

Whistleblower Policy

1 APPLICATION

- 1.1. This policy applies to all persons performing work at the direction of, in connection with, or on behalf of HMRI. This includes HMRI Directors, employees, representatives, affiliates, volunteers, and contractors.
- 1.2. To the extent that this policy relates to activities or conduct of non-employees of HMRI, the policy is intended to supplement and not alter any policy of the employer. In the event of any inconsistency between this policy and the policy of an individual's employer, the employer's policy should take precedence.

2 INTRODUCTION

- 2.1 HMRI aims to support a culture where people feel comfortable in raising concerns with the executive, supervisors and/or senior management, the Whistleblower Policy is an important tool in encouraging candid disclosure of such concerns.
- 2.2 The intention of this policy is to provide guidance and support to Whistleblowers who wish to raise a Protected Disclosure.

3 POLICY INTENT

- 3.1 The Whistleblower Policy provides a framework and process for receiving, handling, and investigating Protected Disclosures in a fair and timely manner.
- 3.2 This Policy sets out:
 - a. who can make a protected disclosure (Whistleblower);
 - b. the types of disclosures that qualify for protection (Protected Disclosure);
 - c. who can receive a Protected Disclosure (Eligible Recipients); and
 - d. the protections available to Whistleblowers.

4 SCOPE

- 4.1 HMRI is committed to:
 - a. high standards of ethical conduct and to promoting and supporting a culture of ethical behaviour and good governance;
 - b. the process by which any concerns raised under this policy are received and reviewed in an impartial, fair, objective manner;

- c. ensuring that it is informed of and properly considers any material reports made under this policy including the results of any investigation; and
- d. the protection and support of any person making a report under this policy.

4.2 HMRI is committed to ensuring Protected Disclosures can be made without fear of intimidation, disadvantage or reprisal, and protections will be given to Whistleblowers even where the Protected Disclosure is revealed to be incorrect or unsubstantiated.

WHO SHOULD REPORTS BE PROVIDED TO?

4.3 A Whistleblower may make a Protected Disclosure directly to:

- a. one of HMRI's Eligible Recipients being:
 - I. a Director of HMRI (including the Institute Director), or
 - II. the Chief Operating Officer, Head of Legal and Risk or Head of Human Resources,
- b. a legal practitioner, where the disclosure is made for the purposes of obtaining advice or representation in relation to the Whistleblower protections under the Corporations Act,
- c. ASIC or APRA or another Commonwealth body prescribed in the regulations;
- d. journalists and members of parliament under certain circumstances; or
- e. the authorities responsible for the enforcement of the law in the relevant area.

HOW SHOULD REPORTS BE MADE?

4.4 Reports to an Eligible Recipient can be made at any time and may disclose the identity of the Whistleblower or be made anonymously.

4.5 Reports should be made in writing and include specific details of:

- a. the nature of the conduct alleged;
- b. the person or people responsible for the alleged conduct;
- c. the nature and whereabouts of any further evidence that would substantiate the information in the Whistleblower's Report.

4.6 Reports (including anonymous reports) can be made by sending correspondence marked "Whistleblower report", directly to Eligible Recipients, through HMRI's reception [1, Kookaburra Circuit, New Lambton Height 2305] or by email to Whistleblower@hmri.org.au.

4.7 Anonymous Reports may provide an anonymous email or postal address, which enable HMRI to communicate with the Whistleblower.

FALSE REPORTING

4.8 HMRI encourages Whistleblowers to make Protected Disclosures on reasonable grounds and acknowledges that a Whistleblower can still qualify for protection even if their disclosure turns out to be incorrect. However, a deliberate false disclosure may

lead to the Whistleblower being the subject of disciplinary action which may include dismissal.

REPORTS THAT ARE NOT PROTECTED DISCLOSURES

- 4.9 Concerns relating solely to workplace grievances (bullying, harassment, or other inappropriate workplace behaviour) may not qualify for protection under the Corporations Act but can be raised under Human Resources processes including the Grievance Procedure which are subject to their own confidentiality and protection processes.
- 4.10 Concerns relating to the Research Code of Conduct may not qualify for protection under the Corporations Act, but can be made following the process set out under the Policy for Investigating and Managing Potential Breaches of the HMRI Researcher Code of Conduct which are subject to their own confidentiality and protection processes.

INVESTIGATION – KEY STEPS

- 4.11 HMRI will investigate any Protected Disclosure and report on findings in accordance with its Whistleblower procedures and relevant employment and Work Health and Safety processes.
- 4.12 Specifically, the steps taken by HMRI will include the following:
- a. a recipient of a report will acknowledge receipt;
 - b. the Eligible Recipient will notify and provide a report of issues raised to the Institute Director, Chair of the Audit & Risk Committee and/or Chair of the Board (as appropriate);
 - c. the Eligible Recipient will assess whether the report qualifies for protection and:
 - I. if not, notify the person who provided the report within 2 business days;
 - II. if so, appoint an investigator to carry out an independent, fair and confidential investigation of the Protected Disclosure in a timely manner. The investigator will provide the Whistleblower with regular updates and keep appropriate records of the investigation. The findings and recommendations will be communicated to the Whistleblower in writing within a reasonable time of completion of the investigation.

CONFIDENTIALITY AND IDENTITY PROTECTION

- 4.13 Where a Whistleblower has made a Protected Disclosure:
- a. it is illegal for a person to disclose the Whistleblower's identity, or to disclose information (obtained directly or indirectly) that is likely to lead to the identification of a Whistleblower;
 - b. the Whistleblower is protected from detrimental acts or omissions as a result of the disclosure;

- c. the Whistleblower may be entitled to compensation; and
- d. the Whistleblower may be protected from civil, criminal and administrative liability.

4.14 These protections are subject to the following exceptions:

- a. HMRI may disclose identifying information to:
 - I. ASIC, APRA, the Australian Federal Police, or any other relevant Commonwealth or state or territory authority;
 - II. a legal practitioner to obtain legal advice or legal representation in relation to the operation of the whistleblower provisions in the Corporations Act;
 - III. a person or body prescribed by regulations; or
- b. HMRI may disclose identifying information with the consent of the Whistleblower

HMRI MEASURES FOR PROTECTION AND SUPPORT

4.15 HMRI will take steps to protect Whistleblower's identity and interests, including by:

- a. following the confidentiality procedures set out in the Whistleblower Procedure;
- b. ensuring that all managers and Eligible Recipients are appropriately trained in responding to and protecting Whistleblowers;
- c. offering, where appropriate and indicated, an Employee Assistance Program or service; or
- d. implementing strategies and support to help the Whistleblower to minimise and manage stress, time or performance impacts, or other challenges resulting from the Protected Disclosure or the investigation, including allowing a Whistleblower workplace flexibility.

BREACH AND REMEDIES

4.16 Unauthorised disclosure of a Whistleblower's identity (or any information likely to lead to identification) or causing Detriment to a Whistleblower (or another person) in relation to a Protected Disclosure will be a breach of this policy and may also be an offence under Australian law.

4.17 A Whistleblower or other stakeholder may seek compensation or other remedies through the courts if:

- a. HMRI failed to take reasonable precautions and exercise due diligence to prevent detriment; and
- b. they suffer loss, damage or injury because of a Protected Disclosure.

4.18 HMRI encourages any person who believes that they may have suffered detriment or has a potential claim for compensation, to seek independent legal advice.

5 FAILURE TO COMPLY

- 5.1 HMRI employees may be subject to disciplinary action, up to, and including termination of employment or contract where it is established that they have breached this policy including by breaching confidentiality or disclosing a Whistleblower's identity.
- 5.2 Conduct by an HMRI Representative (who is not an employee) which is inconsistent with this policy may be referred to the person's employer for investigation and/or disciplinary action in accordance with the employer's policies and procedures and HMRI may end the relationship.

6 DEFINITIONS

Eligible Recipient has the meaning given in clause 4.3.

Protected Disclosure means a report made by a Whistleblower if:

- a) the Whistleblower has reasonable grounds to suspect that the information in the report concerns misconduct, or an improper state of affairs or circumstances, in relation to HMRI;
- b) they have reasonable grounds to suspect that the information indicates HMRI (or its related bodies corporate) including their employees or officers have engaged in conduct that:
 - (i) constitutes an offence against any law of the Commonwealth that is punishable by imprisonment for a period of 12 months or more;
 - (ii) represents a danger to the public or the financial system or is prescribed by regulation; or
 - (iii) is conduct which constitutes an offence against a provision of legislation including:
 - A. The Corporations Act (2001);
 - B. The Australian Securities and Investments Commission Act (2001); or
 - C. The Banking Act (1959).

Whistleblower is a person, being a current or former:

- a) officer or employee of HMRI;
 - b) supplier of services or goods to HMRI;
 - c) HMRI Affiliate; or
 - d) a relative, spouse or dependent of the persons listed above;
- who wishes to disclose, attempts to disclose, or discloses a Protected Disclosure following the process in this Policy.

RELATED DOCUMENTS

- HMRI Grievance Procedure
- HMRI Researcher Code of Conduct
- Whistleblower Procedure

VERSION CONTROL

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1 st June 2023 Board	07/06/23	17V1