

# Protected Disclosure (Whistleblower)

## Policy Details

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## Purpose

People Who Care has adopted this policy in order to:

- Encourage disclosure and investigation of improprieties before they can disrupt the business or operations of the organisation or lead to serious damage to People Who Care;
- Promote a climate of accountability with respect to organisation resources, including its volunteers and employees;
- Ensure no staff member is disadvantaged in properly raising legitimate concerns;

## Definitions

The Department of Parliamentary Services describes “*whistle blowing*” as:

“The disclosure by organisation members (former or current) of illegal, immoral or illegitimate practices under the control of their employers to persons that may be able to effect action”.

Specifically, these include, but are not limited to, actions or practices related to:

- Any unlawful activity
- Inappropriate and/or illegal financial dealings
- Dangerous practices
- Activities which are not in accord with People Who Care’s Code of Conduct, Values and Policies
- Serious misconduct.
- Any other conduct or act which may cause loss to People Who Care or which may otherwise be detrimental to its interests.

## Policy

This policy applies to all staff and is additional to any existing State or Federal legislation. In this policy, the person making the disclosure is referred to as the “*Concerned Person*” and the person subject of the disclosure “*the Respondent*”.

The Policy allows individuals to anonymously make a report in good faith without fear of being penalised or disadvantaged by or within the organisation for having made the disclosure. However, the policy does not remove the possibility of action that may be required if the Concerned Person has been implicated in actions that would require disciplinary action.

In applying this policy the following principles will be observed:

- Victimisation or harassment will not be tolerated;
- Confidentiality will be maintained (see below: Confidentiality of Disclosure);

- Anonymous concerns will be investigated dependent on the gravity and credibility of the concern.

The Policy is distinct from Grievance Procedure and should be read in conjunction with other relevant policies and procedures. Protection under the Policy extends only to action related to the concern itself.

***The Policy is a last resort; it does not replace usual avenues of reporting and is applicable only when these have been exhausted or are not appropriate or available.***

Whilst this policy applies an 'acting in good faith' presumption, any allegation that is found to be malicious, knowingly false or frivolous, may be treated as a serious misconduct disciplinary matter.

## **Procedure**

### **1. Confidentiality of Disclosure**

- People Who Care will treat all disclosures by staff as confidential.
- People Who Care will keep confidential the identity of the Concerned Person under this policy until a formal investigation is commenced. Thereafter, the identity of the Concerned Person will be kept confidential, if requested, unless such confidentiality is incompatible with a fair investigation, or unless there is an overriding reason for identifying or otherwise disclosing the identity of the Concerned Person, or unless the identity of the Concerned Person is required by law.
- Where disciplinary proceedings are invoked against a Respondent under this policy, People Who Care may require the name of the Concerned Person to be disclosed to the Respondent. People Who Care encourages Concerned Persons to reveal their identity but a Concerned Person may choose to make an anonymous disclosure pursuant to the procedures set forth below. In responding to an anonymous disclosure, People Who Care will pay due regard to fairness to the Respondent, the seriousness of the issue raised, the credibility of the information or allegation in the disclosure and the prospect of an effective investigation.
- Investigations will be conducted as quickly as possible, taking into account the nature and complexity of the disclosure and the issues raised.

### **2. Unsubstantiated Allegations**

- If a staff member makes a disclosure in good faith, pursuant to this policy, and any facts alleged are not confirmed by subsequent investigation, no action will be taken against the Concerned Person.
- In making a disclosure, a Concerned Person should exercise due care to ensure the accuracy of the information disclosed.
- Where alleged facts disclosed, pursuant to this policy, are not substantiated, the conclusions of the investigation will be made known both to the Concerned Person and to the Respondent.
- The finding that the allegation was not substantiated will form part of the record.
- Where allegations of unacceptable conduct made against another person cannot be substantiated, that person will be advised accordingly and will be entitled to continue in their role as if the allegations had not been made.

### **3. Administrative Procedures**

#### **Making a report:**

- Any concern of a grave or sensitive nature may be reported in writing or verbally to either the CEO or Human Resources Manager (HRM), provided neither party is implicated in the matter of concern.
- The CEO/HRM will investigate the case if appropriate or may appoint another party, internal or external to investigate and who is not associated with the area under investigation.
- In the event that neither the CEO nor HRM are appropriate to oversee the investigation, the matter should be referred to the Chair of the People Who Care Board.

#### **Dealing with a Concern:**

- The investigating officer will prepare a report and forward it to the person overseeing the process who will determine the appropriate response.
- In the event the CEO is the subject of an investigation or allegation, the Chairman of the Board will determine the report and corrective measures.

**Conclusion:**

- The Concerned Person will be advised of the outcome of the investigation (subject to Privacy and confidentiality considerations).

**Breaches**

Breaches of policy are serious and may result in disciplinary action up to and including termination.

**Applicable Standard/s**

N/A

**Cross reference to relevant policy**

- Staff Grievance and Dispute Resolution
- Code of Conduct

**Forms/Documents/Records pertaining to this policy**

N/A