

NQPHN Procedure

Title:	Whistleblower Protection Procedure	Doc ref.:	CORP-PR47	Version:	2
Category:	CORP	Owner:	Executive Director Business Services	Authoriser:	Chief Executive Officer

1. Purpose

Whistleblowers help maintain and implement Northern Queensland Primary Health Network's (NQPHN's) values and integrity. This procedure aims to encourage employees to disclose wrongdoings with confidence that NQPHN will protect them.

The procedure aims to provide a clear explanation to employees and others on how to make disclosure so that they can be protected and receive the support they need.

This procedure supports the *Whistleblower Protection Policy* and NQPHN's commitment to adhering to its statutory obligations, rules, and values.

The Whistleblower Protection Policy and Procedure should be read in conjunction and are available on NQPHN's website.

2. Terms and definitions

Term	Definition
Board of Directors (Board)	The Board of Directors are jointly responsible for the activities of the organisation. The Board's membership can be found on NQPHN's website.
Contractors	Individuals or businesses that provide services to NQPHN, who are not employed by NQPHN. Contractors usually negotiate their own fees and working arrangements and can work for more than one client. Contractors are also referred to as independent contractors or subcontractors.
Whistleblower	An individual who makes a disclosure relating to a breach of internal rules or Disclosable Conduct under this Policy. A whistleblower may request protection in terms of this Policy.
Employees	Individuals hired to provide a service to NQPHN, either on a permanent or fixed-term full or part time basis, in exchange for payment.



NQPHN acknowledges the Aboriginal and Torres Strait Islander peoples as Australia's First Nation Peoples and the Traditional Custodians of this land. We respect their continued connection to land and sea, country, kin, and community. We also pay our respect to their Elders past, present, and emerging as the custodians of knowledge and lore.



ISO 9001
QUALITY



3. Scope

This procedure applies to all NQPHN Board Directors and employees. It also applies to the individuals, organisations, and their employees, who supply services or goods (whether paid or unpaid) to NQPHN. This includes current and former contractors and consultants, service providers, and business partners.

4. Reporting disclosable conduct

Every individual in the Organisation has a role and responsibility in ensuring the Organisation is run ethically and in accordance with its internal rules and policies. Where matters relate to breaches of internal rules or policies or Disclosable Conduct are identified, they should be raised as soon as possible. In instances where a person has concerns about making a report, reports can be made anonymously.

4.1 Who can report a matter?

As outlined in the scope of this procedure, all board directors, employees, and contractors are an essential part of reporting matters to the Organisation. It is not acceptable to 'walk past' or 'turn a blind eye' to reportable matters.

If you become aware of a matter, you should raise it as soon as practical with the people responsible for handling matters, as outlined below. Raising a matter early allows it to be addressed in the right way by an appropriate individual. You should not attempt to conduct any investigation yourself before raising the matter as this could interfere with any future actions or, in rare cases, could put your safety at risk.

If you have fears for your wellbeing, safety, or a fear of reprisal as a result of raising a matter, you should mention these at the time you report the matter. You will be noted by the Organisation as a Discloser, and afforded the protections outlined under the Whistleblower Protection Policy and Procedure, and where eligible legislative disclosure requirements are met, protected under the provisions of the *Fair Work (Registered Organisations) Act 2009*.

4.2 Who can receive a disclosure?

Sometimes a suspicion of wrongdoing may arise from a misunderstanding and is not in fact wrongdoing. Accordingly, you are encouraged to check with your line manager or relevant executive to seek an immediate response as internal channels of reporting are favoured. In some instances, communication is restrained by confidentiality requirements or other legitimate reasons. However, where you believe the response to your matter raised is not appropriate, then alternative reporting mechanisms are available, as outlined below.

If you do not wish to raise the matter with your line manager or relevant executive, you should consider raising the matter with the People and Culture team so they can assist you in relation to your matter.

4.3 Whistleblower hotline (YourCall)

In cases where you do not feel safe to discuss your concern using any of the internal reporting channels, and you wish to be protected by the organisation as a part of raising your matter, you can make a report to NQPHN's independent external whistleblowing service, YourCall. The YourCall whistleblowing service can be accessed by the following means:

- by calling 1300 790 228
- reporting your concern online at <https://nqphn.relyplatform.com/report>

A disclosure can be made to YourCall outside of business hours. Former employees can also make a disclosure to YourCall.

Additional information before making a disclosure can be found on the YourCall website or by making an appointment with your manager/supervisor.

Protected disclosure can also be made to:

- a legal practitioner for the purpose of seeking legal advice or representation regarding the disclosure
- other regulatory bodies such as Australian Securities and Investments Commission (ASIC).

More information on how to make disclosure to these bodies is available on their websites.

4.4 How to make a disclosure

If you have exhausted the above-mentioned internal reporting channels and still wish to make a disclosure, you should contact YourCall in the first instance. You are encouraged to make a disclosure.

A disclosure can be made anonymously. However, sufficient information may be required for YourCall to determine whether the person is eligible to make a disclosure.

You can make a disclosure even if it is not possible to identify a particular individual to which the information regarding the wrongdoing or misconduct relates.

You must provide YourCall with details of the conduct you believe is a disclosable matter and nominate an effective method for YourCall to contact you.

YourCall will provide you with regular contact throughout the investigation process.

4.4.1 Public interest and emergency disclosure

Public interest and emergency disclosure can only be made in certain circumstances to journalists and members of Commonwealth, state, or territory parliaments.

Employees are strongly encouraged to contact an independent legal adviser before making public interest and emergency disclosure.

4.4.2 Confidentiality and anonymity

NQPHN will ensure and strive to protect the confidentiality and anonymity of the individual making disclosure.

All information received from you by YourCall is confidential and all reasonable steps will be taken to protect that information. Any confidential information relating to your identity or disclosure will only be shared if:

- you give your consent to disclose that information
- the disclosure is permitted or required by law.

Unless the above exceptions apply, it is illegal for another person to identify a discloser or disclose information that is likely to lead to the identification of the discloser.

You can choose to remain anonymous throughout the whole investigation of the matter and you can refuse to answer any questions which could reveal your identity.

You should contact YourCall immediately any time you believe that your anonymity has been compromised. YourCall will review any suspicions or evidence you have in relation this.

4.4.3 Review of disclosure

YourCall will decide on your eligibility for whistleblower protection in the first instance, followed by the eligibility of the disclosure. This may require a preliminary review of the matter and may not be possible at the first contact. You will be advised of the outcome of this preliminary review.

This preliminary review may lead to an investigation of the matter.

YourCall will advise the Chief Executive Officer (CEO) of the nature of the disclosure and recommend a process of investigation.

If the disclosure relates to the CEO, YourCall will instead advise the Chair of the Board, who will perform the role otherwise assigned to CEO under this policy and the associated procedure.

The CEO will decide whether to engage other staff as required to assist in the process.

The CEO will create a confidential, hard copy file to record the details provided by YourCall and all matters relevant to any subsequent investigation. Only the CEO will have access to this file which will be stored in a secure place, not on the organisation's computer system.

In considering an investigation process the CEO may consider:

- the nature and scope of the investigation
- who shall conduct the investigation, and whether they should be internal or external
- the nature of any technical, financial, or legal advice that may be required
- a period for the investigation (having regard for the level of risk to the organisation).

The investigation process may include, but not be limited to:

- appointment of an investigator
- an audit or examination of company records (e.g., financial, contractual, communication)

- witness evidence
- surveillance.

The CEO will assess the risk of the identity of the individual who made the disclosure becoming known and take steps in the proposed investigation process to mitigate those risks. The identity of the discloser could inadvertently be made known by:

- referencing a personal identification by a trait such as gender
- revealing the nature of the information disclosed in circumstances where the information would only be known to a limited number of individuals
- the role or position of the discloser, if there are a small number of people that fit that description.

If it is necessary to advise individuals of the investigation. Such individuals will be forewarned of the obligations of NQPHN and its employees to maintain confidentiality and the significant penalties that apply for failing to protect an individual who made disclosure from victimisations.

The CEO will report findings of the investigation to the Chair of the Board and make recommendations to redress the matters raised.

The CEO will advise you of the outcome of the investigation when NQPHN has redressed the matters in the disclosure.

4.4.4 Company representative

The Chair of the Board will authorise the investigation process proposed by the CEO and will assist in investigating the report.

The Chair of the Board will receive the report from the CEO and action any recommendations from the report.

4.5 Legal protections for disclosures

This refers to the *Corporations Act 2001 (Cth), part 9.4AAA*.

There are certain protections provided to persons who make a genuine disclosure:

- identity protection (confidentiality)
- protection from detrimental acts or omissions
- compensation and remedies
- civil, criminal, and administrative liability protection
- a discloser can still qualify for protection even if their disclosure turns out to be incorrect.

4.6 Support and practical protection for disclosures


- NQPHN will ensure that the protection of the confidentiality of a discloser's identity and protect disclosers from detrimental acts or omissions.
- If you report a disclosable matter in good faith, you will not be the subject of disciplinary action, unfavourable treatment, or victimisation, even if the disclosure is discovered to be incorrect.

Victimisation of persons who make disclosure is prohibited. This includes action such as:

- termination of employment
- harassment, bullying, or intimidation
- unlawful discrimination
- harm or injury, including psychological harm.

If you feel victimised, you should inform the CEO or the Chair of the Board immediately.

5. Management approval

Authorised by:	Chief Executive Officer – Ben Tooth	Signed:	
Date:	25 February 2025	Review Date:	February 2027

6. ISO 9001:2015 requirements

Clause 7: Support

7.5 Documented information

7.5.1 General

7.5.2 Creating and updating

7.5.3 Control of documented information

7.5.3.1 Documented information shall be controlled

7.5.3.2 For the control of documented information

Clause 9: Performance evaluation

9.1 Monitoring, measurement, analysis, and evaluation

9.1.1 General

9.3 Management review

9.3.1 General

9.3.2 Management review inputs

9.3.3 Management review outputs

Clause 10: Improvement

10.1 General

10.2 Nonconformity and corrective action

10.2.2 The organisation shall retain documented information

10.3 Continual improvement