

Policy Statement

RHealth recognises that a transparent Whistleblower Policy is essential to good risk management and corporate governance. This policy establishes the framework to sustain an organisational culture which is resistant to misconduct and offers a psychologically and culturally safe and secure means for disclosure of possible misconduct.

RHealth strives to ensure people feel safe, heard and supported when raising concerns. The technical requirements of whistleblower laws do not need to be understood in order to raise a concern. If something doesn't feel right, seems unsafe, unethical, unlawful, or simply "not how we should do things", RHealth wants to hear about it. Appropriate supports are available to ensure the right concern resolution pathway is progressed. Other concern and complaint resolution pathways operate in conjunction with RHealth's legislatively required Whistleblower framework established by this Policy.

Consistent with the law and RHealth's Code of Conduct, the objectives of the Whistleblower Policy are to:

- encourage disclosure of possible misconduct;
- help deter wrongdoing, in line with RHealth's risk management and governance framework;
- ensure individuals who disclose misconduct can do so safely, securely and with confidence that they will be protected and supported;
- ensure disclosures are dealt with appropriately and on a timely basis;
- provide transparency around RHealth's framework for receiving, handling and investigating disclosures;
- support RHealth's long-term sustainability and reputation; and
- meet RHealth's legal and regulatory obligations.

Scope

In accordance with applicable legislation, this Whistleblower Policy applies to any person who is or has been any of the following with respect to RHealth or a related body corporate:

- a. an officer or employee;
 - e.g. current and former employees who are permanent, part-time, fixed-term or temporary, interns, secondees, managers and directors)
- b. a supplier of goods to the entity (whether paid or unpaid), including their employees;
 - e.g. current and former contractors, consultants, service providers and business partners
- c. an associate of the entity; and
- d. a relative, dependent or spouse of an individual listed above.
 - e.g. relatives, dependents or spouse of current and former employees, contractors, consultants, service providers, suppliers and business partners.

Concerns that are within the scope of the Whistleblower Policy are those that meet the definition of a "disclosable matter" as outlined below in the Definitions section. Concerns outside the scope of the Whistleblower Policy will be responded to via other appropriate and applicable response pathways.

Definitions

Term	Definition
Detrimental Conduct	Detriment Conduct includes (without limitation) any of the following: <ol style="list-style-type: none"> a. dismissal of an employee; b. injury of an employee in his or her employment; c. alteration of an employee's position or duties to his or her disadvantage;

Term	Definition
(section 1317ADA <i>Corporations Act 2001</i>)	<ul style="list-style-type: none"> d. discrimination between an employee and other employees of the same employer; e. harassment or intimidation of a person; f. harm or injury to a person, including psychological harm; g. damage to a person’s property; h. damage to a person’s reputation; i. damage to a person’s business or financial position; j. any other damage to a person.
<p>Disclosable Matters (from section 1317AA(4)-(5) <i>Corporations Act</i>)</p>	<ul style="list-style-type: none"> (4) applies to a disclosure of information if the discloser has reasonable grounds to suspect that the information concerns misconduct, or an improper state of affairs or circumstances, in relation to: <ul style="list-style-type: none"> a. the regulated entity; or b. if the regulated entity is a body corporate—a related body corporate of the regulated entity, (5) Without limiting section (4), this subsection applies to a disclosure of information if the discloser has reasonable grounds to suspect that the information indicates that any of the following: <ul style="list-style-type: none"> a. the regulated entity, or an officer or employee of the regulated entity; b. if the regulated entity is a body corporate—a related body corporate of the regulated entity, or an officer or employee of a related body corporate of the regulated entity; has engaged in conduct that: <ul style="list-style-type: none"> c. constitutes an offence against, or a contravention of, a provision of any of the following: <ul style="list-style-type: none"> (i) the <i>Corporations Act 2001</i>; (ii) the <i>Australian Securities and Investment Commission Act 2001</i>; (iii) the <i>Banking Act 1959</i>; (iiia) the <i>Financial Accountability Regime Act 2023</i>; (iv) the <i>Financial Sector (Collection of Data) Act 2001</i>; (v) the <i>Insurance Act 1973</i>; (vi) the <i>Life Insurance Act 1995</i>; (vii) the <i>National Consumer Credit Protection Act 2009</i>; (viii) the <i>Superannuation Industry (Supervision) Act 1993</i>; (ix) an instrument made under an Act referred to in any of subparagraphs (i) to (viii); or d. constitutes an offence against any other law of the Commonwealth that is punishable by imprisonment for a period of 12 months or more; or e. represents a danger to the public or the financial system; or f. is prescribed by the regulations for the purposes of this paragraph.
<p>Eligible Recipient (from section 1317AAC <i>Corporations Act 2001</i>)</p>	<p>Each of the following is an eligible recipient in relation to a regulated entity that is a body corporate:</p> <ul style="list-style-type: none"> a. officer or senior manager of the body corporate or a related body corporate; b. an auditor, or a member of an audit team conducting an audit, of the body corporate or a related body corporate; c. an actuary of the body corporate or a related body corporate; d. a person authorised by the body corporate to receive disclosures that may qualify for protection under Part 9.4AAA of the <i>Corporations Act</i>.
<p>RHealth</p>	<p>RHealth Limited ACN 134 174 128</p>

Term	Definition
RHealth Whistleblower Policy Framework	RHealth’s Whistleblower Policy includes RHealth’s: <ol style="list-style-type: none"> Whistleblower Policy; Whistleblower Procedure; and Whistleblower Information Guide.

Responsibilities

The RHealth Board will:

- oversight the whistleblowing framework,
- receive serious or systemic matters, and
- ensure resourcing for effective protection and investigation.

CEO, management and team leaders, within their human resource and delegations’ capacity, will:

- create and promote a safe, “no wrong doors”, trauma-informed culture of speaking up,
- enable and support the appropriate activation of response pathways for any concerns raised, inclusive of Whistleblower, and
- ensure appropriate training and awareness, including with regards to confidentiality.

As Eligible Recipients, the CEO, management and indicated Whistleblower Protection Officers (WPOs) will, in accordance with approved delegations:

- be a point of contact for disclosures,
- triage and assess the eligibility of disclosures,
- oversight protection planning and ensure no detrimental conduct,
- coordinate with allocated investigators and ensure impartial investigations, and
- ensure appropriate confidentiality, communications and record keeping.

Principles

The following principles guide the implementation of RHealth’s Whistleblowing practices, and the execution of responsibilities as outlined above.

- RHealth adopts a no-wrong-door approach to whistleblowing. Any concern raised in good faith regarding RHealth’s activities will be supported and assessed to determine the applicability of the Whistleblower framework, with appropriate guidance provided to the individual raising the concern.
- An effective framework involves identifying key risks to whistleblowers.
- Mitigation of applicable misconduct is assisted through the development of a transparent and effective disclosure framework, where individuals who report Disclosable Matters are protected from Detrimental Conduct.
- Monitoring and review of the Whistleblower Policy should be a normal part of the management process.
- RHealth’s Whistleblower Policy will be initially reviewed during employee induction and then regularly through RHealth’s mandatory training program.
- A person shall not make a disclosure under the Whistleblower Policy unless that person is within the Scope of this Policy and has reasonable grounds to suspect that the information is a Disclosable Matter.
- Deliberately false, misleading or unreasonable disclosures will be managed in accordance with RHealth’s disciplinary processes.
- Robust mechanisms will be established to encourage and support the reporting of suspected Disclosable Matters by individuals from within and outside RHealth, including anonymous reports.

- RHealth may nominate Eligible Recipients for Disclosable Matters beyond those identified in the legislation, for example, internal and/or external Whistleblower Protection Officers (WPOs).
- Any RHealth employee who believes they receive a suspected Disclosable Matter, must communicate the matter to an Eligible Recipient, ensuring appropriate levels of confidentiality.
- Reporting of Disclosable Matters will be investigated and, if required, will be reported to the relevant external body.
- Procedures defining the roles, responsibility, authority and powers delegated to management and investigators will be used to determine the investigation approach commensurate with the nature and seriousness of the matter.
- Investigations may be undertaken by internal or external investigators, with Board oversight for serious matters.
- All reasonable measures will be taken to ensure that potential whistleblowers are aware of their rights to protection under the legislation and their right to compensation if relevant.
- All reasonable measures will be taken to support a person who discloses suspected misconduct and to provide them protection from Detrimental Conduct as a result of making a disclosure.
- Natural justice, procedural fairness, independence, confidentiality, and proportionality will guide all investigations.
- Target timeframes and associated communication relating to initial acknowledgement of a suspected Disclosable Matter, preliminary assessment, investigation commencement, progress, conclusion and outcome, may be set, but may need to flex depending on the complexity of the matter.

Procedural Information

Refer to the RHealth Whistleblower Procedure and Information Guide, and RHealth's Natural Justice Guide, available on the RHealth website and RHealth intranet, for additional information on how this policy is implemented.

Related legislation, policies and resources

The Policy must be read in conjunction with its subordinate documentation:

- Whistleblower Procedure
- Whistleblower Information Guide

Relevant legislation and standards include but are not limited to:

- Corporations Act 2001
- Australian Securities and Investment Commission Act 2001
- Australian Securities and Investment Commission Regulatory Guide 270 and other guiding information
 - <https://download.asic.gov.au/media/5702691/rg270-published-13-november-2019-20200727.pdf>
 - <https://www.asic.gov.au/about-asic/asic-investigations-and-enforcement/whistleblowing/>
- Taxation Administration Act 1953

Related RHealth policies & procedures:

- Code of Conduct
- Finance Handbook
- HR & WWHS Handbook
- Natural Justice Information Guide
- Privacy Policy
- Risk Management Policy & Procedure
- Incident Management Policy & Procedure

- Feedback & Complaints procedures

Stewardship, version control & Review

Executive Sponsor	Chief Executive Officer	
Author	Original 2020 version - Fox & Company Lawyers Updated versions - RHealth Quality Assurance Lead	
Approval Authority	RHealth Board	
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1	21 April 2020	When needed
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