



WHISTLEBLOWER POLICY

Topic:	Whistleblower Policy
Responsible:	Governance
Approved by:	TSH Board
Review Date:	3 years from policy approval date or as and when required

1. AIM AND OBJECTIVE

The Board of TSH is committed to operating legally, properly and ethically in accordance with applicable legislation, regulations, TSH policies and procedures and recognised ethical principles.

This policy is to provide a confidential process and service, to all Board members, employees, contractors, suppliers (including suppliers' employees), associates, tenderers and customers of TSH, and relatives or dependents of any of the foregoing. It offers an avenue for reporting concerns about the business or individual's behaviour. This can include suspicion of violations of TSH's policies and procedures, human rights, safety, environmental, financial reporting, fraud or business integrity issues or any type of corporate or tax misconduct in general.

TSH is committed to a culture of transparency and encourages employees, contractors and other stakeholders to speak up about their issues and concerns, either through management, human resources and other functions or via this whistleblowing policy.

All people are encouraged to raise a concern that could prevent a potentially serious situation from impacting on TSH and others.

A copy of this policy will be made available to all employees.

2. PURPOSE

The purpose of this policy is to:

- a) encourage the reporting of matters that may cause harm to individuals, or financial or non-financial loss to TSH, damage to its reputation or present a risk of harm or danger to public health or safety or to the financial system generally;
- b) enable TSH 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;
- c) establish the policies for protecting whistleblowers against reprisal by any person internal or external to the entity;
- d) provide for the appropriate infrastructure; and
- e) help to ensure TSH maintains the highest standards of ethical behaviour and integrity.

3. SCOPE and APPLICATION

This policy applies to all Board members, employees, contractors, suppliers (including suppliers' employees), associates, tenderers and customers of TSH, and relatives or dependents of any of the foregoing. The Board shall review and amend this policy as required.



WHISTLEBLOWER POLICY

4. RELATED LEGISLATION

The Privacy Act 1988 (Cth)

Public Interest Disclosure Act 2003 (WA)

Corporations Act 2001 (Cth)

5. DEFINITIONS

Breaches may include breaches of general law, TSH policies or procedures, or generally recognised principles of ethics including:

- corrupt conduct
- fraud or theft
- official misconduct
- serious and substantial waste of public resources
- any corporate or tax misconduct


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

Disclosing Whistleblower is a person (being a Board member, employee, contractor, supplier (including supplier's employees), associate, tenderer and customer of TSH, and relative or dependent of any of the foregoing) 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.

Disclosure Officer means the person appointed by the TSH Board to receive, investigate and report on allegations pertaining to Reportable Conduct as outlined in section 11.

Reportable Conduct may include conduct which:

- can be considered a Breach (as defined in this policy);
- is dishonest, fraudulent or corrupt activity, including bribery or similar activity;
- is illegal activity (such as theft, drug sale or use, violence, harassment or intimidation, criminal damage to property or other breaches of state or federal law);
- is unethical or in breach of TSH's policies (such as dishonestly altering company records or data, adopting questionable accounting practices or wilfully breaching TSH's Code of Conduct or other policies or procedures);
- amounts to an abuse of authority;
- may cause financial loss to TSH or damage its reputation or be otherwise detrimental to TSH's interests;
- involves any other kind of serious impropriety
- presents a risk of harm or danger to public health or safety or to the financial system.

Reportable Conduct does not include personal work-related grievances. These are grievances which relate to a current or former employee's employment that have implications for only that person and do not have broader implications for TSH. Such matters should be raised directly with managers or through the Grievance  Process.



WHISTLEBLOWER POLICY

6. POLICY

Where a Disclosing Whistleblower believes on reasonable grounds that any TSH Board member, director, employee, volunteer, supplier, associate, tenderer or contractor has engaged in conduct that may be Reportable Conduct that whistleblower should report their concern to:

- the relevant 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;
- TSH's nominated Disclosure Officer; or, if they feel this to be necessary;
- the duly constituted authorities responsible for the enforcement of the law in the relevant area.

The Disclosing Whistleblower shall not suffer any sanctions by TSH on account of their actions in this regard provided that they have reasonable grounds to believe the Reportable Conduct has occurred or is occurring.

Any person within TSH to whom such a disclosure is made shall:

- if they believe that the conduct complained of is not Reportable Conduct notify the Disclosing Whistleblower of their decision;
- if they believe the behaviour complained of would, if found to be true, constitute Reportable Conduct ensure that the allegation is investigated, a finding is made, and the Disclosing Whistleblower 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 TSH.

7. ANONYMITY

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

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

8. PROTECTION OF WHISTLEBLOWERS

Where the Disclosing Whistleblower has made a disclosure on reasonable grounds, the CEO or Disclosure Officer (as appropriate) shall designate an officer to be responsible for ensuring that the Disclosing Whistleblower is protected from any employment-related disadvantage or reprisals on account of the disclosure and to provide additional support for the whistleblower where necessary.

In the event a Disclosing Whistleblower suffers a detriment as a result of a disclosure they may also have a right to other legal protections and redress, including compensation, injunctions or an apology.

9. PROTECTION OF FILES AND RECORDS

All files and records created from an investigation will be retained under strict security. Unauthorised release of information to someone not involved in the investigation (other than senior managers or directors who need to know to take appropriate action, or for corporate governance purposes) without the consent of the Disclosing Whistleblower will be a breach of this policy.

Disclosing Whistleblowers are assured that a release of information in breach of this policy will be regarded as a serious matter and will be dealt with under TSH's disciplinary procedures.



WHISTLEBLOWER POLICY

10. REPORTING PROCESSES

The CEO or Disclosure Officer (as appropriate) will report to the Legal and Governance Committee on the number and type of whistleblower incident reports annually, to enable TSH to address any issues. These reports will be made on a 'no names' basis, maintaining the confidentiality of matters raised under this policy.

The Legal and Governance Committee will receive copies of all whistleblower reports. In addition, serious and/or material Reportable Conduct will be considered by the Disclosure Officer for immediate referral to the Chair of the Legal and Governance Committee.

11. DISCLOSURE OFFICER

Any person may make a report to the Disclosure Officer:

TSH Company Secretary:

Peter Marcakis Email: whistleblower@tsh.org.au

Reports may also be made by post, marked Private and Confidential to:

c/- Disclosure Officer
Telethon Speech and Hearing Ltd
PO Box 186
Wembley WA 6913.

A report may be submitted anonymously if the whistleblower does not wish to disclose their identity to the Disclosure Officer.

If the appointed Disclosure Officer may be subject to a complaint, the Chair of the Board will appoint an external person or office to act as the Disclosure Officer.



WHISTLEBLOWER POLICY

PROCEDURE

Where a person reasonably believes that any TSH Board member, employee, volunteer, supplier, associate, tenderer customer or contractor has engaged in Reportable Conduct, that person should disclose their concern to any one of the following:

- the relevant supervisor
- the CEO;
- TSH's nominated Disclosure Officer; or
- a person or office independent of TSH nominated by the TSH to receive such a disclosure, that person or office as appointed by the Chair of the Board;
- (where a breach of general law is alleged) or the duly constituted legal authorities responsible for the enforcement of the law in the relevant area;

These procedures do not authorise any person to disclose their concerns to commercial media or social media, and do not offer protection to any employee who does so, unless:

- it is not feasible for employees to disclose internally,
- all other relevant disclosure channels have failed to deal with issues effectively; and
- the matter involves an "emergency disclosure", where it is perceived that there is an imminent risk of serious harm or danger to public health or safety or to the financial system.

Any whistleblower disclosing such a breach should be informed that:

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

Any such disclosure 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 Disclosing Whistleblower's belief that a breach has occurred, and has been committed by the person or persons named, are founded;
- the nature and whereabouts of any further evidence that would substantiate the Disclosing Whistleblower's disclosure, if known.

Evidence to support such disclosures should be brought forward 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 TSH's investigative procedures. The existence of such a disclosure is sufficient to trigger reporting responsibilities.

In contemplating the use of this policy, a Disclosing Whistleblower should consider whether the conduct constitutes Reportable Conduct or if disclosure may be more appropriately raised under either TSH's grievance procedures or its disputes resolution policy.



WHISTLEBLOWER POLICY

INVESTIGATION

On receiving the disclosure, the person to whom the disclosure is made shall:

- if they believe that the conduct complained of is not Reportable Conduct notify the Disclosing Whistleblower of their decision;
- if they believe the behaviour would, if found to be true, constitute Reportable Conduct put in motion the investigation process described below.

The person to whom the disclosure is made shall notify the Disclosing Whistleblower that the disclosure has been received and will advise the whistleblower that an investigation will be commenced immediately.

The person to whom the disclosure was made shall notify the CEO or Disclosure Officer (as appropriate), who shall be responsible for ensuring that an investigation of the disclosure is established and adequately resourced.

Terms of reference for the investigation will be drawn up, in consultation with the CEO or Disclosure Officer (as appropriate), 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.

An investigation will be conducted in an objective and fair manner, and otherwise as is reasonable and appropriate having regard to the nature of the Reportable Conduct and the circumstances.

The investigation will be carried out as soon as reasonably practicable after the matter has been reported.

FINDINGS

A report will be prepared as soon as is reasonably practicable following the completion of the investigation. 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 TSH and other affected parties) and their basis; and
- recommendations based on those conclusions to address any wrongdoing identified and any other matters arising during the investigation.

The outcome of the investigation will be provided to the Disclosing Whistleblower (having regards for any applicable confidentiality issues).

A copy of this report will be provided to the Legal and Governance Committee of the TSH Board as per the policy.

Findings may be provided by TSH to the relevant authority(s) in accordance with any applicable legislation.

WHISTLEBLOWER POLICY

VERSION CONTROL

Effective Date	31 August 2017	Review Date:	31 August 2020	Version 1	
Effective Date	30 August 2018	Review Date	31 August 2021	Version 2	Revised for legislative changes/amendments
Effective Date	31 August 2021	Review Date	August 2023	Version 3	General revision
Effective Date	31 August 2023	Review Date			