

Health Equity Matters Whistleblower Policy

Policy no: 050

Version 1

Approved on: 28 August 2025

Approved by: Health Equity Matters Board

1. Purpose

Health Equity Matters is committed to high standards of conduct and ethical behaviour in all of its activities.

This Whistleblower Policy (**Policy**) has been developed to encourage the disclosure of allegations of serious wrongdoing, and to ensure that individuals who make disclosures may do so confidentially and without fear of intimidation, ramifications or adverse consequences.

This Policy sets out:

- The kinds of disclosures that qualify for protection;
- The protections a person may have when making a disclosure that qualifies for protection; and
- How Health Equity Matters will receive, investigate and address disclosures made under this Policy.

2. Policy application

This Policy applies to all Health Equity Matters Board and Committees members, staff, volunteers, contractors and consultants (**Health Equity Matters Personnel**) and external Whistleblowers, including suppliers and their employees and relatives. It also applies to staff employed by the AFAO Foundation.

This Policy will be made available to Health Equity Matters Personnel via the intranet, and to the public on the Health Equity Matters website.

3. What disclosures are protected?

A disclosure will be protected (**Protected Disclosure**) under this Policy where:

- the individual making the disclosure is one of the persons set out in section 4;
- the disclosure relates to the type of conduct set out in Section 5; and
- the disclosure is made in accordance with the process set out in section 6.

4. Who may make a protected disclosure?

The following persons can make a disclosure that qualifies for protection under Australian Whistleblower Laws:

- an officer, employee or associate of Health Equity Matters and the AFAO Foundation;
- a supplier of goods or services to Health Equity Matters (whether paid or unpaid) or an employee of a supplier;
- an individual who previously held any of the above positions or functions; or
- a relative, dependent or spouse of the individuals set out above.

Such individuals are “Whistleblowers” where they make a Protected Disclosure in accordance with this Policy.

5. What may a protected disclosure be about?

A Whistleblower may make a disclosure under this Policy where they have reasonable grounds to suspect misconduct or an inappropriate state of affairs in relation to Health Equity Matters (termed **Reportable Conduct**).

Reportable Conduct could include, but is not limited to:

- dishonest, corrupt, fraudulent or unlawful conduct or practices, including bribery;
- financial irregularities;
- unfair, dishonest or unethical dealings with a third party;
- unethical or serious improper conduct including breaches of any legal or regulatory obligations;
- breaches of Health Equity Matters policies (such as the Safeguarding and Code of Conduct Policy), or engaging in misleading or deceptive conduct (especially in relation to accounting or financial reporting practices);
- any other serious impropriety; or
- any other conduct or act which causes (or has the potential to cause) loss or liability to Health Equity Matters, or which may otherwise be detrimental to Health Equity Matters interests.

Personal work-related grievances are outside the scope of this Policy and are managed in accordance with the Grievance Policy.

A separate Complaints Policy is available on the Health Equity Matters website. It applies to complaints made by external stakeholders regarding the organisation’s operations and personnel.

Complaints regarding child abuse and exploitation or sexual exploitation, abuse or harassment of an adult can be reported under this Policy and will be escalated immediately to the Health Equity Matters CEO. These matters will follow the Response and Reporting Guidelines described in the Safeguarding Policy.

6. Making a disclosure

Whistleblowers may make a disclosure of Reportable Conduct:

1. verbally or in writing to a Health Equity Matters Whistleblower Protection Officer; or
2. if for any reason the Whistleblower does not feel they are able to use the internal channels, using [the Stopline](#) service on the Health Equity Matters website. The Stopline is an independent, confidential whistleblower hotline and complaints reporting platform who will take full details of the complainant’s concerns via telephone, mail, email or

this website. This service enables individuals to maintain anonymity should they so desire. All complaints made via the Stopline service will be referred to Health Equity Matters' Whistleblower Protection Officers for follow-up.

A current list of the Whistleblower Protection Officers and their contact details is set out below:

Contacts	Name	Role	Contact Email
Contact point 1	Dash Heath-Paynter	CEO	CEO@healthequitymatters.org.au
Contact point 2	Mark Orr	President	President@healthequitymatters.org.au

Under the Australian Whistleblowing Laws, Whistleblowers may also make a report of Reportable Conduct to:

- the Australian Securities and Investments Commission (**ASIC**);
- the Australian Charities and Not-for-profits Commission (**ACNC**);
- the Australian Prudential Regulation Authority (**APRA**);
- in relation to Tax Disclosures, the Commissioner of Taxation (**ATO**); or
- any other prescribed Commonwealth authority or regulator.

However, if a whistleblowing disclosure is made to one of these regulators Health Equity Matters will not automatically become aware of that disclosure and therefore may not be able to respond to it in accordance with this Policy.

7. Confidentiality and Privacy

Health Equity Matters will not disclose a Whistleblower's identity or information likely to lead to their identification unless:

- the Whistleblower consents to the disclosure of their identity or identifying information;
- the disclosure of the Whistleblower's identity or identifying information is compelled or permitted by law; or
- the disclosure is made to ASIC, ACNC, APRA, ATO, Australian Federal Police (AFP).

Health Equity Matters takes contraventions of these protections very seriously and may take disciplinary action against anyone for doing so.

Where a Protected Disclosure is made anonymously through the Stopline service, Health Equity Matters will take all reasonable steps to ensure the process of addressing the disclosure does not lead to the Whistleblower being identified. A Whistleblower who wishes to remain anonymous may refuse to answer questions that they feel could reveal their identity at any time during an investigation or other disclosure-handling processes.

8. Investigation

Health Equity Matters will assess disclosures made under this Policy as soon as practicable.

In circumstances where a disclosure is made to a Whistleblower Protection Officer, the Whistleblower Protection Officer will endeavour to acknowledge the disclosure within 3 working days of its receipt.

The Whistleblower Protection Officer will determine whether sufficient information exists to enable the disclosure to be investigated, whether an investigation is required, and, if so, determine the appropriate investigation process, including:

- the nature and scope of the investigation;
- who will conduct the investigation and whether that person should be external to Health Equity Matters;
- the nature of any technical, financial or legal advice that may be required; and
- a timeframe for the investigation having regard to the circumstances.

Such a determination will be made promptly after receiving all relevant information, and ideally within 5 working days.

Where it is determined that an investigation is required, Health Equity Matters will take all reasonable steps to ensure that the relevant person or body conducting the investigation can conclude the investigation within 30 days from the initial review of the disclosure.

Where possible, the Whistleblower will be informed on a regular basis as to the nature and progress of any investigation. The frequency of updates may vary depending on the nature of the report.

Health Equity Matters will approach the investigation based on the approach determined in the initial review and with regard to the preferences of the Whistleblower (where they can be contacted) about how the matter is to be handled. This will include any person who is the subject of a disclosure having an opportunity to respond to the issues raised.

The person leading any investigation will report their findings to the Whistleblower Protection Officer and advise the recommended course of action (if any) that Health Equity Matters should take in response to the findings.

The Whistleblower Protection Officer will determine the action (if any) to be taken and may, if appropriate (subject to any applicable confidentiality, privacy or legal constraints), notify the Whistleblower of the conclusion of the investigation and the action taken. The communication may include recommendations to address any wrongdoing identified, and any other matters arising during the investigation.

All Protected Disclosures will ultimately be reported to the Audit and Risk Committee and subsequently the Board, either as part of the Complaints and Incidents Register or as standalone agenda items. The content or identify of Protected Disclosures may impact the level of reporting available.

9. Roles and Responsibilities

Who	Responsibility
President	<ul style="list-style-type: none"> • Provide a discrete point of contact for all whistleblowers who make disclosures about the CEO and manage these matters.

Board	<ul style="list-style-type: none"> • Cultivate a culture that is open and responsive to feedback and disclosures. • Oversee and assure the robustness of Health Equity Matters' whistleblowing handling and process processes. • Approve this Policy and any updates.
Audit and Risk Committee	<ul style="list-style-type: none"> • Review all serious allegations and whistleblowing matters and assure the robustness and integrity of the complaints handling and whistleblowing system. • Review the Complaints and Incidents Register on a six-monthly basis to assure itself that matters are being managed effectively, consistently and in line with this Policy.
Whistleblower Protection Officer (the CEO)	<ul style="list-style-type: none"> • Report serious allegations and all whistleblowing matters to the Board • Act as the nominated point of contact for all complainants and Whistleblowers. • Assume overarching responsibility for all stages of the complaints handling process and whistleblower protections. • Finalise all investigations and reporting to the Board. • Ensure the Policy is regularly reviewed every three years.
Managers	<ul style="list-style-type: none"> • Educate and train Health Equity Matters Personnel and Health Equity Matters Partners regarding the application of this Policy across all Health Equity Matters programs and projects. • Ensure Health Equity Matters Partners are aware of this policy and have appropriate complaints mechanisms in place.
Health Equity Matters Personnel	<ul style="list-style-type: none"> • Receive training and refresher and be able to understand and implement the Policy. • Ensure any complaints they receive from Health Equity Matters stakeholders are forwarded to the Complaints and Whistleblower Protection Officer for timely management.

10. Related Policies and Documents

Policy	Title and Hyperlink
011	Anti-Fraud and Financial Wrongdoing Policy
006	Code of Conduct Policy

040	Counter-Terrorism and Anti-Money Laundering Policy
012	Privacy Policy
041	Safeguarding Policy and Code of Conduct
049	Complaints Handling Policy
Templates/Tools	
Complaints and Incidents Register	

11. Definition of Terms

Term	Definition
Audit and Risk Committee	The Audit and Risk Committee has the delegation to oversee, provide advice and make recommendations to the Board on financial oversight, systems, reporting, compliance, risk, governance and external audit.
Health Equity Matters Personnel	An individual who meets the definition set out in section 2.
Board	The Board of Directors responsible for the governance of Health Equity Matters.
Protected Disclosure	A disclosure of the type set out in section 3.
Reportable Conduct	Conduct of the type set out in section 5.
Whistleblower	An individual of the type set out in section 4, who makes a Protected Disclosure in accordance with this Policy.

12. Policy History

Date of update	Version	Key changes	Endorsed by	Approved by	Next review
28 August 2025	1	Previously Policy 042 was a combined policy including both complaints handling and whistleblower. This has now been separated as two policies under number 049 & 050.	Audit & Risk Committee	Board	July 2028

