



Whistleblower Policy

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4.0	December 2025	December 2027	IPC Health Board	IPC Health Board

Review History

Version No.	Version Date	Summary of Changes	Author
1.0	October 2017	Initial draft	People and Culture
2.0	December 2019	Review in alignment with updated Legislation	Company Secretary
2.1	January 2020	Update: Who to make report to	CEO
3.0	March 2023	Update: <ul style="list-style-type: none"> • Policy / Procedures Reference • Definitions Included • title references • follow current IPC Health Policy Template 	EA to CEO Company Secretary ELT
4.0	December 2025	Review and alignment with updated legislation in reference to the Aged Care Act 2024 Periodic Review	GQR & Aged Care EA to CEO Company Secretary

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1. Target Audience

An IPC Health:

- a) officer or employee (e.g. current and former employees who are permanent, part-time, fixed-term or temporary, interns, secondees, Managers, Executive and Board Directors);
- b) supplier of services or goods to the entity (whether paid or unpaid), including their employees (e.g. current and former contractors, consultants, service providers and business partners);
- c) associate of the entity; and
- d) volunteers, students and governing body members
- e) relative, dependant or spouse of any individual in a) to c) above (e.g. relatives, dependants or spouse of current and former employees, contractors, consultants, service providers, suppliers and business partners).
- f) service users, their supporters, representatives, family members, carers and independent advocates

The protections in this Policy will apply to anyone who has made disclosure of the following information relating to IPC Health:

- a) a disclosure of information relating to a ‘Disclosable Matter’ directly to an ‘Eligible Recipient’ or to ASIC, ACNC or another Commonwealth body prescribed by regulation;
- b) a disclosure to a legal practitioner for the purpose of obtaining legal advice or legal representation in relation to Whistleblowing protection laws;
- c) a public interest or emergency disclosure. A public interest disclosure is protected if the discloser has made a report to ASIC, AHPRA or another Commonwealth body and after 90 days the person has reason to believe that no action has been taken in relation to the disclosure, they can make a disclosure to a Member of Parliament or a journalist. In the case of an emergency disclosure, the person must have reason to suspect that the information reported concerns a substantial and imminent danger to the health and safety of one or more persons;
- d) a disclosure qualifies for protection if the discloser has reasonable grounds to suspect a contravention of the Aged Care Act 2024 (Cth), and the disclosure is made orally or in writing, including anonymously – to any of the following:
 - an Appointed Commissioner or member of the Department of Health and Aged Care Quality and Safety Commission;
 - the System Governor or an official of the Department of Health and Aged Care;
 - a registered provider, a responsible person or WPO of a registered provider, or an aged-care worker of a registered provider;
 - a police officer; or
 - an independent aged-care advocate.

Disclaimer: IPC Health must comply with mandatory reporting requirements under the Child Wellbeing and Safety Act 2005 (Vic), Aged Care Act 2024 (Cth) and other relevant legislation.

2. Definitions

Anonymity	is when one’s identity is unknown. In the case of an anonymous Whistleblower, their identity is not known by anyone, including those who receive and investigate the Qualifying Disclosure.
Confidentiality	is when one’s identity is protected to prevent harm. In the case of a Whistleblower, their identity may be known to those receiving and investigating the Qualifying Disclosure, but their identity is protected from the broader organisation and public.

Detriment	any disadvantage, harm or adverse treatment including dismissal, demotion, discrimination, harassment, intimidation, injury, property damage, reputational harm, or threats of these.
Disclosable Matters	<p>Disclosable Matters include any conduct that involves:</p> <ul style="list-style-type: none"> • dishonest behaviour • fraudulent activity • unlawful, corrupt or irregular use of company funds or practices • illegal activities (including theft, dealing in or use of illicit drugs, violence or threatened violence and criminal damage against property) • unethical behaviour • improper or misleading accounting or financial reporting practices • a breach of any legislation relating to IPC Health’s operations or activities, including the Corporations Act 2001 (Cth) • behaviour that is oppressive, discriminatory or grossly negligent • an unsafe work practice • any behaviour that poses a serious risk to the health and safety of any person at the workplace • a serious risk to public health, public safety or the environment • 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 or • any other conduct which may cause loss to IPC Health or be otherwise detrimental to the interests of IPC Health.
Eligible Recipient	an eligible recipient is a person or body who is authorised to receive a public interest/protected disclosure, such as: Supervisor, General Manager.
Responsible Person	Member of the governing body or any person in a role designated as a responsible person by the organisation
Whistleblowing	the deliberate and voluntary reporting of actual, suspected or anticipated wrongdoing by an individual.
Whistleblower Discloser	someone with inside knowledge of an organisation who reports misconduct or dishonest or illegal activity that may have occurred within that organisation.
Whistleblower Protection Officer (WPO)	a designated senior role responsible for implementing this Policy, receiving and triaging disclosures, safeguarding disclosers, coordinating investigations and system improvements.
Wrongdoing	<p>any action or conduct that:</p> <ul style="list-style-type: none"> • is illegal or corrupt, such as theft, fraud or other misuse of IPC Health funds, equipment or other resources; • is unethical, such as dishonestly altering IPC Health records, engaging in questionable accounting practices; or wilfully breaching IPC Health’s Code of Conduct or other ethical standards; • constitutes an abuse of authority (where not an employment grievance); • constitutes a serious breach of safety; • causes or could cause any other serious harm to the public, a resident, client, employee or volunteer at IPC Health; • is damaging or has the potential to damage public trust in IPC Health or the reputation of IPC Health; • may cause financial loss or otherwise be detrimental to the interests of IPC Health; or • involves any other damaging conduct or serious impropriety including retaliatory action against a Whistleblower for having made a report of wrongdoing.

3. Policy Statement

IPC Health is purpose and values driven organisation 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). Our Whistleblower Policy (this “Policy”) has been put in place to ensure employees and other individuals who disclose wrongdoing (“Disclosers”) can safely raise concerns regarding any misconduct or improper state of affair or circumstances (including unethical, illegal, corrupt or other inappropriate conduct) without being subject to victimisation, harassment or discriminatory treatment.

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 IPC Health or damage to its reputation;
- b) help deter wrongdoing;
- c) ensure disclosures are dealt with on a timely basis and appropriately;
- d) provide transparency around IPC Health’s framework for the handling and investigation of complaints;
- e) enable IPC Health to deal with reports from Disclosers in a way that will protect the identity of the Disclosers and provide for the secure storage of the information provided;
- f) establish the policies for protecting Disclosers against reprisal by any person internal or external to the entity;
- g) provide for the appropriate infrastructure;
- h) help to ensure IPC Health maintains the highest standards of ethical behaviour and integrity.

4. Policy Principles

4.1 Matters the policy applies to:

Any matter that a Discloser has reasonable grounds to suspect is misconduct, a breach of law, an improper state of affairs or circumstances or a breach of IPC Health’s Policies should be reported in accordance with this Policy (“Disclosable Matter”).

Personal work-related grievances are not governed by this Policy and are not protected by the Whistleblower Laws.

Personal work-related grievances may include:

- An interpersonal conflict between the Discloser and another employee;
- A decision that does not involve a breach of workplace laws
- A decision relating to an employment, transfer or promotion of the Discloser;
- A decision about the terms and conditions of engagement of the Discloser;
- A decision to suspend or terminate employment of the Discloser, or otherwise to discipline the Discloser.

These should be raised with the Manager People and Culture.

4.2 Who to make a report to:

Where a Discloser has reasonable grounds to suspect that any other employee, volunteer, or contractor has engaged in misconduct or breached any provision of the general law, that person is strongly encouraged to report their concern to an Eligible Recipient outlined below:

- their Supervisor: or, if they feel that their supervisor may be complicit in the breach,
- the General Manager: or, if they feel that the General Manager may be complicit in the breach,
- the CEO: or, if they feel that the CEO may be complicit in the breach,

- the Chair of the Board, or if they feel that the Board may be complicit in the breach,
- IPC Health’s nominated Whistleblower Protection Officer; or, if not satisfied,
- the Company Secretary, who is independent of the organisation and has been nominated by the organisation to receive such information.

For disclosures made regarding illegal or corrupt behaviour, a person is strongly encouraged to report their concern to the duly constituted authorities responsible for the enforcement of the law in the relevant area such as ASIC or any prescribed Commonwealth authority.

4.3 Whistleblower Protection Officer (“WPO”)

IPC Health has nominated the CEO to act as a WPO who will receive reports of Disclosable Matters and take the appropriate action. The WPO will work to protect the interests of the Discloser and ensure that the process involved in the investigation is conducted properly. Once a concern is reported to the Eligible Recipient they will then forward the report to the WPO who will review and advise the Board on the action that should be taken. This could be either escalating the matter to the Whistleblower Investigation Officer or dismissing the claim if they believe it to be unquestionably trivial or vexatious.

4.4 Whistleblower Investigations Officer (“WIO”)

Once the WPO has determined that the report involves a Disclosable Matter, they will engage the General Manager People Governance and Community who will act as the WIO. They will carry out and supervise the investigation of the claim. If necessary the WIO can use an external investigator to conduct the investigation. The WPO and WIO are independent of each other and the responsibilities of these roles do not reside with one person.

Once a complaint is made, the WPO will be required to inform the Board Chair and at least 2 members of the Board in order to ensure that the Board are informed of developments, progress and outcome of the investigation.

4.5 Reports concerning the Executive, WPO or WIO

If a report involves the CEO or any member of the Executive, the WPO or the WIO, this will be directed to the Board Chair for investigation and further action. The Board Chair may, depending of the seriousness of the complaint elect to:

- Stand down the CEO or Executive and appoint temporary management who will perform all duties necessary in their absence;
- Convene a special meeting with the Board to consider the course of action. This may include delegating an investigating party;
- Undertake initial investigations and report back to the Board.

Should any of the officers named in this Policy encounter a conflict of interest situation relating to the alleged misconduct, he or she will so notify the Chair and recuse his or herself from taking further action relating to the investigation.

4.6 How to make a report

A report can be made verbally, in writing or by email Disclosure@ipchealth.com.au and it can be made at any time. The report must be addressed to the WPO or to any of the Eligible Recipients. It must include the grounds for reporting, supporting documentation and all relevant facts.

A person can also make an external report by using the visiting IPC Health website <https://www.ipchealth.com.au/our-policies/> and following the online links. This is a secure online platform operated by the WPO which will handle the report confidentially and without identification should the

Discloser wish to remain anonymous.

Disclosures may be made anonymously and confidentially, and this anonymity shall as far as possible be preserved by the Company. IPC Health will take certain measures to ensure this confidentiality such as communication through anonymous email addresses or the use of pseudonyms. If a person feels that answering certain questions will reveal their identity they can refuse to answer during follow-up conversations.

There must be reasonable grounds to suspect wrongdoing and therefore an allegation with no supporting information would be unlikely to qualify for protection. Notwithstanding, a Discloser does not need to prove their allegations. A Discloser can still avail of Whistleblower protection even if their allegation turns out to be false.

IPC Health encourages all persons to consider making an internal report in the first instance, as this will enable IPC Health to identify and address any wrongdoing as early as possible.

Any Eligible Recipient to whom such a disclosure is made shall

- if they believe the behaviour complained of to be unquestionably trivial or vexatious, dismiss the allegation and notify the person making the allegation of their decision;
- if they believe the behaviour complained of have substance, ensure that the allegation is investigated, a finding is made, and the person making the allegation is regularly updated regarding the investigation and informed of the finding.

4.7 Legal protection

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 based on reasonable grounds, and
- conform to the designated procedures.

A person who makes a disclosure is legally protected by the Corporations Act. This includes protection of identity, civil, criminal and administrative liability and protection from detriment in relation to a disclosure. A person will be entitled to seek compensation if the courts find IPC Health liable.

4.8 Support and practical protection:

The Company will offer support services to the Discloser as this can be a very difficult and challenging time. IPC Health will offer counselling service through the Employee Assistance Program in addition to a strategy plan to help the Discloser manage stress and conflict as a result of the disclosure.

4.9 Handling and investigation procedure:

Once it has been found that a disclosure qualifies for protection, a formal, in-depth investigation will begin. Factors such as the scope, time frame and external advice will all be considered during the investigation. The WIO can engage an external advisor for the purposes of the investigation and the timing of the process may vary depending on the nature of the complaint.

Oversight of the investigation will also be referred to the Board Governance, Nominations and Remuneration Committee once the WPO or Board Chair, has determined that a formal investigation is necessary. Such oversight will include receiving periodic reports on the progress of the investigation, including any recommendations from the investigators to expand the investigation or to make voluntary disclosures to the authorities.

Should the person making the complaint be unsatisfied with the outcome, they have the opportunity to review the decision by lodging a complaint with the regulator. The findings of the investigation will be documented and reported internally to those who have oversight at IPC Health and appropriate action will be taken.

IPC Health will ensure fair treatment of a person who has made a disclosure by safeguarding the anonymity of the person and assessing the evidence to support or refute the claim in an appropriate manner. Any such investigation shall observe the rules of natural justice and the provisions of procedural fairness.

4.10 Ensuring fair treatment of individuals mentioned

IPC Health will also support individuals whom an allegation has been made against by ensuring that they are informed of the allegation and offering a right to submit a response to the claim. They will also be informed of the outcome and any conclusions of the investigation

Any employee with questions about how this Policy should be followed in a particular case should contact their supervisor or any member of the Board.

4.11 Record Keeping and Retention of Whistleblower Disclosures

IPC Health will maintain accurate and secure records of all whistleblower disclosures, investigation reports, and related correspondence. These records will be stored in a manner that preserves confidentiality and complies with the Corporations Act 2001 (Cth) and applicable privacy laws.

4.12 Staff Training and Awareness

IPC Health will ensure all staff are aware of this Policy and their rights under the Corporations Act 2001 (Cth) through mandatory training and ongoing communication. The Policy will be accessible via the intranet, onboarding materials, and regular compliance updates to reinforce awareness across the organisation.

5. Associated frameworks, policies, procedures and guidelines

Appropriate Workplace Behaviour Policy
Child Safe Policy
Equal Opportunity Policy
Fraud and Corruption Policy

6. Associated legislation

Commonwealth legislation - [Corporations Act 2001](#)
Australia – [Public Interest Disclosure Act 2013](#)
Victoria – [Protected Disclosure Act 2012](#)
[Aged Care Act 2024](#)
[Aged Care Rules 2025](#)
Work Health and Safety Act 2011 (Cth)
Crimes Act 1985 (Vic)
Privacy Act 1988 (Cth)