

Purpose

This procedure sets out the processes by which RHealth’s Whistleblower Policy will be implemented. This procedure should be read in conjunction with the separately held RHealth Whistleblower Information Guide, which provides further detailed information and practical guidance relating to RHealth’s organisational context. The procedure will be activated when an expressed concern is identified as possibly attracting Whistleblower eligibility and protections. RHealth will support any complainant in determining the applicability of Whistleblower concepts to their concern.

Scope

In accordance with applicable legislation, an eligible whistleblower is an individual who is, or has been, any of the following in relation to RHealth:

- 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.

A concern needs to meet the definition of a “disclosable matter” as outlined below, to be applicable to the Whistleblower response pathway.

Definitions

Term	Definition
Detrimental Conduct (section 1317ADA <i>Corporations Act 2001</i>)	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; 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.
Disclosable Matters (from section 1317AA(4)-(5) <i>Corporations Act</i>)	(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: <ol 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,

Term	Definition
	<p>(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:</p> <ol 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; <p>has engaged in conduct that:</p> <ol style="list-style-type: none"> c. constitutes an offence against, or a contravention of, a provision of any of the following: <ol style="list-style-type: none"> (i) the Corporations Act 2001; (ii) the Australian Securities and Investment Commission Act 2001; (iii) the Banking Act 1959; (iiia) the Financial Accountability Regime Act 2023; (iv) the Financial Sector (Collection of Data) Act 2001; (v) the Insurance Act 1973; (vi) the Life Insurance Act 1995; (vii) the National Consumer Credit Protection Act 2009; (viii) the Superannuation Industry (Supervision) Act 1993; (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> <ol 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>
<p>RHealth Whistleblower Policy Framework</p>	<p>RHealth’s Whistleblower Policy includes RHealth’s:</p> <ol style="list-style-type: none"> a. Whistleblower Policy; b. Whistleblower Procedure; and c. Whistleblower Information Guide.
<p>Whistleblower Protection Officer (WPO) Decision Maker</p>	<p>Internally defined roles for the purposes of RHealth’s whistleblower procedures.</p> <p>The Whistleblower Protection Officer’s role is that of a legislatively defined Eligible Recipient, and includes disclosure intake, triage, protection planning, communication, and coordination with investigators. The WPO’s role ensures confidentiality, monitors reprisal risk, and maintains records.</p> <p>The Decision Maker is an internal organisational role that supports internal actions arising from a whistleblower disclosure.</p>

Reporting a disclosure

Who can be a protected whistleblower?

To be eligible for the protections of RHealth's Whistleblower Framework, the person considering making a disclosure must fall within the defined Scope of RHealth's Whistleblower Policy and Procedure. That is, protections apply to current and former RHealth officers, employees, contractors, suppliers (paid or unpaid) and their employees, associates, and relatives, dependants or spouses of any of these persons in relation to RHealth.

What is an eligible disclosure?

A person shall not make a disclosure under RHealth's Whistleblower Framework unless that person has reasonable grounds to suspect that the information is a Disclosable Matter, as defined in the legislation and replicated in the Definitions section of this procedure. It is a breach of the Whistleblower Policy to deliberately make a false report or to make a report without reasonable grounds.

Who can an eligible disclosure be reported to?

A disclosure must be made to an Eligible Recipient, as defined in the legislation and replicated in the Definitions section of this procedure, and further clarified below. The role of an Eligible Recipient is to receive disclosures that qualify for protection.

Disclosures made to a RHealth Eligible Recipient are confidential.

According to the legislation, disclosures can be made to the following Eligible Recipients:

- an officer or senior manager of RHealth
 - where an officer refers to a director or company secretary of RHealth, and a senior manager would be a manager who makes or participates in making decisions that affect the whole, or a substantial part, of RHealth, or has the capacity to significantly affect RHealth's financial standing
- the Australian Securities and Investments Commission (ASIC), Phone: 1300 300 630, <https://www.asic.gov.au/about-asic/contact-us/report-issue-to-asic/>
- the Australian Prudential Regulation Authority (APRA); phone 1300 558 849, <https://www.apra.gov.au/questions-or-complaints>
- a legal practitioner for the purposes of obtaining legal advice or representation.

In addition to the legislatively defined Eligible Recipients, the below indicated internal Whistleblower Protection Officer (WPO) is an RHealth defined Eligible Recipient.

Internal WPO

Trish Leddington-Hill
RHealth Quality & Assurance Lead

Mobile: 0488 024 728
E: trish@rhealth.com.au

While any of the Eligible Recipients listed above may be contacted to report a Disclosable Matter, the process of review and investigation may be handled more efficiently if it is made to an RHealth Manager or the Internal WPO in the first instance. This would enable a wrongdoing to be identified and addressed as early as possible and would help to build confidence and trust in the Whistleblower policy, procedure and processes. In spite of this, if a disclosure is made to an Eligible Recipient outside of RHealth, it will still qualify for protection under the Act.

Any staff member that suspects they have received an applicable whistleblower disclosure, must immediately and confidentially forward it to an Eligible Recipient.

Can disclosures be anonymous?

Disclosures can be made anonymously and will qualify for protection under the RHealth Whistleblower Policy and under the *Corporations Act*.

Compensation if discloser suffers harm

In the event that the person who reports a Disclosable Matter suffers harm for making that disclosure, they may be entitled to compensation. RHealth strongly encourages all potential disclosers to seek independent legal advice prior to, during and after making a disclosure.

Timeframes and associated actions

The following timeframes for progressing a whistleblower disclosure align with RHealth's complaints handling processes and are considered optimal, but may not be pragmatically achievable in all whistleblower scenarios:

- the Eligible Recipient acknowledges receipt of a disclosure as soon as practicable – optimally within 3 business days of receipt
 - upon receipt of a disclosure, the Eligible Recipient must establish a secure record and determine immediate safety or containment steps
- within 5 business days of receipt, the Eligible Recipient will assess whether the matter falls within the scope of the Policy, is a protected disclosure and whether immediate protective controls are required (e.g., separation of parties, data preservation)
 - mixed issues (e.g., personal grievances plus misconduct) will be triaged to appropriate processes while maintaining protections where applicable
- within 14 business days of acknowledgement, the Eligible Recipient will determine whether an investigation is warranted, and if so, appoints an investigator
 - see further information on investigations below
- a resolution timeframe will be dependent on the nature of the disclosure and any resultant investigations that may ensue
- appropriate communications are maintained with the discloser, to the extent possible, keeping them up to date with actions being progressed, eg weekly or fortnightly check-ins by the Eligible Recipient or agreed and consented delegated communicator
- on review closure, the discloser is informed of the outcome (subject to legal constraints)
 - if the discloser is dissatisfied with the process, a request for procedural review may be made to the CEO (or Board Chair if the CEO is conflicted)
 - RHealth is not obliged to reopen an investigation in the absence of new or materially different information

Further information

Further information is available in relation to the implementation of the Whistleblower Policy within the RHealth Whistleblower Information Guide and from a Whistleblower Protection Officer or another Eligible Recipient. Possible disclosers are encouraged to seek out further information or advice prior to reporting a Disclosable Matter. Information is also available from the ASIC website, <https://asic.gov.au/about-asic/asic-investigations-and-enforcement/whistleblowing/>.

A matter or conduct that does not meet the definition of a Disclosable Matter is not eligible for protection under the Whistleblower Policy or the Act. For the avoidance of doubt, a Disclosable Matter does not

include personal work-related grievances. Personal work-related grievance should be reported in accordance with RHealth's Complaints Policy.

A deliberately false or unreasonable report will be dealt with under RHealth's disciplinary policies. No disciplinary action will be taken where the reporter had reasonable grounds, even if concerns are not substantiated.

Protections

The identity of a person making a report of a Disclosable Matter will be kept confidential, unless the discloser has given their permission for their identity to be disclosed.

Any person who makes a report of a Disclosable Matter will be treated fairly and will be protected from any Detrimental Conduct.

Investigation

If the Eligible Recipient determines that it is appropriate, the Eligible Recipient may authorise an investigation in accordance with organisational delegations relating to expenditure and the legislative confidentiality requirements and exceptions. If an investigation is authorised, the Eligible Recipient must consider and control any risk of Detrimental Conduct to the discloser. Specified investigation planning should be conducted, inclusive of establishing terms of reference and target timeframes.

Within the constraints of legislative confidentiality requirements and exceptions, in the first instance, the Internal WPO may be appointed as the Decision Maker of the investigation. If he or she is unable or unwilling to act, for example due to a conflict of interest or restrictive delegations, the Chief Executive Officer (CEO) will be appointed. If the CEO is unable or unwilling to act, the Board Chair will be appointed. The Decision Maker may, where appropriate and in accordance with organisational delegations, appoint an external investigator to assist in conducting the investigation.

Following an investigation, the Decision Maker may decide to close the investigation or forward a report on the investigation to the Board or an authorised committee of the Board. The Board or an authorised committee of the Board may adopt or reject the findings of the report and any recommendation of the Decision Maker. If required, the Board will notify any relevant external body.

Any investigation into a Disclosable Matter will be conducted in accordance with the rules of natural justice and procedural fairness. Refer to the separately held Natural Justice Information Guide.

Any person who is mentioned in a disclosure, including those who are the subject of a disclosure, will be treated fairly and will be offered support through RHealth's Employee Assistance Program.

To the extent possible, the Decision Maker will keep the discloser informed regarding the process of an investigation and the outcome of an investigation. The discloser will be offered support through RHealth's Employee Assistance Program.

Review of Policy & Procedure

Employees may be appropriately consulted on a triannual basis to ensure their awareness of Whistleblower processes and to seek feedback regarding the efficacy of the processes.

Whistleblower documentation will be reviewed and updated as required, including after any implementation of the procedure.

Related legislation, policies and resources

This procedure must be read in conjunction with its superior and subordinate documentation:

- Whistleblower Policy
- Whistleblower Information Guide

Purpose Supporting the Health and Wellbeing of communities

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 (CEO)	
Author	Original 2020 version - Fox & Company Lawyers Updated versions - RHealth Quality Assurance Lead	
Approval Authority	CEO	
Version	Date Approved	Due for Review
1	21 April 2020	When needed
2	16 February 2023	March 2026
3	31 March 2026	March 2029 – or earlier if needed