

1 Introduction

1.1 Purpose

The purpose of this policy is to establish procedures which apply to handling disclosures of information that:

- meet the definition of reportable conduct (as defined) and
- where the person disclosing the information wishes to avail themselves of protection against victimisation for making, or attempting to make, the disclosure.

This policy should be read in conjunction with the Whistleblowers Protection Act 1993 (SA).

1.2 Scope

This Policy applies to all SAHMRI employees, contractors and other stakeholders.

If the misconduct is Research related, then staff members should refer to SAHMRI's **Responsible Conduct of Research Policy** for guidance.

1.3 Policy Statement

The South Australian Health and Medical Research Institute (SAHMRI) is committed to the highest standards of legal, ethical and moral behaviour.

SAHMRI's aim is to encourage staff to report any reportable conduct in good faith and in an environment free from victimisation so that the Board and Senior Management can adequately manage risk and cultural issues within SAHMRI

2 Definitions

Reportable Conduct - means conduct by a person or persons connected with SAHMRI, which, in the view of a person acting in good faith, is:

- Dishonest
- Fraudulent
- Corrupt
- Illegal (including theft, drug sale/use, violence or threatened violence and criminal damage against property)
- Bullying, harassing or intimidating
- In breach of Commonwealth or State legislation or local authority by-laws
- Unethical (either representing a breach of codes of conduct adopted by SAHMRI or generally)
- Other serious improper conduct
- An unsafe work-practice
- Any other conduct which may cause financial or non-financial loss to SAHMRI or be otherwise determined to the interest of the SAHMRI, including gross mismanagement.

Victimisation - includes injury, damage or loss, intimidation or harassment, discrimination, disadvantage or adverse treatment in relation to a person's employment, or threats or reprisal.

Whistleblower - means an adult person, who in good faith and whether anonymously or not, makes, attempts to make, or wishes to make a disclosure in connection with reportable conduct and wishes to avail themselves of protection against victimisation for having made the report.

Responsible Officer - at SAHMRI this is the Chief Operating Officer. The Responsible Officer confidentially receives disclosure of reportable conduct and determines the actions to be taken. If a



report is made that concerns or involves the Chief Operating Officer, the Executive Director will act or assign someone else as the Responsible Officer.

Contact Officer – is an employee trained to provide other employees with information and impartial support regarding issues of discrimination, harassment and bullying. They also provide clarification about the employer's policies and complaint procedures.

3 Responsibilities

It is the responsibility of the Responsible Officer to:

- provide general and impartial advice about this Policy for any person seeking whistleblower status
- receive and keep confidential all information and reports in relation to whistleblower concerns, assess whether the disclosure is reportable conduct information and refer all disclosures of reportable conduct information for investigation
- receive and keep confidential all information and reports in relation to complaints of breach of confidentiality or victimisation in connection with whistleblower disclosures and refer complaints for investigation
- ensure a response to the whistleblower where a disclosure is assessed not to be reportable conduct information
- ensure the identity of the whistleblower and the identity of the person(s) to whom a whistleblower's
 disclosure relates are not divulged without consent, except so far as may be necessary to ensure
 that the matters to which the information relates are properly assessed and investigated
- appoint an officer responsible for supporting the whistleblower and attending to matters relating to the whistleblower's welfare and protection, as required
- make arrangements, wherever practicable, for the whistleblower to be informed of the progress
 and outcome of the investigation into the matters to which their disclosure relates, subject to
 considerations of privacy of the persons who are the subjects of a whistleblower disclosure and
 customary practices of confidentiality.

It is the responsibility of the Contact Officer to:

- provide employees with assistance independent of supervisors and management
- · discuss issues of concern and outcomes being sought
- inform and explain the options available which might help to resolve the issue (including the advantages and disadvantages of each option)
- recommend actions to management to assist in the prevention or the termination of discrimination and harassment in the workplace
- act as a support person.

It is the responsibility of all persons connected with SAHMRI to:

- report any workplace concerns or reportable conduct
- protect and maintain the confidentiality of a person they know or suspect to be a whistleblower, or the subject of a whistleblower disclosure
- refrain from any activity that is, or could be perceived to be, victimisation of a person they know or suspect to be a whistleblower, or the subject of a whistleblower disclosure.



4 Policy Guidelines

4.1 General

By having effective procedures for receiving and investigating disclosures of reportable conduct from whistleblowers, SAHMRI aims to:

- encourage openness, transparency and accountability at all levels of the organisation
- deter incidences of misconduct and achieve more effective administration and management, including fiscal management, through the reporting of, for example, waste, or mismanagement of funds
- have a healthier and safer work environment, through reporting of unsafe practices and
- achieve good corporate governance and more effective legislative compliance.

SAHMRI is committed to taking all reasonable steps aimed at:

- keeping the identity of whistleblowers and persons who are the subject of whistleblower disclosures confidential; and
- respecting and protecting both whistleblowers and persons who are the subject of whistleblower disclosures from victimisation.

4.2 Whistleblower contact points

If possible, individuals should address issues with their supervisor or line manager.

Otherwise, a person may in confidence disclose reportable conduct to the:

- Responsible Officer
- Chief Financial Officer
- Executive Director or
- STOPline.

STOPline is SAHMRI's external service provider. Disclosures to STOPline can be made by telephone, post, email or online as per the details below.

Telephone: 1 300 30 45 50

Post: SAHMRI c/o STOPline. Locked Bag 8. HAWTHORNE VIC 3122

Email: sahmri@stopline.com.au
Online: http://sahmri.stoplinereport.com

If a disclosure is made to STOPline, STOPline will then refer the disclosure to the Executive Director or Chief Operating Officer or Chief Financial Officer (as appropriate) or further action in accordance with this policy.

All disclosures may be made anonymously.

4.3 Complaints of breach of confidentiality or victimisation in connection with a whistleblower's disclosure

Complaints about a breach of confidentiality or victimisation in connection with a whistleblower's disclosure, or attempted disclosure of reportable conduct, may be lodged with the Responsible Officer or any of the contacts listed in section 4.2 of this policy.

Complaints of breaches of confidentiality or victimisation in connection with a whistleblower's disclosure will be investigated as a separate matter in accordance with principles of natural justice and following any relevant SAHMRI disciplinary policy and procedures.

A whistleblower, or the subject of a whistleblower's disclosure, who considers that he or she is the subject of victimisation is entitled to seek independent legal advice.



4.4 Investigation

Please refer to the flowchart attached as Appendix 1 – Process for Reportable Conduct.

All disclosures of reportable conduct will be treated seriously and be the subject of a thorough investigation with the objective of locating evidence that either substantiates or refutes the claims/allegations made by the whistleblower. Investigations are to be undertaken by the Responsible Officer who may seek additional resources (eg legal advice) to ensure the matter is properly and fairly investigated.

In accordance with principles of natural justice, person(s) who are the subject of a disclosure of reportable conduct by a whistleblower will be informed of the allegation(s) against them and given the right to respond.

Whistleblowers will receive feedback as to the progress and outcome of any investigation.

At the end of the investigation, the Responsible Officer will report their findings to the Executive Director (ED) to determine the appropriate response. This response will include addressing any unacceptable conduct and taking remedial action required to prevent any future occurrences of the same misconduct.

All investigation outcomes will also be reported to the Audit, Finance and Risk Committee.

Where issues of discipline arise the response will be in line with SAHMRI's **Performance Management and Misconduct Policy**. 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.

Where an investigation shows that a SAHMRI staff member purporting to be a whistleblower has made a false report of reportable conduct knowing it to be false or being reckless about whether it is false, the staff member concerned may be subject to disciplinary action.

5 Associated Documents

5.1 External

Whistleblowers Protection Act 1993 (SA)

5.2 Internal

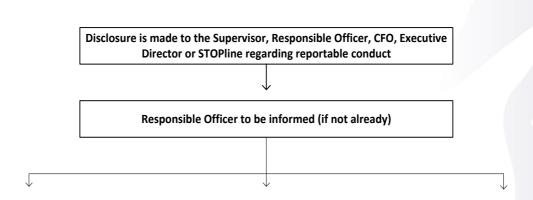
- Code of Conduct Policy
- Equality in Employment Policy
- Fraud and Corruption Policy
- Performance Management and Misconduct Policy
- · Responsible Conduct of Research Policy
- Work Health and Safety Policy
- Workplace Complaints and Grievances Policy

Policy WHISTLEBLOWER POLICY



APPENDIX 1: PROCESS FOR REPORTABLE CONDUCT

The flowchart below outlines the process SAHMRI will adhere to for addressing disclosures of reportable conduct. For the process related to addressing research misconduct, please refer to the Research Misconduct Flowchart on the SAHMRI website.



If the disclosure is regarding fraud or corruption

The Responsible Officer refers the matter to the appropriate external body

The Responsible Officer reports the findings of the investigation to the Executive Director and Audit, Finance and Risk Committee

The Responsible Officer reports the findings to the CFO for the inclusion in the annual report

The outcomes are reported to the individual who initially reported the fraud or corruption

If the disclosure is regarding other reportable conduct

The Responsible Officer investigates the report

The Responsible Officer reports the findings of the investigation to the Executive Director

The Executive Director determines the appropriate response

The Executive Director reports the outcomes to the Audit Finance and Risk Committee

If the report is related to research misconduct

The Responsible Officer informs the Director, Research and Biomedical Services and the process outlined in the Research Misconduct Flowchart is followed.