



GMHBA Limited

GROUP WHISTLEBLOWER POLICY

Version 3.0

Dated: March 2020

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1. Introduction

GMHBA is committed to the highest standards of ethical conduct in the Group's activities and supports the reporting of suspected wrongdoing, or illegal, unacceptable or undesirable conduct, to contribute to a culture of continuous improvement.

2. Purpose

A "Discloser" under this policy can be anyone who is or has been:

- A director, officer or employee of a GMHBA Group entity;
- A contractor or subcontractor engaged by or on behalf of a GMHBA Group entity (including their employees);
- An employee of an outsourced provider;
- A consultant or supplier of goods or services to any GMHBA Group entity, or an employee of a supplier;
- A person working as a volunteer for a GMHBA Group entity;
- A relative, dependent, spouse or dependent of a spouse of any of the above.

This Policy sets out the avenues for Disclosers to report concerns of possible unethical, unlawful or undesirable conduct without fear of reprisal and with the support and protection of GMHBA. It also sets out the investigation process which GMHBA will follow on receipt of a disclosure of reportable conduct, and confirms GMHBA's commitment to act on and rectify any wrongdoing verified by the investigation to the extent practicable in all the circumstances.

3. Reportable Conduct

Matters which can be reported under this Policy include any of the following in relation to a GMHBA Group entity, or where the conduct is engaged in by an officer, employee, contractor or volunteer of any GMHBA Group entity. Please note that personal work related grievances are excluded from this Policy, and should be reported to People & Culture.

- Conduct or practices which are illegal or in breach of any law, regulation or code of conduct applying to GMHBA or any significant breach of a contract to which a GMHBA entity is a party;
- Suspected fraudulent or corrupt practices such as misappropriation of funds, bribery, undue influence, provision of false information;
- Continuing or regular breaches of GMHBA's policies or other rules of conduct;
- Situations within GMHBA's control that may present a significant risk to the health or safety of any person or a significant danger to the environment;
- Any action that may be in breach of the Corporations Act, the Australian Securities and Investment Commission Act 2001, or any other law that applies to the entity; and
- Any other misconduct or improper state of affairs or circumstances (including any improper state of affairs or circumstances in relation to the tax affairs of the entity) in relation to a GMBHA Group entity.

Personal workplace grievances should not be reported under this Policy, but should be reported to your line manager or People & Culture representative. A personal work related grievance is any matter in relation to the discloser's employment, or former employment, having (or tending to have) implications for the discloser personally. This includes:

- an interpersonal conflict between the discloser and another employee;
- a decision relating to the engagement, transfer or promotion of the discloser;
- a decision relating to the terms and conditions of engagement of the discloser; and
- a decision to suspend or terminate the engagement of the discloser, or otherwise to discipline the discloser.

However, it does not include:

- any conduct that would be considered victimisation of an individual because they have made, may have made, or propose to make a report under this Policy; or
- a matter that would have significant implications for any GMHBA Group entity.

4. Making a Report

Internal Report

Where an employee has a genuine concern that takes into consideration all the points detailed within this policy, the employee should initially report the matter to their executive manager or to People and Culture unless the complaint involves one of those people. Where this is not appropriate, and the employee does not feel comfortable raising the matter with their direct manager, or where an employee has made a report but no action has been taken within a reasonable time, a report can be made to GMHBA's external whistleblowing hotline, "FairCall".

Reports can be made to FairCall using any of the following methods

Communication Method	Contact Details
FairCall hotline	1800 500 965
FairCall drop-box	http://faircall.kpmg.com.au/
Email address	faircall@kpmg.com.au
Fax number	+61 2 9335 7466
Postal address	The FairCall Manager KPMG Forensic PO Box H67 Australia Square Sydney NSW 1213

Calls may be made to FairCall on business days between 8am and 7pm (AEST). Outside these times calls are diverted to a mobile phone. In the unlikely event that calls are not answered by the mobile, a voicemail service provides the ability to leave details and request a callback.

Calls where the actual report is made are not recorded. Only written notes are taken of these conversations.

FairCall operators are not associated with GMHBA. They are trained, experienced specialists dedicated to dealing with whistleblowers and their concerns.

Callers are provided with a confidential reference number by the FairCall operator who will prepare a FairCall report which details the disclosure as reported by the caller. If the caller wishes to remain anonymous, the caller's identity will not be included in this report.

All FairCall reports are immediately forwarded to GMHBA's Whistleblower Protection Officers (WPO) - the Risk Manager and the Compliance Manager. The WPO will make an initial assessment of the FairCall report and then engage the Chief Risk Officer, Chief Executive Officer and General Manager, Health, People & Community to consider what further action is appropriate. The Board's Risk & Compliance Committee will also be advised of any FairCall reports.

If a caller is concerned about a matter being raised with the WPOs or senior executives, they may request FairCall to send the report directly to the Chairman of the Risk & Compliance Committee.

Reporting to Eligible Recipients

If a Discloser prefers not to use any of the above reporting channels, a disclosure can be made to an "eligible recipient". Eligible recipients in relation to a GMHBA Group entity are:

- directors;
- officers;
- senior managers (defined as the Executive Group reporting to the CEO);
- auditors or member of an audit team conducting an audit;
- actuaries; and
- (only for tax related disclosures) a registered tax agent or BAS agent, or any other employee or officer who has functions or duties that relate to the tax affairs of the entity.

When a report is made to an eligible recipient:

- the report must be made in person or by telephone; and
- the Discloser should first inform the eligible recipient that they wish to make a report under this Policy.

An eligible recipient may direct the Discloser to make the report to the FairCall hotline, or to the WPO, if they consider it appropriate in the circumstances.

5. CONFIDENTIALITY

Reports of suspected wrongdoing may be submitted anonymously. However it may be difficult for GMHBA to properly investigate or take other action to address matters disclosed in anonymous reports. Should a person choose to disclose their identity at the time of submitting their report, their identity will be kept confidential and will not be publicly disclosed by GMHBA.

If the Discloser has not consented to the disclosure of their identity, the matter may be referred for investigation but the investigator will be required to take all reasonable steps to reduce the risk that the Discloser will be identified as a result of the investigation.

Information about a Discloser's identity may only be disclosed in the following circumstances:

- where the information is disclosed to ASIC, APRA or the Australian Federal Police;
- where the information is disclosed to a legal practitioner for the purpose of obtaining legal advice in relation to the operation of applicable whistleblowing protection laws; or
- where the Discloser consents.

Information that is likely to lead to the identification of the Discloser may be disclosed where:

- such information is needed for the reasonable investigation of the matter reported; and
- all reasonable steps are taken to avoid discovery of the Discloser's identity.

All documents, reports and records relating to the investigation of a report under this Policy will be confidentially stored and retained in an appropriate and secure manner.

6. Prohibition of Victimisation

No Discloser who has reasonable grounds to report a suspected wrongdoing shall suffer harassment, retaliation or adverse consequence as a result of making the report. Any person who retaliates against someone who has reported a suspected wrongdoing based on reasonable grounds will be subject to disciplinary action.

It is a breach of this Policy for any employee, officer, volunteer or contractor of a GMHBA Group entity to cause or threaten to cause any detriment to a Discloser because they have made, may have made, propose to make or could make a report under this Policy. Detriment includes:

- Dismissal from employment;
- Change of an employee's position or duties to his or her disadvantage;
- Discrimination between an employee and other employees;
- Harassment or intimidation of a person;
- Harm or injury to a person, including psychological harm;
- Damage to a person's property;
- Damage to a person's reputation;
- Damage to a person's business or financial position; and
- Any other damage to a person.

7. Investigation Process

Investigation processes will vary depending on the nature of the conduct being investigated. All investigations must be conducted in a manner that is fair and objective to all people involved. A report will not be investigated by someone who is implicated in the report.

The WPO is the designated representative for protecting the interest of whistleblowers and all reports, anonymous or otherwise, will be investigated in accordance with this Policy. The WPO will have access to independent financial, legal and operational advisers as required and, for serious allegations, will be assisted by a Steering Committee consisting of the CEO, Chief Risk Officer and General Manager, Health, People & Community. The Steering Committee is responsible for appointing a designated representative, known as the Whistleblower Investigation Officer (WIO).

The WIO is responsible for conducting preliminary investigations into reports received from a Discloser under this Policy. Where the WIO deems necessary, the WIO may use an external investigator to conduct an investigation, either in conjunction with the WIO or independently. The WIO may also use an external expert to assist with an investigation. All investigations will be conducted in a fair and independent manner and all reasonable efforts will be made to preserve confidentiality of an investigation.

To avoid jeopardising an investigation, a Discloser who has made a report under this Policy is required to keep confidential the fact that a report has been made (subject to any legal requirements).

Wherever possible, and if the identity of the Discloser is known, the Discloser will be kept informed of the progress and outcomes of the investigation, subject to privacy and confidentiality considerations.

8. Support and Protections for Disclosers

A Discloser will not be subject to any civil, criminal or disciplinary action for making a report that is covered by this Policy, or for participating in any subsequent investigation by a GMHBA Group entity.

All reasonable steps will be taken to ensure that a Discloser will not be subject to any form of detriment because they have made a report. However, this Policy will not protect the Discloser if they are also involved in or connected to the improper conduct or illegal activities that are the subject of a report.

Support available for Disclosers includes:

- connecting the Discloser with access to the Employee Assistance Program (EAP)
- appointing an independent support person from the People & Culture team to deal with any ongoing concerns they may have
- connecting the Discloser with third party support providers such as Lifeline (13 11 14) and Beyond Blue (1300 22 4636)

Use of these support services by a Discloser may require the Discloser to consent to disclosure of their identity or information that is likely to lead to the discovery of their identity.

9. Support for Persons Implicated

No action will be taken against employees or officers who are implicated in a report under this Policy until an investigation has determined whether any allegations against them are substantiated. However, an employee or officer who is implicated may be temporarily stood down on full pay whilst an investigation is in process, or may be temporarily transferred to another office, department or workplace, if appropriate in the circumstances. Any such stand-down or temporary transfer may only continue for the duration of the investigation. If the investigation determines that the allegations are not substantiated, the employee or officer must be immediately reinstated to full duties.

Any disclosures that implicate an employee or officer must be kept confidential, even if the Discloser has consented to the disclosure of their identity, and should only be disclosed to those persons who have a need to know the information for the proper performance of their functions under this Policy, or for the proper investigation of the report.

An employee or officer who is implicated in a disclosure has a right to be informed of the allegations against them, and must be given an opportunity to respond to those allegations and provide additional information, if relevant, in the course of an investigation into those allegations (subject to the Discloser's right to anonymity).

Support available for persons implicated in a report under this Policy includes:

- connecting the person with access to the Employee Assistance Program (EAP)
- appointing an independent support person from the People & Culture team to deal with any ongoing concerns they may have
- connecting the person with third party support providers such as Lifeline (13 11 14) and Beyond Blue (1300 22 4636).

10. General

It is a condition of any employment or engagement by GMHBA that all employees, officers and contractors must comply at all times with this Policy. However this Policy does not form part of any agreement between any person and any GMHBA Group company, nor does it constitute terms and conditions of any person's employment or engagement with a GMHBA Group company.

This policy will be made available to officers and employees of all GMHBA Group companies by making it accessible from the GMHBA external website and the intranet.

11. Related Documents

- Code of Conduct Policy

12. Policy Review

This Policy is initially approved by the Board and will be annually reviewed by the Risk & Compliance Committee.

Version Control

Version	Amendments	Owner	Date
1.0 (Reformatted)	Annual Review	General Manager, Health, People & Community	February 2019
2.0 Update	To reflect legislative change	General Manager, Health, People & Community	June 2019
3.0 Update	To reflect title change of Head of P&C role	General Manager, Health, People & Community	March 2020

Whistleblowing Process

