

# Whistleblower Procedure

## 1. Purpose and Scope

- 1.1 The Whistleblower Procedure outlines the enactment and administration of the Whistleblower Policy.
- 1.2 The procedure sets out the way in which AIAT will:
  - 1.2.1 deal with and investigate reports of suspected wrongdoing under the Whistleblower Policy; and
  - 1.2.2 identify, manage and minimise risks to officers, staff and students who make reports and/or who are required to participate in the process.
- 1.3 This procedure does not apply to staff or student complaints. Staff complaints are managed under the Staff Complaints Resolution Policy and student complaints are managed under the Student Complaints and Appeals Policy.
- 1.4 This procedure applies to all students and to all staff (including academics, non-academics, Board or committee members), visitors, volunteers and contractors.
- 1.5 This procedure should be read in conjunction with the Whistleblower Policy.

## 2. Definition

Refer to *Glossary of Terms* for commonly used terms. The definitions below are included for clarity.

**Detrimental Conduct** means any actual or threatened conduct that could cause a detriment to the Whistleblower as a result of the Whistleblower making a disclosure, including:

- termination of employment;
- harassment, bullying or intimidation;
- personal or financial disadvantage;
- unlawful discrimination;
- harm or injury, including psychological harm;
- damage to reputation; or
- any other conduct that constitutes retaliation.

**Staff Complaint** means raising a matter or issue of concern about any type of work-related problem that is causing distress or concern for a staff member. A complaint may be informal or formal.

**Student Complaint** - A reasonable expression of dissatisfaction or discontent, decision or omission within the control or responsibility of AIAT in the delivery of academic, administrative or support services that involves a formal process for resolution.

**Whistleblower** means anyone who informs about potential Wrongdoing relating to an organisation.

**Wrongdoing** means conduct or behaviour that includes, but is not limited to:

- breach of laws or regulations;
- criminal activity including theft;
- offering or accepting a bribe;
- dishonest or unethical behaviour;
- conflicts of interest;
- anti-competitive behaviour;
- financial fraud or mismanagement including in relation to AIAT's tax affairs;
- falsifying financial or corporate reporting;
- insider trading;
- unauthorised use of AIAT's confidential information;
- improper use of Personal Information as described in the AIAT Privacy Policy;
- improper use of AIAT's physical or intellectual property;
- conduct endangering health and safety or causing damage to the environment;
- improper conduct towards students;
- facilitation or encouragement of student academic misconduct;
- deliberate infringement of academic standards in student admissions, assessment or any other matter affecting students or their teaching and learning;
- deliberate concealment of any of the above; and
- any other any improper, unethical or potentially criminal conduct.

### 3. Procedure

#### Who may make a report

- 3.1 Anyone with information about potential wrongdoing relating to AIAT is encouraged to report their concerns under the Whistleblower Policy and Procedure. This includes individuals who are or have been in relation to AIAT:
- 3.1.1 a staff or board member, or contractor;
  - 3.1.2 a current, former or prospective student or customer of AIAT;
  - 3.1.3 a supplier of services or goods to AIAT (whether paid or unpaid) including their employees; and
  - 3.1.4 a relative, dependant or spouse of any of the above individuals.

#### What to report

- 3.2 Any concerns of Wrongdoing should be reported.
- 3.3 Reports must be based on reasonable grounds that the information disclosed is true. There will be no penalty if the information turns out to be incorrect (except where vexatious).

- 3.4 Those reporting are expected to provide the information upon which their suspicion is based, but are not required to have all the details or to have conducted their own investigation.
- 3.5 Whistleblowers who provide reports that are vexatious or knowingly false will be dealt with under the Dealing with Unsatisfactory Performance and Misconduct (Staff) Procedure (Staff) or the Student General Misconduct Procedure (Students).
- 3.6 Any reported grievance that does not meet the definition of wrongdoing as defined above, will be confidentially referred to the appropriate grievance handling process.

### **Who can disclosure be made to**

- 3.7 Disclosures can be made to
  - 3.7.1 a member of the Board of Directors; or
  - 3.7.2 a member of the Executive Management Group or
  - 3.7.3 the compliance officer.
- 3.8 The disclosure can be made via phone, email or in person and either on AIAT's campus or at an offsite location.
- 3.9 For the purposes of all Legislation, the compliance officer is the Chief Executive Officer (CEO) except for circumstances where clause 3.8 applies in which case the relevant Board Member becomes the compliance officer.
- 3.10 If the disclosure relates to alleged wrongdoing of the CEO, or the whistleblower wishes to keep the matter confidential from the AIAT Executive Management Group, they may raise the matter with a Board Member.

### **How to make a disclosure**

- 3.11 Disclosures can be made in person, or at any time in writing to one of the persons identified in Clause 3.7.
- 3.12 Anonymous reports will be accepted. However, providing the whistleblower's name when reporting wrongdoing will make it easier for AIAT to investigate the concern raised.
- 3.13 Where no name is provided, AIAT will assess the disclosure in the same way as if identity had been revealed, and any investigation will be conducted as best as possible in the circumstances. However, an investigation might not be possible unless sufficient information is provided.
- 3.14 Staff and stakeholders disclosing wrongdoing will be protected and the investigation will be conducted in accordance with the principles of fairness and natural justice.

### **Protecting a Whistleblower's Identity**

- 3.15 When reporting wrongdoing, the reporter's identity and any information that AIAT has as a result of the report that is likely to lead to identification, will only be disclosed if:

3.15.1 the person reporting gives consent for AIAT to disclose that information;

3.15.2 AIAT considers such disclosure should be made to:

- a. Australian Securities & Investments Commission (ASIC), the Australian Federal Police (AFP) or (for tax-related reports) the Commissioner of Taxation;
- b. a Commonwealth authority or a State or Territory authority for the purpose of assisting the authority perform its functions or duties;
- c. a lawyer for legal advice or representation in relation to Whistleblower laws, or
- d. investigate the situation, that it is essential that the identity of the person who made the report be revealed to a person about whom the substance of the report relates. The whistleblower will be briefed prior to the investigation proceeding if this may occur to ensure that they understand that their identity may not be protected.

3.16 AIAT will take all reasonable steps to protect the whistleblower from Detrimental Conduct and will take action it considers appropriate where such conduct is identified.

## **Investigations**

3.17 Whistleblower disclosures made under this policy and procedure will be documented and investigated promptly.

3.18 All reports will be assessed and, based on the nature and circumstances of the disclosure, a decision made as to whether an investigation is required. For example, reports of potential wrongdoing of a minor nature that can be resolved informally will typically not require the same level of response as disclosures involving a large-scale and complex investigation.

3.19 Any investigation will be conducted in a timely, fair and objective manner, and independent from any persons to whom the report relates. Investigations will generally be overseen by the compliance officer.

3.20 Other people, including employees or external advisers, may also be asked to assist or run the investigation. In those circumstances, they will be bound by the confidentiality obligations of this policy and procedure.

3.21 Where possible, the person reporting the wrongdoing will be informed how AIAT is responding to their report, including whether an investigation will be conducted.

3.22 Unless there are confidentiality or other reasons not to do so, staff who are the subject of a report of wrongdoing will be informed of the matters raised in the report at an appropriate time, and will be given a chance to respond to any allegations made against them. They will also be advised of the outcome of any investigation.

## **Confidentiality**

3.23 If a report is made, the identity of the discloser will be kept confidential unless it meets the criteria specified in the Clause 4.7 of the Whistleblower Policy.

3.24 Any records related to the investigation will be stored in a secure location accessible only by the compliance officer and/or members of the investigations team.

## Reporting

3.25 The compliance officer will advise when a whistleblower issue has been initiated on a quarterly basis to BoD.

3.26 The compliance officer will provide a report to the Board of Directors on the outcome of the investigation.

3.27 The CEO will provide an annual report regarding all whistleblower investigations to the Board of Directors.

## 4. Roles and responsibilities

### 4.1 The Board of Directors

4.1.1 is committed to establishing and maintaining a working environment that encourages staff to report wrongdoing and supports them when they do;

4.1.2 ensures the identity of whistleblowers is kept confidential where practicable and appropriate;

4.1.3 ensure appropriate steps are taken to protect whistleblowers from Detrimental Conduct;

4.1.4 providing leadership in promoting ethical and honest conduct within the AIAT community;

4.1.5 establishing effective systems of internal control and legal compliance within AIAT; and

4.1.6 comply with any legal requirements to report alleged wrongdoing.

### 4.2 The CEO is responsible for

4.2.1 providing an annual report regarding all whistleblower investigations to the Board of Directors; and

4.2.2 ensuring annual training for all staff and students on this policy and procedure.

### 4.3 The compliance officer is responsible for

4.3.1 receiving whistleblower reports;

4.3.2 advising the Board of Directors of whistleblower issue investigations commencing on a quarterly basis;

4.3.3 investigating whistleblower reports using the principles of natural justice;

4.3.4 taking or recommending appropriate remedial action where wrongdoing is substantiated, or systemic problems are identified;

4.3.5 report the results of the investigation to the whistleblower (if appropriate) and the Board of Directors.

- 4.4 All AIAT students and staff have a responsibility to:
- 4.4.1 report all known or suspected wrongdoing;
  - 4.4.2 support those who have made reports of wrongdoing;
  - 4.4.3 if requested, assist those dealing with the report, including supplying information on request, cooperating with any investigation and maintaining confidentiality;
  - 4.4.4 treat any staff member or person dealing with a report of wrongdoing with courtesy and respect;
  - 4.4.5 respect the rights of those who are the subject of reports; and
  - 4.4.6 be familiar with and adhere to the AIAT Staff Code of Conduct and Student Code of Conduct. A breach of either Code of Conduct may result in disciplinary action.
- 4.5 The Executive Management Group and Managers have a responsibility to:
- 4.5.1 Cultivate a workplace culture that does not tolerate wrongdoing, encourages reports of wrongdoing and takes those reports seriously;
  - 4.5.2 encourage staff to report known or suspected wrongdoing within the organisation and support staff when they do;
  - 4.5.3 implement local management strategies, in consultation with the compliance officer, to minimise the risk of Detrimental Conduct;
  - 4.5.4 maintain confidentiality on matters pertaining to disclosures, and
  - 4.5.5 notify the compliance officer immediately if they believe a staff member is being subjected to reprisal as a result of reporting wrongdoing.
- 4.6 A person reporting wrongdoing is required to:
- 4.6.1 provide a clear and honest account of their concerns, including providing all relevant information and documents to assist in the investigation and/or resolution of the matter;
  - 4.6.2 engage openly in the assessment and investigation handling process, including participating in discussion with other parties to resolve the concerns;
  - 4.6.3 respond to AIAT requests for information in a timely manner;
  - 4.6.4 maintain confidentiality on matters pertaining to the reported wrongdoing; and
  - 4.6.5 respect those individuals involved in handling the assessment and investigation.

## 5. Procedure Details

|                                             |                                                      |
|---------------------------------------------|------------------------------------------------------|
| Institution                                 | Australian Institute of Advanced Technologies (AIAT) |
| Procedure name                              | Whistleblower Procedure                              |
| Procedure Reference No.                     | PROC – 58                                            |
| Procedure Approval                          | Board of Directors                                   |
| Procedure Authority                         | Executive Management Group                           |
| Responsible Officer                         | CEO                                                  |
| Governance Reference<br>Threshold Standards | HESF 2021: 6.2.1d                                    |
| Related Documents                           | Whistleblower Policy<br>Staff Code of Conduct        |

|                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                     | <p>Student Code of Conduct</p> <p>Privacy Policy</p> <p>Staff Complaints Resolution Policy</p> <p>Student Complaints and Appeals Policy</p> <p>Dealing with Unsatisfactory Performance and Misconduct (Staff) Procedure</p> <p>Student General Misconduct Procedure</p>                                                                                                                                                                        |
| Related Legislation | <p>Corporations Act 2001</p> <p>Higher Education Standards Framework (Threshold Standards) 2021 (HESF)</p>                                                                                                                                                                                                                                                                                                                                     |
| References          | <p>AIAT has referred and benchmarked with the following institutions and policies during the creation of this policy:</p> <p>Australian Institute of Business (2020) Whistleblower Procedure</p> <p>Southern Cross University, unknown, Whistleblower Policy, <i>retrieved 4 March 2022</i></p> <p>Western Sydney University (unknown) Whistleblowing (Reporting Corruption and other Wrongdoing) Procedure, <i>retrieved 4 March 2022</i></p> |
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| Policy Category     | Operational                                                                                                                                                                                                                                                                                                                                                                                                                                    |

## 6. Document Version Control

| Document No  | PROC - 58  | Last Modify Date | Summary of Changes                             |
|--------------|------------|------------------|------------------------------------------------|
| Version No   | 1.0        | NA               | Initial version approved by Board of Directors |
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