TARGET AUDIENCE

All St Mary's House of Welcome (SMHOW) representatives (as defined) - staff, contractors, volunteers and other support workers.

PURPOSE & SCOPE

The purpose of this policy is to:

- encourage the reporting of matters that may cause harm to individuals or financial or non-financial loss to SMHOW or damage to its reputation;
- enable SMHOW to deal with reports from whistleblowers in a way that will protect the identity of the whistleblower and provide for the secure storage of the information provided;
- establish the policies for protecting whistleblowers against reprisal by any person internal or external to the entity;
- provide for the appropriate infrastructure;
- help to ensure SMHOW maintains the highest standards of ethical behaviour and integrity.

ABOUT ST MARY'S HOUSE OF WELCOME

Mission Statement

Inspired by the spirit of the Daughters of Charity, St Mary's House of Welcome seeks to further Social Justice by standing with disadvantaged people offering support, solutions and hope.

Values

Respect | Relationships | Welcoming | Hopefulness | Responsiveness

<u>Vision</u>

St. Mary's House of Welcome will be universally acknowledged as a professional, cost efficient and effective organisation providing relevant services to the homeless and disadvantaged in accordance with the Vincentian Spirit.

Leading practice, effective partnerships, industry connectedness, secure public and private funding and the pursuit of opportunities to establish satellite services will be operating hallmarks.

St. Mary's House of Welcome will be seen as a voice for its clients, a fearless advocate for their rights with a commitment to empowerment and restoring independence.

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Approved by: Board

DEFINITIONS

Representatives: A collective term used within this policy to refer to employees, contractors, consultants and volunteers (including Board of Directors, co-opted Board sub-committee members, students and people on work experience).

Whistleblower: A whistleblower is a person (being a director, manager, employee or contractor of SMHOW) who, whether anonymously or not, makes, attempts to make or wishes to make a report in connection with reportable conduct and wishes to avail themselves of protection against reprisal for having made the report.

This Policy supports the reporting of allegations of serious wrongdoing ("**Reportable Conduct**") by SMHOW, SMHOW personnel or SMHOW's independent auditors. Reportable Conduct includes, but is not limited to the following:

- dishonest, corrupt or illegal activities;
- theft, fraud, money laundering or misappropriation;
- a serious breach of the Group's policies and procedures;
- offering or accepting a bribe;
- use of Group funds or Group resources in a manner that falls within the scope of Reportable Conduct;
- damage/sabotage, violence, drug & alcohol sale/use;
- risks to the health and safety of workers;
- unethical conduct;
- bullying, discrimination, harassment or abuse;
- victimising someone for reporting Reportable Conduct;
- recrimination against someone because they participated in an investigation or review;
- any instruction to cover up or attempt to cover up serious wrongdoing.

This Policy extends to serious wrongdoing that occurs before or after the commencement of this Policy, and is not limited to the above examples.

Breaches of general law, organisational policy, or generally recognised principles of ethics include:

- corrupt conduct
- fraud or theft
- official misconduct
- maladministration
- harassment or unlawful discrimination
- serious and substantial waste of public resources
- practices endangering the health or safety of the staff, volunteers, or the general public
- practices endangering the environment.

Complaints regarding occupational health and safety should where possible be made through the organisation's occupational health and safety procedures.

POLICY

The Board of SMHOW is committed to operating legally (in accordance with applicable legislation and regulation), properly (in accordance with organisational policy and procedures), and ethically (in accordance with recognised ethical principles).

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Employees are expected to cooperate with the organisation in maintaining legal, proper, and ethical operations, if necessary by reporting non-compliant actions by other people. Correspondingly, employees who do assist in maintaining legal, proper, and ethical operations should not be penalised in any way.

Concerns regarding improper or unethical behaviour

Where an employee of SMHOW believes in good faith on reasonable grounds that any other employee, volunteer, or contractor has breached any provision of the organisation's constitution, or its bylaws, or its policies, or its code of conduct, or generally recognised principles of ethics, that employee may report their concern to

- their supervisor: or, if they feel that their supervisor may be complicit in the breach,
- the CEO: or, if they feel that the CEO may be complicit in the breach,
- a person or office independent of the organisation nominated by the organisation to receive such information.

The person making their concern known shall not suffer any sanctions from the organisation on account of their actions in this regard provided that their actions

- are in good faith, and
- are based on reasonable grounds, and
- conform to the designated procedures.

Any person within the organisation to whom such a disclosure is made shall

- if they believe the behaviour complained of to be unquestionably trivial or fanciful, dismiss the allegation and notify the person making the allegation of their decision;
- if they believe the behaviour complained of to be neither trivial nor fanciful, ensure that the allegation is investigated, a finding is made, and the person making the allegation is informed of the finding.

Any such investigation shall observe the rules of natural justice and the provisions of procedural fairness.

Disclosures may be made anonymously, and this anonymity shall as far as possible be preserved by the organisation.

Concerns regarding illegal or corrupt behaviour

Where an employee of SMHOW believes in good faith on reasonable grounds that any other employee, volunteer, or contractor has breached any provision of the general law that employee must report their concern to

- their supervisor: or, if they feel that their supervisor may be complicit in the breach,
- the CEO: or, if they feel that the CEO may be complicit in the breach,
- the organisation's nominated the Whistleblower Protection Officer; or, if they feel this to be necessary,
- a person or office independent of the organisation nominated by the organisation to receive such information, or
- the duly constituted authorities responsible for the enforcement of the law in the relevant area.

The person making their concern known shall not suffer any sanctions from the organisation on account of their actions in this regard provided that their actions

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- are in good faith, and
- are based on reasonable grounds, and
- conform to the designated procedures.

Any person within the organisation to whom such a disclosure is made shall

- if they believe the behaviour complained of to be unquestionably trivial or fanciful, dismiss the allegation and notify the person making the allegation of their decision;
- if they believe the behaviour complained of to be neither trivial nor fanciful, ensure that the allegation is investigated, a finding is made, and the person making the allegation is informed of the finding.

Any such investigation shall observe the rules of natural justice and the provisions of procedural fairness.

Disclosures may be made anonymously, and this anonymity shall as far as possible be preserved by the organisation.

RESPONSIBILITIES

The organisation's **Board** is responsible for adopting this policy, and for nominating the organisation's Whistleblower Protection Officer.

The organisation's **CEO** is responsible for the implementation of this policy.

All staff and all volunteers are responsible for reporting breaches of general law, organisational policy, or generally recognised principles of ethics to a person authorised to take action on such breaches.

PROCEDURE

External reporting entities

The Board may nominate external persons to whom or agencies to which disclosures may be made under the protections offered under this policy. Where such a nomination is made, staff and volunteers should be informed by any appropriate method.

Reporting

Where an employee of SMHOW believes in good faith on reasonable grounds that any other employee, volunteer, or contractor has breached general law, organisational policy, or generally recognised principles of ethics, that employee must report their concern to

- their supervisor: or, if they feel that their supervisor may be complicit in the breach,
- the CEO: or, if they feel that the CEO may be complicit in the breach,
- the organisation's nominated Whistleblower Protection Officer, or
- a person or office independent of the organisation nominated by the organisation to receive such information, that person or office being the CEO/HR Coordinator; or (where a breach of general law is alleged)
- the duly constituted legal authorities responsible for the enforcement of the law in the relevant area.

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These procedures do not authorise any employee to inform commercial media or social media of their concern, and do not offer protection to any employee who does so, unless

- it is not feasible for employees to report internally, or
- existing reporting channels have failed to deal with issues effectively.

Any person reporting such a breach should be informed that

- as far as lies in the organisation's power, the employee will not be disadvantaged for the act of making such a report; and
- if the complainant wishes to make their complaint anonymously, their wish shall be honoured except insofar as it may be overridden by due process of law; however,
- reporting such a breach does not necessarily absolve the complainant from the consequences of any involvement on their own part in the misconduct complained of.

Any such report should where possible be in writing and should contain, as appropriate, details of

- the nature of the alleged breach;
- the person or persons responsible for the breach;
- the facts on which the complainants' belief that a breach has occurred, and has been committed by the person named, are founded;
- the nature and whereabouts of any further evidence that would substantiate the complainant's allegations, if known.

Evidence to support such concerns should be brought forward at this time if it exists. The absence of such evidence will be taken into account in subsequent consideration of whether to open an investigation into the matter. However, absence of such evidence is not an absolute bar to the activation of the organisation's investigative procedures. The existence of such a concern is sufficient to trigger reporting responsibilities.

In contemplating the use of this policy a person should consider whether the matter of concern may be more appropriately raised under either the organisation's grievance procedures or its disputes resolution policy.

Anonymity

If the complainant wishes to make their complaint anonymously, their wish shall be honoured except insofar as it may be overridden by due process of law.

The complainant should, however, be informed that the maintenance of such anonymity may make it less likely that the alleged breach can be substantiated in any subsequent investigation.

Where anonymity has been requested the complainant is required to maintain confidentiality regarding the issue on their own account and to refrain from discussing the matter with any unauthorized persons.

Investigation

On receiving a report of a breach, the person to whom the disclosure is made shall

- if they believe the behaviour complained of to be unquestionably trivial or fanciful, dismiss the allegation and notify the person making the allegation of their decision
- if they believe the behaviour complained of to be neither trivial nor fanciful, put in motion the investigation process described below.

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The person to whom the disclosure was made shall notify the CEO, who shall be responsible for ensuring that an investigation of the charges is established and adequately resourced.

Terms of reference for the investigation will be drawn up, in consultation with the CEO, to clarify the key issues to be investigated.

An investigation plan will be developed to ensure all relevant questions are addressed, the scale of the investigation is in proportion to the seriousness of the allegation(s) and sufficient resources are allocated.

Strict security will be maintained during the investigative process.

All information obtained will be properly secured to prevent unauthorised access.

All relevant witnesses will be interviewed and documents examined.

Contemporaneous notes of all discussions, phone calls and interviews will be made.

Where possible, interviews will be taped.

The principles of procedural fairness (natural justice) will be observed. In particular, where adverse comment about a person is likely to be included in a report, the person affected will be given an opportunity to comment beforehand and any comments will be considered before the report is finalised.

The person or persons conducting the investigation shall be as far as possible unbiased.

Findings

A report will be prepared when an investigation is complete. This report will include

- the allegations
- a statement of all relevant findings of fact and the evidence relied upon in reaching any conclusions
- the conclusions reached (including the damage caused, if any, and the impact on the organisation and other affected parties) and their basis
- recommendations based on those conclusions to address any wrongdoing identified and any other matters arising during the investigation.

The report will be provided to the person making the allegation (with, if necessary, any applicable confidentiality stipulations).

Protection of Informant

Where the investigation has found that the person making the allegation made it in good faith on reasonable grounds, the CEO shall designate an officer to be responsible for ensuring that the person suffers no employment-related disadvantage on account of their actions in this matter and to provide additional support for the person where necessary.

MONITORING AND COMPLIANCE REVIEW

This document is to be reviewed, every three (3) years by the Committee to ensure it remains consistent with the Committees' authority, objectives and responsibilities.

All amendments to the Policy will be discussed and approved by the Board.

A copy of the Policy is available at S:\Document Management\Executive Leadership Team (ELT)\Policy review

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2019\NEW_SMHOW_POLICY_LIBRARY\Governance Policies\Approved for final updates

AUTHORS

- Robina Bradley, CEO
- Approved by Governance Committee 26 September 2019

REFERENCE

Reference to relevant Legislation, Guidelines, Australian Standards, Codes of Practice, Best Practice and other literature. Publications dates should be within last five years where possible.

- Enhancing Whistleblower Protections Act 2019

LINKS TO FURTHER INFORMATION

- Disputes Resolution Policy
- Confidentiality Policy

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Board

CODE OF CONDUCT ACKNOWLEDGEMENT

I acknowledge that:

- I have read, understood and will comply with the SMHOW Code of Conduct;
- I have resolved any questions or concerns about the content of the code with my direct manager or People and Culture representative prior to signing this document;
- I have a responsibility to immediately report any breach of this code to my manager or other relevant manager;
- SMHOW reserves the right to vary this Code of Conduct at its discretion at any time. It may also be varied to take into account any changes to the law.
- I have received the support I require to understand this document and its intent

Signature:			
Name:			
Position:			
Date:			

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