may:

- Cause injury, loss or damage;
- Amount to intimidation, bullying, harassment or discrimination;
- Result in disadvantage or adverse treatment to the person's employment, career or profession (e.g. Disciplinary action because of disclosed alleged improper conduct); or
- Any other form of victimisation.

"Disclosure/s" means a disclosure/s of Serious Misconduct made under this policy.

3. General

- 3.1 This policy is aligned to and supports Catholic Healthcare's Mission, Values and Code of Conduct and is one of several policies and procedures designed to support and promote honest and ethical behaviour within the workplace and the delivery of high standards of care.
- 3.2 Catholic Healthcare encourages the reporting of Serious Misconduct. While such Disclosures would ordinarily occur through manager lines of reporting or through other complaints or grievance procedures, any person may, in good faith, report matters they consider to be significantly serious in accordance with this Policy.
- 3.3 Catholic Healthcare treats all Disclosures (and associated documentation) made in good faith sensitively, confidentially and securely to protect the anonymity of Whistleblowers.
- 3.4 Anonymous and onymous disclosures are received equally with the former accepted on the understanding that anonymity may sometimes make some matters more difficult to investigate.
- 3.5 Any person reporting a matter under this policy must ensure that there is clear and reasonable basis upon which to base their claim. In the event that an employee makes a plainly frivolous or wholly baseless claim, to either create issues for another person or to distract from personal disciplinary action, then such behaviour will be managed in accordance with Catholic Healthcare performance management policy.
- 3.6 Catholic Healthcare will investigate disclosures promptly with the wellbeing of all parties in mind.

4 Whistleblower Protections

- 4.1 Under this policy Catholic Healthcare offers an assurance to Whistleblowers that when raising a matter of serious misconduct in good faith, it will not result in any action or reprisals against them. Of course, this assurance is made on the understanding that the Whistleblower themselves are not involved in any improper, unethical or unlawful activities.
- 4.2 Further, Section 1317AB(1) in the Corporations Act 2001, outlines in greater detail the range of protections that apply to Whistleblowers including not being subject to any civil, criminal or administrative liability (including disciplinary action) for making the disclosure.

5 Reporting Protocol

- 5.1 A person wishing to raise a matter under this Policy should do so via the following channels:
- **Stop Line** – CHL engages the services of a wholly independent external Whistle Blower Services provider called Stop Line. Any Person wishing to report a serious misconduct matter relating to a CHL employee can do so anonymously through this service. A Report can be made via phone, email, web, fax or letter.
 - **Lead Responsible Person** – The General Manager, Human Resources (and any person acting in his/her stead from time to time) receives disclosures and coordinates the investigation into any claims made as the Lead Nominated Responsible Person under this policy. Depending on the nature of the issue raised, the Responsible Person may delegate the responsibility for managing an investigation to another suitable senior role inside the organisation. While, reporters are encouraged to make use of the available Stop Line service, issues of misconduct can also be disclosed directly to the Lead Responsible Person.
 - In the event that a Disclosure relates to the Lead Responsible Person, then the matter should be raised with the **Managing Director** (and any person acting in his/her stead from time to time)
 - In the event that a Disclosure relates to the Managing Director, then the matter should be raised with the **Chairman of the Board** (and any person acting in his/her stead from time to time)
- a. The Lead Responsible Person is responsible for making an initial assessment of all Disclosures received under this Policy. Where the identity of the Whistleblower is known, the Lead Responsible Person will advise the person making the report of the likely investigation timeframes and will be responsible for ensuring that feedback is provided at appropriate stages of the investigation.
- b. Should the Lead Responsible Person require assistance with investigating a matter, then they should seek assistance from the Catholic Healthcare Chief Counsel in the first instance.

- c. The Lead Responsible Person will establish a plan for conducting an investigation that includes the following:
 - A. A summary of the allegations made – as reported via Stop Line or other;
 - B. Scheduling a meeting with the Whistleblower to reconfirm details of allegations made and to provide assurance that the investigations will be made in accordance with this policy;
 - C. Assessment as to whether other parties such as Legal Counsel need to be involved in the investigation.
 - D. Prepare a list of people names that need to form part of the investigation to verify, assess or give context to the allegations made;
 - E. The gathering of any written or other forms of information that supports or gives necessary context to the allegations made; and
 - F. Scheduling an initial meeting with the person against which the allegations are made in order to present the allegations and explain the investigation process.
- d. The Lead Responsible Person will then manage the investigation in accordance with the investigation plan.
- e. Where there are allegations of a crime including abuse, the Lead Responsible Person will notify the Chief Counsel who will then consider whether the matter should be referred to the police and/or other government authorities.
- f. Once the investigation is complete then the Lead Responsible Person will make recommendations for action, engage with the appropriate employee manager on these recommendations and ensure that appropriate action is taken. They will also be responsible for informing the Whistleblower of final outcomes.
- g. It is important for Whistleblowers to understand that in some circumstances, including where reporting is required by law, maintaining anonymity may not be possible.

6 Other Reporting Options

Under the Corporations Act 2001 matters of serious misconduct may also be reported to:

- a. The Australian Securities and Investments Commission (ASIC);
- b. The Australian Prudential and Regulation Authority (APRA);
- c. Prescribed relevant Commonwealth Authorities; or
- d. A Legal practitioner if the disclosure is made for the purpose of obtaining legal advice or legal representation in relation to the operation of law on whistleblowing.

7 Accessing this Policy

- 7.1 A copy of this Policy can be located on CONNECT, the CHL Intranet, at all times.

8 Related Policies and Guidelines

- Catholic Healthcare Code of Conduct
- Code of Conduct Management Guidelines
- CHL Grievance Resolution Policy
- Aged Care Act 1997
- Corporations Act 2001
- The Treasury Laws Amendment (Enhancing Whistleblower Protections) Bill 2018
- AS8004-2003 “Whistleblower Protection Programs for Entities” Australia Standard
- AS8001-2003 “Fraud & Corruption Control” Australian Standard