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ST JOHN OF GOD
Health Care

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Area **Governance-
Governance/
Risk/Compliance**
Applicability **St John of God
Organisation**

GO GRC0004 Whistleblowing Policy

Our Vision - We are recognised for care that provides healing, hope and a greater sense of dignity, especially to those most in need.

Our Mission - To continue the healing mission of Jesus.

PURPOSE

The purpose of this policy is to -

1. Provide a clear framework within which Disclosers can confidently report any Reportable Conduct or suspected Reportable Conduct without fear of detriment;
2. Outline how St John of God Health Care will respond to and investigate reports of Reportable Conduct or suspected Reportable Conduct; and
3. Describe St John of God Health Care's obligations in complying with the whistleblower protection provisions in the *Corporations Act 2001 (Cth)* and the *Taxation Administration Act 1953 (Cth)*.
4. Contribute to the SJGHC Strategic enabler of Strengthening Our Culture.

RELATED DOCUMENTS

[GO GRC0004 0001 Whistleblowing Roles and Responsibilities Procedure](#)

SCOPE

This policy applies to -

Organisational

The St John of God Health Care Inc ("SJGHC")

Individual

A Discloser can be a current or former:

Caregiver or Director;

Visiting Medical Officer;

Patient

Contractor (including sub-contractor and employee of sub-contractor) of SJGHC;

Consultant or supplier of goods or services (whether paid or unpaid) including their employees and business partner;

Associate of the entity; and

Relative, dependant, spouse or dependent of a spouse of any of the above, who makes, attempts to make, or intends to make, a Disclosure of Reportable Conduct in accordance with this policy.

Collectively referred to as "caregiver"

SUBJECT MATTER

Whistleblowing

SJGHC is committed to fostering a strong culture of honest and ethical conduct and behaviour, legislative compliance and excellent corporate governance, in line with its Vision, Mission and Values.

The purpose of whistleblowing is to eradicate unethical behaviour in the workplace. A key component to workplace ethics and behaviour is integrity, or being honest and doing the right thing at all times.

POLICY

SJGHC Whistleblowing Policy Principles

1. SJGHC, as an organisation, will -
 1. Not tolerate any actions by others that attempt to prevent or stop a Discloser from making a Protected Disclosure in accordance with this policy.
 2. Take reasonable steps to enable a Discloser to make a Protected Disclosure without fear of detriment.
 3. Take reasonable steps to protect the identity of a Discloser, and any information that is likely to lead to their identification. Except if required by law to disclose the Discloser's identity (i.e. to police if the Protected Disclosure involves criminal conduct) or they have consented to the release of their identity.
 4. Take very seriously, including consideration of appropriate disciplinary action, any

conduct by a caregiver that breaches the Discloser's confidentiality or causes, or threatens to cause, detriment to the Discloser or a person who could make a Protected Disclosure (i.e. a prospective Whistleblower).

5. Investigate all Reportable Conduct in a timely, thorough, confidential, objective and fair manner, with regard to the principles of natural justice (i.e. without bias and hearing the other side).
 6. In good faith consider granting immunity from disciplinary proceedings, where appropriate in the circumstances, for any individual who is party to the conduct that is the subject of the Protected Disclosure.
2. Caregivers must -
1. Act consistently with SJGHC's values in making a Protected Disclosure. For example, not act maliciously, vexatiously or make Protected Disclosures that they know are untrue.

Personal Work Related Grievances Not Reportable

1. Personal Work Related Grievances are not Reportable Conduct and, accordingly, are not covered under this Policy. They should be raised with the caregiver's line manager or Human Resources in line with the following Policies and Procedures:
 1. Misconduct (WF IR0013)
 2. Workplace Investigations (WF IR0009)
 3. Performance Management (WF IR0014)
 4. Grievance (WF IR0008)
2. Caregivers with a personal work related grievance will not qualify for protection under the Corporations Act.
3. Caregivers with a personal work related grievance may qualify for protection if:
 1. It includes information about misconduct, or the information about misconduct includes (or is accompanied by) a personal work related grievance (mixed report);
 2. An entity has breached employment or other laws, engaged in conduct that represents a danger to the public, or the Disclosure relates to information that suggests misconduct beyond the Discloser's personal circumstances;
 3. They are suffering from, or are threatened with, detriment for making a Disclosure; or
 4. They seek legal advice or legal representation about the operation of the Whistleblower protections under the Corporations Act.

SJGHC Whistleblowing Reporting Mechanisms

1. SJGHC will -
 1. Provide Disclosers an internal and external mechanism to report any Reportable Conduct.
 2. Keep confidential all information contained in reports and provided by Disclosers in the course of an investigation, except as required by law or where release of

information is necessary to regulatory authorities, law enforcement agencies or professional advisors to SJGHC.

2. Caregivers must -

1. Report any known or suspected instances of Reportable Conduct immediately.
2. Include in the Disclosure as much detail as possible of all relevant facts and supporting documentation (if any) and describe the grounds for the report.

3. Caregivers may -

1. Report any Reportable Conduct or suspected Reportable Conduct using the reporting mechanisms set out below.
 - **Eligible Recipients (Internal):** A Disclosure may be made to one of the following Eligible Recipients by email, telephone, letter or face to face. When making a Disclosure, the Discloser must first inform the Eligible Recipient that they wish to make a report under this Policy.
 - A director of the Board of SJGHC
 - A member of the Executive Committee
 - Group Manager Risk & Compliance
 - **Whistleblowing Hotline Service for Disclosures (External):** A Disclosure may be made to SJGHC's external independent whistleblowing service "Your Call" using any of the following methods:
 - Calling the hotline number 1800 940 379. Calls can be received between 9:00 am – 12:00 am AEST Monday – Friday, excluding National public holidays
 - Visiting online www.yourcall.com.au/report and referencing Organisation ID "SJGHC"
2. Request to report on an anonymous basis if they wish and will still be protected under the Corporations Act.
3. Remain anonymous over the course of the investigation and after the investigation is finalised. However, an ongoing two-way communication is encouraged to allow for any follow-up questions and to be able to provide feedback and updates throughout the process.

Confidentiality and Anonymity

1. A Disclosure can be made anonymously. However, it may be difficult for SJGHC to properly investigate or take other action to address the matters disclosed in anonymous reports. In circumstances where the Discloser has not consented to the release of their identity, the matter may be referred for investigation, but the investigator will be required to take all reasonable steps to reduce the risk that the Discloser will be identified as a result of the investigation.
2. SJGHC will protect confidentiality by –
 1. Where appropriate, redacting personal information from documents and referring to

- the Discloser in gender-neutral terms;
2. Where possible, discussing with the Discloser the approach to aspects of the report which risk identifying them;
 3. Securely storing a Disclosure and associated communication;
 4. Even where the Discloser agrees to sharing their identity, limiting the sharing of their identity to a strictly needs-to-know basis;
 5. Only sending materials related to a Disclosure to secure printers; and
 6. Each individual who is involved in handling and investigating a Disclosure will be reminded about the confidentiality requirements, including that an unauthorised disclosure of identity may be a criminal offence.
3. Information that is likely to lead to the identification of the Discloser may be released in the following circumstances:
 1. Where such information is needed for the reasonable investigation of the matter reported; and
 2. Where all reasonable steps are taken to avoid discovery of the Discloser's identity.
 4. Information about a Discloser's identity may only be released in the following circumstances:
 1. Where the information is disclosed to the Australian Federal Police, APRA or ASIC;
 2. Where the information is disclosed to a legal practitioner for the purpose of obtaining legal advice in relation to the operation of applicable whistleblowing protection laws; or
 3. Where the Discloser consents.

SJGHC ACTIONS TO INVESTIGATE DISCLOSURES OF REPORTABLE CONDUCT RECEIVED

5. SJGHC, in accordance with GO GRC0004 0001 Whistleblowing Roles and Responsibilities, will -
 1. Appoint an appropriately qualified and independent senior caregiver to the position of Protected Disclosure Officer ("PDO"), being the Group Director Legal, Risk & Compliance. The PDO will be responsible for:
 - Providing access to independent financial, legal and/ or operational advice as required for the purposes of effectively carrying out the role of PDO; and
 - Being ultimately responsible for the whistleblowing program and making determinations from investigation report findings.
 2. Appoint an appropriately qualified and independent senior caregiver to the position of Whistleblower Protection Officer ("WPO"), being the Group Director Workforce. The WPO will be responsible for:
 - Protecting Disclosers from being victimised as a result of reporting. Disclosers can be protected in a number of ways including, but not limited to, the following:
 - Ensuring confidentiality in the investigation; and

- Protecting, as far as legally possible, the Discloser's identity.
 - Provides, or arranges to provide support and protection to the whistleblower to prevent or manage confidentiality breaches and victimisation.
3. Appoint an Investigation Officer ("IO") who will be responsible for investigating the substance of any Disclosure regarding Reportable Conduct to determine whether there is evidence in support of the conduct raised or, alternatively, to refute the report made.
 4. Not appoint the role of IO and PDO to the same person. The two appointees should operate and be seen to operate independently of each other and should act in such a way that they discharge the two quite separate functions independently of each other. They will be fair and independent from the Discloser and the other party involved in the Disclosure of Reportable Conduct received.
 5. Consider factors including whether the Disclosure of Reportable Conduct received qualifies for protection, the most appropriate investigator, and the nature of any technical, financial or legal advice that may be required to support an investigation.
 6. Conduct investigations in a timely manner. The scope and timeframe for an investigation may differ depending on the Disclosure being examined.
 7. Seek to provide the Discloser with updates if and when an investigation is commenced, during the investigation, as appropriate, and on the completion of any such investigation.
6. Caregivers must -
1. Cooperate fully with any investigations.

SJGHC Actions Resulting From An Investigation

1. SJGHC will -
 1. Document, report and communicate investigation findings in a suitable manner which is dependent on the nature of the report.
 2. Undertake the following actions depending on the outcome of the investigation:
 - **Reportable Conduct proven:** Where a Disclosed Reportable Conduct is proven through sufficient and reliable evidence, SJGHC will take appropriate action which may include but is not limited to terminating or suspending the employment or engagement of the individuals involved. Any outcome will be determined at the discretion of SJGHC.
 - **Reportable Conduct not proven but there is some doubt:** Where an investigation into a Disclosed Reportable Conduct is inconclusive, further ongoing investigation may be required. A report will be prepared by the IO and the PDO may decide upon further steps.
 - **Reportable Conduct is not proven:** Where an investigation into Disclosed Reportable Conduct is not proven, all information and records will be handled and kept confidentially by the PDO and an assessment will be

made if the allegation was vexatious and further action considered as appropriate.

3. Provide the Discloser an update, including the outcome of any investigation, where appropriate, if the Discloser has provided contact details or is otherwise contactable through the external whistleblowing hotline service. The timing of updates, and level of detail provided, will depend on the nature of the Disclosure and the circumstances. It is possible in some cases that it may not be appropriate to provide details of the investigation or outcome to the Discloser.

Fair Treatment of Individuals Mentioned in a Disclosure

1. SJGHC will -
 1. Treat fairly and objectively any individual who is mentioned in a report;
 2. Keep confidential the identity of an individual being investigated, to the extent practicable; and
 3. Provide the Discloser access to support services such as counselling.
2. SJGHC may advise any individual who is the subject of a Disclosure about the subject matter of the Disclosure as and when required by principles of natural justice and procedural fairness and prior to any actions being taken. The appropriate timing of informing the individual is at the discretion of SJGHC. They will be given an opportunity to respond.

BREACH OF POLICY

This policy will be accessible from the SJGHC website CORA and on the SJGHC website. Failure to comply with this Policy by a member of SJGHC may be considered a breach of the Code of Conduct and may result in disciplinary action.

LEGISLATION

Corporations Act 2001 (Cth)
Corporation Act Regulations
Taxation Administration Act 1953 (Cth)

AUTHORITY

[SJGHC Code of Conduct](#)

ASSOCIATED DOCUMENTS

[MN0009 Ethics Policy](#)
[WF IR0008 Grievance Policy](#)
[WF IR0009 Workplace Investigations Policy](#)
[WF IR0013 Misconduct Policy](#)
[WF IR0014 Performance Management Policy](#)
[GO GRC02 Fraud and Corruption Control Plan Framework](#)

AUTHORITY

SJGHC Code of Conduct

GLOSSARY

Caregiver

A caregiver may be one or a multiple of the following-

- SJGHC Caregivers (all employed personnel);
- Contractors: a third party service provider that is an individual or an entity that is contracted to provide goods and or services to St John of God Health Care Inc as specified under the terms of a contract (this includes agency staff) A SJGHC Caregiver is not a contractor.
- Visiting Medical Officers;
- Students and volunteers;
- Diocesan Catholic Chaplains and representatives of other faiths.

Collectively referred to as "caregivers"

Detriment

Under the s1317ADA of the Corporations Act, detriment includes (without limitation):

- a. dismissal of an employee;
- b. injury of an employee in his or her employment;
- c. alteration of an employee's position or duties to his or her disadvantage;
- d. discrimination between an employee and other employees of the same employer;
- e. harassment or intimidation of a person;
- f. harm or injury to a person, including psychological harm;
- g. damage to a person's property;
- h. damage to a person's reputation;
- i. damage to a person's business or financial position;
- j. any other damage to a person.

Discloser

An individual who discloses wrongdoing or an eligible whistleblower.

Disclosure

A report of complaint about Reportable Conduct.

Eligible Recipient

An individual who can receive a disclosure.

Investigation Officer

A position nominated by SJGHC to investigate the substance of any Disclosure regarding Reportable Conduct, likely being a caregiver within Workforce or Legal.

Personal Work Related Grievance

A grievance about any matter in relation to the Discloser's employment, or former employment, having (or tending to have) implications for the Discloser personally. This may include:

- a. An interpersonal conflict between the Discloser and another employee;
- b. A decision relating to the engagement, transfer or promotion of the Discloser;
- c. A decision relating to the terms and conditions of engagement of the Discloser; or
- d. A decision to suspend or terminate the engagement of the Discloser, or otherwise to discipline the Discloser.

Protected Disclosure

A report of complaint about Reportable Conduct to which the whistleblower protections apply.

Protected Disclosure Officer

A position nominated by SJGHC to be a point of referral for any instances of Reportable Conduct, being the Group Director Legal, Risk & Compliance.

Reportable Conduct

Conduct or behaviour that concerns misconduct or an improper state of affairs or circumstances of SJGHC, including conduct or behaviour that is reasonably believed to be:

- a. Dishonest, fraudulent or corrupt.
- b. Illegal, such as theft, dealing in, or use or improper use of illicit / prescription drugs, violence or threatened violence and criminal damage against property, harassment, intimidation or other suspected breaches of state or federal law.
- c. Offering or accepting a bribe.
- d. Unethical or in breach of SJGHC's policies such as dishonestly altering company records or data, adopting questionable accounting practices or wilfully breaching SJGHC's Code of Conduct or other policies or procedures.
- e. A danger to the public.

Whistleblower

A Discloser who has made a disclosure that qualifies for protection under the Corporations Act.

Whistleblower Protection Officer

A position nominated by SJGHC to provide, or arrange to provide, support and protection to whistleblowers to prevent or manage confidentiality breaches and victimisation, being the Group Director Workforce.

REVIEW FREQUENCY

This policy is reviewed at least once every two years.

SJGHC will provide information and/or instruction on any changes made as a result.

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Approval Signatures

Step Description

Approver

Date