

E – Corporate and clinical governance

Policy E10 (8(c)(vi)(W))

Whistleblower Policy

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1. Purpose

Bethany Christian Care is committed to upholding the highest standards of integrity, transparency, and accountability. This policy encourages the reporting of actual or suspected misconduct, wrongdoing, or breaches of law, and ensures individuals who disclose such matters can do so safely, securely, and with confidence that they will be protected and supported.

2. Policy and principles

a) Who this policy applies to

Any person who discloses or reports actual or suspected misconduct, wrongdoing or breaches of the *Corporations Act 2001 (Cth)* and the *Aged Care Act 2024 (Cth)* (“**the Acts**”).

In the rest of this document a person who makes a disclosure is called a “**Whistleblower**”

b) Matters this policy applies to

A “**Disclosable Matter**” is a concern or reasonable suspicion that someone has breached, is breaching, or is about to breach a provision of the Acts. Such concerns need to be in relation to misconduct or an improper state of affairs.

Disclosable Matters include, but are not limited to:

- Illegal conduct, such as theft, dealing in illicit drugs, using illicit drugs, violence or threatened violence, or criminal damage against property;
- Fraud, money laundering, or misappropriation of funds;
- Offering or accepting a bribe;
- Financial irregularities;
- Breaches of regulatory requirements;
- A significant risk to public safety; and
- Engaging in or threatening to engage in detrimental conduct against a person who has made a disclosure or is believed or suspected to have made (or be planning to make) a disclosure.

Note that these Disclosable Matters include conduct that may not involve a contravention of a particular law.

c) Matters this policy does not apply to

This policy does not apply to disclosures that relate solely to:

- An isolated compliance breach that does not amount to misconduct and does not indicate a systemic issue. This should instead be reported through a feedback form.
- A failure by a staff member to meet the personal expectations of a resident or their supporters, where the failure does not also constitute misconduct. This should instead be reported through a feedback form.
- Personal work-related grievances, that do not relate to detriment or threat of detriment to the Whistleblower, including:
 - An interpersonal conflict between the Whistleblower and another employee;
 - A decision that does not involve a breach of workplace laws;
 - A decision about the engagement, transfer or promotion of the Whistleblower;
 - A decision about the terms and conditions of engagement of the Whistleblower; and
 - A decision to suspend or terminate the engagement of the Whistleblower, or otherwise to discipline the Whistleblower.

However, a personal work-related grievance may still qualify for protection if:

- It includes information about misconduct, or information about misconduct includes or is accompanied by a personal work-related grievance (mixed report);
- It relates to a breach of employment or other laws punishable by imprisonment for a period of 12 months or more, or conduct that represents a danger to the public, or the disclosure relates to information that suggests misconduct beyond the Whistleblower's personal circumstances;
- The Whistleblower suffers from or is threatened with detriment for making a disclosure; or
- The Whistleblower seeks legal advice or legal representation about the operation of the whistleblower protections under the Acts.

For personal work-related grievances please see Bethany Christian Care's *Procedure K-25 (7-22) Staff Grievances*.

d) Who can receive a disclosure within Bethany Christian Care

A disclosure that qualifies for Whistleblower protections may be made to:

- Bethany Christian Care, as a registered provider of funded aged care services.
- A responsible person of Bethany Christian Care, such as:
 - A member of the Board.
 - A member of the Executive Leadership Team.
 - A Clinical Manager.
- A worker of Bethany Christian Care, that is an employee, contractor (including agency staff), volunteer or student.

For details on how to make a disclosure within Bethany Christian Care, refer to section f).

e) Who can receive a disclosure externally and public disclosure

Whistleblowers should first seek to make a disclosure internally. However, a disclosure that qualifies for Whistleblower protections may be made to:

- A police officer.
- An independent aged care advocate.
- The Aged Care Quality and Safety Commissioner, Complaints Commissioner of the Aged Care Quality and Safety Commission (ACQSC) or their staff.
- The Secretary of the Department, or an official of the Department of Health, Disability and Ageing.

- To the ACQSC, Australia Prudential Regulation Authority (APRA), Australian Securities and Investments Commission (ASIC), or another Commonwealth body prescribed by regulation.
- To a journalist or parliamentarian under certain circumstances - called either a 'public interest disclosure' or an 'emergency disclosure'. It is important to understand the criteria for making a public interest or emergency disclosure.
 - A disclosure must have previously been made to ASIC, APRA or a prescribed body and written notice provided to the body to which the disclosure was made.
 - In the case of a public interest disclosure, at least 90 days must have passed since the previous disclosure.
 - You should contact an independent legal adviser before making a public interest disclosure or an emergency disclosure.

f) How to make a disclosure

In the first instance, prior to action under this policy, a Whistleblower is encouraged to follow normal reporting channels and discuss the matter with their immediate supervisor or manager or complete a feedback form.

If:

- The nature of the matter is such that it is not appropriate to report through normal channels, or
- The Whistleblower has a reasonable concern about doing so, or
- The matter has been previously reported under normal channels, but the Whistleblower believes no appropriate action has been taken,

the Whistleblower can report a disclosure by:

- Telephone:
 - *Head Office*: (07) 3737 5080.
Ask to talk to any member of the Executive Leadership Team (ELT).
The ELT comprises of the:
 - Chief Executive Officer (CEO)
 - Executive Clinical Manager
 - People Manager
 - Finance Manager
 - Physical Assets Manager
 - Systems and Processes Manager
 - Chaplaincy and Wellbeing Manager
 - *The Plains*: (07) 3737 5000
Ask to talk to the Clinical Manager.
 - *Janoah Gardens*: (07) 3348 4700
Ask to talk to the Clinical Manager.
- Email: whistle.blower@bethanycc.org.au
This goes to the Board via the Chairman of the Board. It is also copied to the CEO, and other members of the ELT.
- Mail: 333 Underwood Road, Eight Mile Plains QLD 4113

A disclosure can also be made to any worker of Bethany Christian Care. A worker who receives a disclosure from a Whistleblower must immediately verbally inform a member of the ELT or a Clinical Manager (in person or by phone).

g) What to include in a disclosure

A Whistleblower should ensure as far as they are able that their disclosure report is factually accurate, complete, based on first-hand knowledge, without material omission and presented in an unbiased fashion.

The report should be as detailed as practicable and seek to include (but not be limited to):

- The exact nature of the alleged misconduct believed to have occurred;
- When and where the alleged misconduct took place, if known;
- Who was involved in the alleged misconduct; and
- Any witnesses who may know information that is relevant to investigating the alleged misconduct.

h) Anonymous disclosure

Disclosures can be made anonymously and still be protected under the Acts. However, anonymous reports have significant limitations that may inhibit a proper and appropriate inquiry or investigation. These limitations include the inability to provide feedback on the outcome or to gather additional particulars to assist the inquiry/investigation.

See section j) concerning protecting the confidentiality of a Whistleblower's identity. In the first instance.

i) Legal protections for Whistleblowers

The protections under the Acts that are available to Whistleblowers who qualify for protection are:

- Identity protection (confidentiality);
- Protection from detrimental acts or omissions;
- Compensation and other remedies; and
- Civil, criminal and administrative liability protection.

A Whistleblower (or any other employee or person) can seek compensation and other remedies through the courts if:

- They suffer loss, damage or injury because of a disclosure; and
- Bethany Christian Care failed to take reasonable precautions and exercise due diligence to prevent the detrimental conduct.

In these circumstances Whistleblowers should seek independent legal advice.

The protections do not grant immunity for any misconduct a Whistleblower has engaged in that is revealed in their disclosure.

To ensure that all employees are treated fairly and resources are not wasted, protection is not available where the disclosure is:

- Trivial or vexatious in nature with no substance. This will be treated in the same manner as a false report and may itself constitute wrongdoing; or
- Unsubstantiated allegations which are found to have been made maliciously, or knowingly to be false. These will be viewed seriously and may be subject to disciplinary action that could include dismissal, termination of service or cessation of a service or client relationship.

j) Support and practical protection for Whistleblowers

Bethany Christian Care will seek to support Whistleblowers and protect them from detriment. To do this Bethany Christian Care may implement the following measures for protecting Whistleblowers from detriment (where applicable):

- Processes for assessing the risk of detriment against a Whistleblower which will commence as soon as possible after receiving a disclosure;
- Support services (including counselling) that are available to Whistleblowers;
- Strategies to help a Whistleblower minimise and manage stress, time or performance impacts, or other challenges resulting from the disclosure or its investigation;
- Actions for protecting a Whistleblower from risk of detriment (for example, allow the Whistleblower to perform their duties from another location);
- Processes for ensuring that management are aware of their responsibilities to maintain the confidentiality of a disclosure, address the risks of isolation or harassment, manage conflicts, and ensure fairness when managing the performance of, or taking other management action relating to, a Whistleblower; and
- Interventions for protecting a Whistleblower if detriment has already occurred (for example, investigate and address the detrimental conduct, such as by taking disciplinary action, or allow the Whistleblower to take extended leave).

Bethany Christian Care may also implement the following measures for protecting the confidentiality of a Whistleblower's identity (where applicable):

- All personal information or reference to the Whistleblower witnessing an event will be redacted;
- The Whistleblower will be referred to in a gender-neutral context;
- Where possible, the Whistleblower will be contacted to help identify certain aspects of their disclosure that could inadvertently identify them;
- Disclosures will be handled and investigated by qualified staff;
- All paper and electronic documents and other materials relating to disclosures will be stored securely;
- Access to all information relating to a disclosure will be limited to those directly involved in managing and investigating the disclosure;
- Only a restricted number of people who are directly involved in handling and investigating a disclosure will be made aware of a Whistleblower's identity (subject to the Whistleblower's consent) or information that is likely to lead to the identification of the Whistleblower;
- Communications and documents relating to the investigation of a disclosure will not to be sent to an email address or to a printer that can be accessed by other staff; and
- Each person who is involved in handling and investigating a disclosure will be reminded about the confidentiality requirements, including that an unauthorised disclosure of a Whistleblower's identity may be a criminal offence.

k) Handling and investigating a disclosure

Bethany Christian care considers that investigation of a disclosure needs to be objective, fair and independent, while preserving the confidentiality of the investigation. To ensure fairness and independence, the investigation needs to be independent of the Whistleblower, the individuals who are the subject of the disclosure, and the department or business unit involved.

We may undertake the investigation jointly with an external investigation firm, if required (e.g. when additional specialist skills or expertise are necessary).

The investigation of a disclosure follows the steps and timeframes set out in *Procedure I-01 Feedback and Complaints*, with the inclusion of:

- An assessment of whether a disclosure qualifies for Whistleblower protections, and
- Consideration of the protections for Whistleblower disclosures, as set out in this policy.

- Documentation of the findings of any investigation, that is reported to the CEO and Board.

The Whistleblower and any others involved in the disclosure will be provided with regular updates and advised of the outcome of the investigation.

l) Ensuring fair treatment of individuals mentioned in a disclosure

Bethany Christian Care will ensure the fair treatment of its employees who are mentioned in a disclosure that qualifies for protection, including those who are the subject of a disclosure. To do this Bethany Christian Care may implement the following measures to ensure fair treatment of such employees (where applicable):

- An employee who is the subject of a disclosure will be advised 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—for example, if the disclosure will be the subject of an investigation;
- Disclosures will be handled confidentially, when it is practical and appropriate in the circumstances;
- Each disclosure will be assessed and may be the subject of an investigation;
- The objective of an investigation is to determine whether there is enough evidence to substantiate or refute the matters reported; and
- When an investigation needs to be undertaken, the process will be objective, fair and independent.

m) Ensuring this policy is accessible

This policy will be made available to Bethany Christian Care officers and workers by:

- Posting the policy in S:\1 - Bethany Christian Care\2 - Policies and Procedures along with our other policy documents in the folder “I Feedback and complaints management”;
- Emailing staff about the policy at least annually;
- Advising about the policy in the staff handbook;
- Advising about the policy during the sign-in process for volunteers and contractors; and
- Posting the policy on the Bethany Christian Care website.

This policy will be made available to Bethany Christian Care residents and supporters by:

- Advising about the policy during the admissions process;
- Advising about the policy in the resident handbook; and
- Posting the policy on the Bethany Christian Care website.

n) Failure to comply

Any breach of this policy may result in disciplinary action that could result in severance from Bethany Christian Care.

3. Legislative and regulatory context

- Aged Care Act 2024
- Corporations Act 2001 (Cth)
- Corporations Regulations 2001
- Outcome 2.2a - Quality, safety and inclusion culture to support aged care worker to deliver quality care
- Outcome 2.3 - Accountability, quality system and policies and procedures
- Outcome 2.6a - Complaints and feedback management for aged care workers
- Outcome 2.6b - Complaints and feedback management for individuals

- Privacy Act 1988 (Cth)

4. Roles and responsibilities

The Board

The Board has ultimate accountability for Bethany Christian Care's management of disclosures under its risk management and compliance responsibilities including ensuring matters contained in this policy are endorsed and clearly communicated. The Board ensures systems and processes for effectively managing disclosures are maintained and effective in driving continuous quality improvement. The Board is responsible for building an open and transparent culture where older people, their supporters, workers and visitors are encouraged, supported and feel safe to make disclosures.

The Executive Leadership Team (ELT)

The ELT is responsible for ensuring all workers and stakeholders are aware of this policy and understand how to report concerns. The ELT is responsible for fostering a culture where disclosures are encouraged, reported and investigated. This includes ensuring workers have the required skills to recognise and respond to disclosures that qualify for protection and when and how to escalate disclosures. The ELT is also responsible for monitoring compliance of this policy and related processes and identifying opportunities for improvement such as by reviewing and auditing records, training records and older people's documentation.

The ELT is responsible for reporting disclosures to the Board and where required, to external agencies.

All workers, including volunteers and contractors

All workers, including associated providers (i.e. contractors and agency staff), volunteers and students are required to comply with this Policy and act within their delegated level of authority.

5. Risk assessment and management

Risks related to this policy are identified, assessed and mitigated in line with *Policy G1 Risk Management*.

The following matrix sets out who is typically involved in this process for the risks associated with this policy:

Responsible	CEO
Accountable	CEO and Board
Consulted	<ul style="list-style-type: none"> • Executive Leadership Team • Clinical Management Team • Department Heads • Staff, where appropriate • Residents, where appropriate
Informed	<ul style="list-style-type: none"> • Volunteers • Contractors and Consultants • Other service providers

6. Expectation Statement for older people from related standard(s)

2: The organisation is well run. I can contribute to improvements to care and services. My provider and aged care workers listen and respond to my feedback and concerns. I receive funded aged care services from aged care workers who are knowledgeable, competent, capable and caring.

7. Outcome statement from related standard(s)

2.2a Quality, safety and inclusion culture to support aged care workers to deliver quality care: The governing body must lead a culture of quality, safety and inclusion that supports aged care workers to provide quality funded aged care services by focussing on continuous improvement, embracing diversity and prioritising the safety, health and wellbeing of aged care workers.

2.3 Accountability, quality system and policies and procedures: The governing body is accountable for the delivery of quality funded aged care services and must maintain oversight of all aspects of the provider's operations. The provider must use a quality system to enable and drive continuous improvement of the provider's delivery of funded aged care services. The provider must maintain current policies and procedures that guide the way aged care workers undertake their roles and require aged care workers to follow the policies and the procedures.

2.6a Complaints and feedback management for aged care workers: The provider must encourage and support aged care workers to make complaints and give feedback about the provider's delivery of funded aged care services, without reprisal. The provider must acknowledge and transparently manage all complaints and feedback and use complaints and feedback to contribute to the continuous improvement of funded aged care services.

2.6b Complaints and feedback management for individuals: The provider must encourage and support individuals and others to make complaints and give feedback about the provider's delivery of funded aged care services, without reprisal. The provider must acknowledge and transparently manage all complaints and feedback and use complaints and feedback to contribute to the continuous improvement of funded aged care services.

8. Actions from related standard(s)

Action 2.2.1

The governing body leads a positive culture of quality funded aged care services and continuous improvement and demonstrates that this culture exists within the organisation.

Action 2.3.2 b)

The provider implements a quality system that: b) sets out accountabilities and responsibilities for supporting quality funded aged care services, specific to different roles

Action 2.3.2 d) i)

The provider implements a quality system that: d) enables the governing body to monitor the organisation's performance in delivering quality funded aged care services, informed by: i) feedback from individuals, supporters of individuals and aged care workers delivering the funded aged care services

Action 2.3.2 d) ii)

The provider implements a quality system that: d) enables the governing body to monitor the organisation's performance in delivering quality funded aged care services, informed by: ii) analysis of risks, complaints and incidents (and their underlying causes)

Action 2.6a.2

The provider encourages and supports aged care workers to make complaints and give feedback including supporting access to advocates and services to support raising and resolving complaints and feedback.

Action 2.6ab.1

The provider implements a complaints and feedback management system to receive, record, respond to and report on complaints and feedback.

Action 2.6b.2

The provider encourages and supports individuals, supporters of individuals and others to make complaints and give feedback

Action 2.6b.3

Individuals are empowered to access advocates, language services and other ways of raising and resolving complaints and feedback

Bethany Christian Care fosters a positive culture of quality and continuous improvement by ensuring our Board actively champions transparency and accountability in whistleblower disclosures. All disclosures and feedback are recorded, responded to, and reported in line with our commitment to openness, integrity, and ongoing improvement. The steps for doing this are set out in *Procedure I-01 Feedback and Complaints*.