

MURRAY RIVER COUNCIL
OPERATIONAL POLICY

**COMMUNITY
SERVICES
WHISTLEBLOWER
POLICY**

POL-705.V#1

To be read in conjunction with the MRC Public Interest Disclosures (PID) Policy



**murray river
council**

1. INTRODUCTION

Murray River Council is committed to ethical behaviour that is aligned with our values and complying with all relevant laws.

The disclosure of actual or reasonably suspected wrongdoing is a key element in maintaining our ethical culture.

We recognise that people who have a work, service or client relationship with Council are often best placed to identify illegal or other undesirable conduct.

2. OBJECTIVES

The objectives of this Policy are to:

- deter wrongdoing;
- encourage and enable individuals to disclose actual and suspected wrongdoing, knowing that their concerns will be taken seriously and investigated;
- describe clearly the process for making a whistleblower disclosure, the types of matters that should be reported and the support and protections available to whistleblowers;
- describe clearly the processes that Council follows for receiving, managing and appropriately investigating whistleblower disclosures in a timely and effective way that supports and protects the whistleblower (including protecting their identity and protecting them from detriment);
- outline how Council manages persons named in whistleblower disclosures and the secure storage of the information provided and gathered; and
- meet the requirements of and give effect to the protected disclosure ("whistleblower") legislation provisions in the Aged Care Act 2024 and any other relevant legislation.

3. SCOPE

This Policy applies to:

- All Murray River Council Officers (including volunteers) involved in the provision of services to members of the community that are eligible to receive/participate in community service activities.
- Any person or organisation with a relationship with Murray River Council's Community Services activities - this could include contractors, suppliers, consultants and their employees); and/or
- Recipients of Council's services or a family member, carer, representative, advocate or significant other of the recipient.

4. LEGISLATION

- Aged Care Act 2024
- Aged Care Rules 2024
- Public Interest Disclosure Act
- Privacy and Personal Information Act

PLEASE NOTE:

State or Territory law can work alongside the federal protections (i.e. doesn't directly conflict), then both apply. Providers must comply with both the Aged Care Act 2024 and any relevant State or Territory laws on whistleblower protections — where they can operate together. Example: Aged Care sector whistleblowers, covered by the states Public Interest Disclosure Acts.

Aged Care Act 2024 - Section 554

5. POLICY STATEMENT

We are committed to providing a supportive environment for any person making a whistleblower disclosure, including protecting whistleblowers' identities from detriment.

This Policy, is required under the Aged Care Act 2024 to outline:

- The purpose of the protections
- Who disclosures can be made to – both internally and externally?
- How disclosures can be made?
- How Council will manage and investigate disclosures?
- How confidentiality and protection from detriment will be upheld?
- How Council will meet review and system obligations?
- What individuals can do if they believe Council hasn't met its whistleblower obligations?

Aged Care Act 2024 - Section 165

5.1 WHAT IS REPORTABLE CONDUCT?

A disclosure is a report or communication made by an individual who has reasonable grounds to suspect that a provider or its personnel may have breached the Aged Care Act 2024 or related responsibilities.

To qualify for whistleblower protections the disclosure must:

- Relate to a suspected contravention of the Act;
- Be made in good faith by an individual (the "discloser"); and
- Not be motivated solely by personal grievance or made without reasonable basis.

The Act does not require proof - only a reasonable suspicion. Disclosures may relate to misconduct, neglect, abuse, non-compliance or any act or omission that may pose a risk to the safety or rights of care recipients.

Aged Care Act 2024 - Section 547

Reportable Conduct is conduct that the Whistleblower suspects on reasonable grounds is:

- A reportable incidents (as defined under the SIRS and including elder abuse, assault, sexual assault, theft and neglect)
- Gross mismanagement
- Unethical and/or dishonest conduct;
- Fraudulent activity, such as money laundering or inappropriate use of funds, offering or accepting a bribe, financial irregularities;
- Illegal conduct, such as theft, dealing in or use of illicit drugs, violence or threatened violence and criminal damage against property and other criminally prosecutable offences;
- Improper conduct, such as substantial misuse or abuse of Council's resources, or involves substantial risk to public health or safety or the environment;
- Conflicts of interest that are not declared or managed appropriately, nepotism, favouritism;
- Coercion, harassment or discrimination by, or affecting, any of our officers, volunteers or contractors;
- Abuse of public trust;

- › Failure to report, or concealment of, an indictable offence;
- › Conduct that poses an unreasonable danger to the health or safety of others;
- › Failure to act in accordance with applicable professional and ethical standards; and/or
- › Engaging in or threatening to engage in detrimental conduct against a person who has made a disclosure or is believed or suspected to have made, or be planning to make, a disclosure.

5.2 WHAT IS NOT REPORTABLE CONDUCT OR SHOULD NOT BE REPORTED?

You should not report minor matters that do not constitute wrongdoing as defined in this Policy.

Do not use these whistleblowing procedures to report a matter you know to be false.

Examples of conduct that should NOT be reported via this process:

- › An isolated compliance breach that does not amount to a SIRS (see Definitions below) reportable incident or misconduct and does not indicate a systemic issue;
- › Mismanagement of the budget that does not involve misconduct such as fraud or embezzlement or nepotism;
- › Failure by a Council Officer to meet the personal expectations of a consumer or their family members or carers (where the failure does not also constitute misconduct or a SIRS reportable incident); and/or
- › A personal work-related grievance that has no serious implications for Council's services.

It may be appropriate to report these and other similar incidents via another channel such as our Feedback and Complaints, Incident Management or internal Grievance procedures.

5.3 WORKPLACE GRIEVANCES

Reportable Conduct does not generally include a personal workplace-related grievance and therefore such grievances are not covered under this Policy. Personal workplace related grievances should be addressed in accordance with Council's Grievance Management Procedure (P516-017).

A personal workplace related grievance may still qualify for protection under this Policy if it also includes items identified under reportable conduct or if the discloser suffers from or is threatened with detriment for making a disclosure.

5.4 WHO CAN YOU MAKE A REPORT TO?

A disclosure of information by an individual can be made to one of the following:

- › An Appointed Commissioner or a member of the staff of the Commission;
- › The System Governor, or an official of the Department;
- › **A registered provider;**
- › **A responsible person of the registered provider;**
- › **An aged care worker of a registered provider;**
- › A Police Officer;
- › An independent aged care advocate

Aged Care Act 2024 - Section 547

Murray River Council is a registered provider under the Aged Care Act 2024.

5.5 WHISTLEBLOWER SUPPORT AND PROTECTION

Council is committed to providing a supportive environment for any person making a whistleblower disclosure and we will always strive to ensure that every whistleblower is protected from detriment as a result of blowing the whistle. This includes protection from dismissal or demotion and from any form of reprisal, including retaliation, harassment or victimisation.

Council retains their right to undertake reasonable management actions as they deem appropriate.

PLEASE NOTE:

While a whistleblower will not be held liable for making a disclosure, they may be held liable for other acts that comes to light because of the disclosure. For instance, if the whistleblower's disclosure leads to an investigation and the investigation reveals that the whistleblower committed a crime, they could be held liable for that crime. Also, if the whistleblower's disclosure is false, they could be held criminally liable for making a false disclosure. However, to promote a culture that encourages whistleblower disclosures, it is our general position that, where a whistleblower has been involved in wrongdoing but has not engaged in serious misconduct or illegal activity, the whistleblower will not, at the discretion of the Chief Executive Officer (CEO) be subject to internal disciplinary proceedings.

Aged Care Act 2024 - Section 548

Reporting Retaliation, Harassment or Victimisation

A whistleblower who experiences actual or threats of retaliation, harassment or victimisation should immediately report it to one of Council's Disclosure Officers. (see Definitions below)

Any such conduct will be treated as serious misconduct and the perpetrator of the retaliation will be subject to disciplinary action.

Whistleblowers can also report externally to the Police.

A whistleblower whose disclosure relates to a SIRS reportable incident may also report to the Aged Care Quality and Safety Commissioner.

Aged Care Act 2024 - Section 551

Compensation and Remedies

Where there has been a breach of whistleblower protections and the whistleblower suffers detriment, a court may order that compensation be paid. The court may also order that other remedies be provided.

Other remedies include orders to:

- › Stop conduct that is causing detriment to the whistleblower;
- › Apologise to the whistleblower;
- › Compensation for loss, damage or injury caused;
- › Face exemplary damages to punish serious misconduct; and/or
- › Reinstatement a whistleblower who is a Council Officer who has been dismissed.

Aged Care Act 2024 - Section 552 and 553

5.6 ANONYMITY AND CONFIDENTIALITY

A whistleblower can choose to remain anonymous while making a disclosure over the course of the investigation and after the investigation is finalised. Where the non-identifying contact is maintained during the investigation of the disclosure, they may choose not to answer any further questions posed if they are concerned that it will lead to their identity being revealed. However, this may compromise the thoroughness of the investigation.

Council will, as far as reasonably possible, enable whistleblowers to make a disclosure anonymously and will take all reasonable steps to reduce the risk that the whistleblower will be identified as a result of the investigation of their disclosure..

However, a disclosure to the Aged Care Quality and Safety Commissioner will only be protected if the discloser gives their name.

Steps that Council will take to reduce the risk of a whistleblower being identified include, where possible:

- Ensuring that any meetings with the whistleblower are held in a private setting and outside business hours if required;
- Ensuring that all communications, files and records that relate to the whistleblower are kept securely;
- Informing any personnel who are aware of the whistleblower's identity that they have an obligation to keep that identity confidential; and/or
- Council takes all reasonable steps to reduce the risk that the whistleblower could be identified.

Where a whistleblower's identity is, or becomes, known, that information will remain strictly confidential and only disclosed to the extent permitted and as required.

PLEASE NOTE:

If naming someone is necessary to prevent serious harm to someone's health, safety, or wellbeing, then it may be reasonable to share their identity, however if the harm can be prevented without identifying them, then sharing the name is not reasonable.

Council must not disclose a whistleblower's identity without authorisation.

Aged Care Act 2024 - Section 549 and 550

5.6 TRAINING AND AWARENESS

We do not tolerate reprisals or adverse action being taken against whistleblowers for reporting actual or suspected wrongdoing, including when suspicions are not substantiated following a thorough investigation.

Council will promote awareness to all Council Officers their responsibilities to treat their colleagues and stakeholders with respect and never to engage in behaviour that is discriminatory or that involves bullying or harassment. These responsibilities encompass acknowledging that reporting actual or suspected wrongdoing is integral to an ethical culture and nobody who reports actual or reasonably suspected wrongdoing should experience detriment as a result.

Steps we take to promote awareness and protect whistleblowers include, where possible:

- Sharing this Policy with Council Officers and other stakeholders;
- Training sessions and educational materials for distribution;
- Facilitating a clear, easy process for whistleblowers to make reports and to do so anonymously if they wish;
- Where a whistleblower's identity is known, assigning a dedicated Council Officer to the case to monitor the workplace for signs of retaliation, harassment or victimisation and to intervene when necessary;
- Facilitating a clear, easy process for reporting retaliation, harassment or victimisation; and/or
- Taking disciplinary action against anyone who retaliates against, harasses or victimises a whistleblower.

Training

Training is mandatory for all Council Officers working in the Community Service Business Unit and responsible persons on how the whistleblower system works.

Training must be provided:

- At induction (when someone starts in their role);
- When their role or the system changes; and
- At regular intervals — at least once a year.

Training must cover:

- How to recognise and respond to protected disclosures under Section 547 of the Aged Care Act 2024;
- How to handle personal information and data;
- How to manage relationships and communicate with disclosers;
- When and how to escalate a disclosure; and
- Roles and responsibilities under the system.

5.7 ACCESS TO INFORMATION

Council will make this Policy and any other information on making a Whistleblower Disclosure available via the following avenues:

- On Council's website;
- A hardcopy will be provided on request by any person:
 - Council Officers (including volunteers),
 - service providers, contractors, service recipients and/or their family, carer or supporter.
- Regular communication (minimum of monthly) on the Whistleblower Policy and the associated Whistleblower Procedure that outlines how to report wrongdoing.

If needed, Council will translate the whistleblower Policy or present it in another suitable format so the person can understand it — and must also help aged care recipients and their supporters understand how the whistleblower system works.

Aged Care Rules 2024 - Section 165-55

6. PROCEDURAL STATEMENT

Murray River Council will treat the receipt of a Whistleblower Disclosure in a similar manner to the receipt of a Public Interest Disclosure as outlining in the Public Interest Disclosure (PID) Policy and the PID Procedure.

A Whistleblower Disclosure in the Aged Care sector would, under most circumstances be either a Voluntary or Mandatory PID depending on the nature of the wrongdoing.

6.1 MAKING A REPORT

There are several avenues for making a report – they can be internally or externally to Murray River Council. (Refer to Clause 5.4 above for external reporting)

You can make a report inside MRC to:

- **The CEO**
- **The Mayor** (only if the report is about the CEO)
- **Disclosure Coordinators**
 - Director Corporate and Community

- Manager Governance & Risk
- Chief Legal Counsel
- ▶ **Disclosure Officers**
 - Director Sustainability and Growth
 - Director Assets and Infrastructure
- ▶ **Your Manager/Supervisor**

This is the person who directly, or indirectly, supervises you. It can also be the person who you directly, or indirectly, report to. You may have more than one manager. Your Manager/Supervisor will make sure that the report is communicated to a Disclosure Officer on your behalf or may accompany you while you make the report to a Disclosure Officer.

For Contractor, sub-contractors and volunteers they should report a potential PID to the person in MRC that oversees the services or functions provide by them, or who manages the relevant contract or volunteering arrangement.

6.2 WHAT FORM SHOULD A DISCLOSURE TAKE?

You can make a Disclosure:

IN WRITING	This could be an email or letter to a person who can receive a Disclosure. Council's Internal Reporting Form is also available for Council Officers to use to make a report.
ORALLY / VERBALLY	Have a private discussion with a person who can receive a Disclosure. This can be face-to-face, via telephone or virtually. If a report is made verbally, the person receiving the report will make a comprehensive record of the report and ask the person making the report to sign this record. The reporter should keep a copy of this record.
ANONYMOUSLY	Write an email or letter or call a person who can receive Disclosures to make a report without providing your name or anything that might identify you as the maker of the report. A report will only be considered anonymous if there is no reasonable or practical way of communicating with the person making the report. Even if you choose to remain anonymous, you will still be protected under the <u>Aged Care Act 2024</u> and the <u>PID Act</u> . It may be difficult, however, for MRC to investigate the matter(s) you have disclosed if we cannot contact you for further information. It is important to realise that an anonymous disclosure may not prevent you from being identified by the subjects of the report or your colleagues. If Council does not know who made the report, it is very difficult for Council to prevent any reprisal should others identify you.

6.3 WHAT SHOULD I INCLUDE IN MY DISCLOSURE?

For a whistleblower disclosure to be investigated, it must contain enough information to form a reasonable basis for investigation. This includes any known details about the events underlying the actual or suspected wrongdoing.

You should provide as much information as possible so we can deal with the report effectively.

The type of information you should include is:

- Date, time and location of key events;
- Names of person(s) involved in the suspected wrongdoing, their role, title and how they are involved;
- Your relationship with the person(s) involved, such as whether you work closely with them;
- Your explanation of the matter you are reporting;
- How you became aware of the matter you are reporting;
- Possible witnesses; and/or
- Other information you have that supports your report.

In your disclosure, include any steps that you may already have taken to report the matter elsewhere or to resolve the concerns.

6.4 WHAT IF I AM NOT SURE IF MY REPORT IS A PID?

You should report all wrongdoing you become aware of regardless of whether you think it is serious wrongdoing. It is important for Council to understand what is or may be occurring.

We are then responsible for making sure your report is handled appropriately under the PID Act, or if it is not a PID, in line with our other procedures. Even if your report is not a PID, it may fall within another one of the agency's policies for dealing with reports, allegations or complaints.

6.5 RECEIVING AND INVESTIGATING A WHISTLEBLOWER DISCLOSURE

6.5.1 Initial Assessment

When a disclosure of wrongdoing is received, the Disclosure Officer will assess the Disclosure, as a matter of priority, to determine whether it qualifies as a Whistleblower Disclosure and the nature and extent of the investigation that may be required, including timeframes that will allow the investigation to be conducted both thoroughly and with expediency.

Where a whistleblower's identity is known or becomes known or non-identifying contact details have been provided, the Disclosure Officer will discuss with the whistleblower the issue of confidentiality, the degree of risk that their identity may become known and the risk that they may experience detriment. The Disclosure Officer will also discuss support services that may be available and strategies for minimising and managing stress and other challenges resulting from their disclosure.

6.5.2 Assigning a Whistleblower Investigator

The CEO or a Disclosure Coordinator will assign a Whistleblower Investigator to investigate the disclosure.

Whistleblower Investigators are assigned by a Disclosure Coordinator on a case-by-case basis depending on the particular circumstances of the whistleblower disclosure.

The Disclosure Coordinator will act independently of the Whistleblower Investigator and focus on the protection of the whistleblower during the investigation.

6.5.3 Conducting the Investigation

The Whistleblower Investigator will be provided with reasonable access to independent specialist advice if required, and all Council Officers and relevant contractors working in the Community Service Business Unit will be required to provide any assistance required to the Whistleblower Investigator.

The Whistleblower Investigator will, as far as reasonably possible, follow best practices in investigations, including ensuring that all reports of suspected wrongdoing that are determined to require investigation are investigated in a way that adheres to the principles of objectivity, procedural fairness, confidentiality and natural justice.

All information and documents relevant to the investigation will be stored securely.

6.5.4 Management of a Person Named in a Disclosure

Individuals who are named in a Disclosure will be supported during the preliminary assessment of the Disclosure and during any subsequent investigation.

Council will provide fair treatment to people who have been mentioned in a report of actual or suspected wrongdoing by informing them of the substance of statements that have been made about them and giving them a reasonable opportunity to respond.

This also includes informing them of the substance of any adverse findings by the Whistleblower Investigator and providing the opportunity to have their response to any allegations set out fairly in the Whistleblower Investigator's report.

6.6 PROVISION OF FEEDBACK

If the whistleblower's identity is known, or they can be contacted through anonymous channels, where possible Council will provide feedback to the whistleblower during the course of the investigation in a way that does not compromise the confidentiality of their identity. The frequency and timeframes for providing feedback will vary according to the nature of the disclosure and the investigation.

The whistleblower will be informed of the outcome of an investigation, where appropriate, and in particular:

- If the whistleblower's concern was substantiated, the action that has been taken or will be taken to address the issues
- If the whistleblower's concern was not substantiated, then that no further action will be taken unless further information becomes available.

There may be circumstances where it is not appropriate to provide details of the outcome to the whistleblower.

7. ROLES AND RESPONSIBILITIES

Position	Responsibility
Council as a whole	<p>Council has a responsibility to establish and maintain a working environment that encourages Council Officers to report wrongdoing and supports them when they do. This includes keeping the identity of reporters confidential where practical and appropriate, and taking steps to protect reporters from reprisal and manage workplace conflict.</p> <p>Council will assess all reports of wrongdoing it receives from Council Officers and deal with them appropriately. Once wrongdoing has been reported, Council takes 'ownership' of the matter. This means it is up to management to decide whether a report should be investigated, and if so, how it should be investigated and by whom. Council will deal with all reports of wrongdoing fairly and reasonably and respect the rights of any person the subject of a report.</p> <p>Council must report on our obligations under the PID Act and statistical information about Public Interest Disclosures in our Annual Report and to the NSW Ombudsman every six months.</p> <p>To ensure Council complies with the PID Act and deals with all reports of</p>

	<p>wrongdoing properly, all Council Officers with roles outlined below and elsewhere in this Policy will receive training on their responsibilities.</p> <p>Council must ensure that all Council Officers are aware of this Policy, the <u>Aged Care Act</u> and the <u>PID Act</u>.</p> <p>Council must nominate at least one employee as being responsible for receiving Disclosures. Clause 3.15 of Council's Code of Conduct Procedure requires the Complaints Coordinator to be a Disclosure Coordinator.</p> <p>The Disclosures Coordinator, the alternative Disclosures Coordinator and Disclosures Officers will be given a Delegation from the CEO to undertake these roles.</p>
CEO (Head of Agency)	<p>The CEO has ultimate responsibility for maintaining the internal reporting system and workplace reporting culture, and ensuring Council complies with the PID Act.</p> <p>The CEO can receive reports from Council Officers and has a responsibility to:</p> <ul style="list-style-type: none"> ▸ assess reports received by or referred to them, to determine whether or not the report should be treated as a PID, and to decide how the report will be dealt with. ▸ deal with reports made under Council's Code of Conduct in accordance with Council's adopted Code of Conduct procedures. ▸ ensure there are strategies in place to support reporters, protect reporters from reprisal and manage workplace conflict that may arise in relation to a report. ▸ make decisions following any investigation or appoint an appropriate decision-maker. ▸ take appropriate remedial action where wrongdoing is substantiated or systemic problems are identified. ▸ refer actual or suspected corrupt conduct to the Independent Commission Against Corruption (ICAC). ▸ refer any evidence of a reprisal offence under Section 20 of the <u>PID Act</u> to the Commissioner of Police or the ICAC.
Disclosure Coordinator/s	<p>The Disclosure Coordinator/s has a central role in Council's internal reporting system. The Disclosures Coordinator can receive and assess reports, and is the primary point of contact within Council for the reporter.</p> <p>The Disclosures Coordinator has a responsibility to:</p> <ul style="list-style-type: none"> ▸ assess reports to determine whether or not a report should be treated as a PID, and to decide how each report will be dealt with (either under delegation or in consultation with the CEO). ▸ deal with reports made under the Council's <u>Code of Conduct</u> in accordance with the Council's adopted Code of Conduct procedures. ▸ coordinate Council's response to a report. ▸ acknowledge reports and provide updates and feedback to the reporter. ▸ assess whether it is possible and appropriate to keep the reporter's identity confidential. ▸ assess the risk of reprisal and workplace conflict related to or likely to arise out of a report, and develop strategies to manage any risk identified. ▸ where required, provide or coordinate support to Council Officers

	<p>involved in the reporting or investigation process, including protecting the interests of any officer the subject of a report.</p> <ul style="list-style-type: none"> ▸ ensure Council complies with the PID Act. ▸ provide six-monthly reports to the NSW Ombudsman in accordance with section 6CA of the PID Act.
Disclosure Officers	<p>Disclosures Officers are additional points of contact within the internal reporting system. They can provide advice about the system and this <u>Internal Reporting Policy (POL-209)</u>, receive reports of wrongdoing and assist Council Officers to make reports.</p> <p>Disclosures Officers have a responsibility to:</p> <ul style="list-style-type: none"> ▸ document, in writing, any reports received verbally and have the document signed and dated by the reporter. ▸ make arrangements to ensure reporters can make reports privately and discreetly when requested, if necessary away from the workplace. ▸ discuss with the reporter any concerns they may have about reprisal or workplace conflict. ▸ carry out preliminary assessment and forward reports to the Disclosures Coordinator or CEO for full assessment.
Managers/Supervisors	<p>The Managers/Supervisors play an important role in managing the immediate workplace of those involved in, or affected by, the internal reporting process. Managers/Supervisors should be aware of this Internal Reporting Policy and are responsible for creating a local work environment where staff are comfortable and confident about reporting wrongdoing.</p> <p>Managers/Supervisors have a responsibility to</p> <ul style="list-style-type: none"> ▸ encourage staff to report known or suspected wrongdoing within Council and support staff when they do. ▸ identify reports made to them in the course of their work which could be PIDs, and assist the staff member to make the report to an officer authorised to receive PIDs under this Policy. ▸ implement local management strategies, in consultation with the Disclosures Coordinator, to minimise the risk of reprisal or workplace conflict in relation to a report. ▸ notify the Disclosures Coordinator or CEO immediately if they believe a staff member is being subjected to reprisal as a result of reporting wrongdoing, or in the case of suspected reprisal by the CEO, notify the Mayor.
Council Officers	<p>All Council Officers play an important role in contributing to a workplace where known or suspected wrongdoing is reported and dealt with appropriately.</p> <p>All Council Officers are obliged to:</p> <ul style="list-style-type: none"> ▸ report all known or suspected wrongdoing and support those who have made reports of wrongdoing; ▸ if requested, assist those dealing with the report, including supplying information on request, cooperating with any investigation and maintaining confidentiality; ▸ treat any staff member or person dealing with a report of wrongdoing

	<p>with courtesy and respect; and</p> <ul style="list-style-type: none"> ▸ respect the rights of any person the subject of reports. <p>Council Officers must not:</p> <ul style="list-style-type: none"> ▸ make false or misleading reports of wrongdoing ▸ victimise or harass anyone who has made a report <p>Additionally, the behaviour of all Council Officers involved in the internal reporting process must adhere to Council's <u>Code of Conduct</u>. A breach of the Code could result in disciplinary action.</p>
Community Service Managers, Team Leaders, Officers (including volunteers)	To communicate, implement and comply with this Policy and related Procedures.

8. EVALUATION AND REVIEW

It is the responsibility of the Manager Community Services, to monitor the adequacy of this Policy and recommend appropriate changes.

This Policy will be formally reviewed every four (4) years or as needed, whichever comes first.

9. NON-COMPLIANCE

Non-compliance could result in a breach of the Code of Conduct Policy and/or disciplinary action.

10. ASSOCIATED DOCUMENTS, DEFINITIONS & ACRONYMS

External:

- Australian Securities and Investments Commission (ASIC) Regulatory Guide 270 Whistleblower Policies

Internal:

- MRC Policy – Public Interest Disclosure (PID) Policy
(or any amended or replacement Policy).

Definitions:

Term	Definition
Council Officer	<p>An officer is defined as being one of the following:</p> <ul style="list-style-type: none"> ▸ An employee, or ▸ A contractor or subcontractor, or ▸ An employee of a contractor or subcontractor, or ▸ An employee of a labour hire company who has been assigned to work in the person's business or undertaking, or ▸ An outworker, or ▸ An apprentice or trainee, or ▸ A student gaining work experience, or ▸ A volunteer

Personal workplace related grievance	<p>A personal workplace related grievance means a grievance about any matter in relation to the discloser's employment, or former employment, having (or tending to have) implications for them personally. This includes:</p> <ul style="list-style-type: none"> ▸ 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.
SIRS	<p>The Serious Incident Response Scheme (SIRS) outlines specific reportable incidents that aged care providers must manage and report. Key reportable incidents include:</p> <ul style="list-style-type: none"> ▸ Unlawful sexual contact or inappropriate sexual conduct; ▸ Death of a person receiving care; ▸ Serious injury of a person receiving care; and/or ▸ Abuse or neglect of a person receiving care. <p>Providers are required to report these incidents to the Aged Care Quality and Safety Commission (ACQSC) within specified timeframes. For more detailed guidance, you can refer to the Aged Care Quality website</p>
Voluntary PID	This is a PID where a report has been made by a Council Officer because they decided, of their own accord, to come forward and disclose what they know.
Mandatory PID	This is a PID where the Council Officer has made a report about serious wrongdoing because they have a legal obligation to make that report, or because making that report is an ordinary aspect of their role or function in an agency.
Witness PID	This is a PID where a person discloses information during an investigation of serious wrongdoing following a request or requirement of the investigator.

11. DOCUMENT CONTROL

Adopted by the CEO under Delegated Authority:

Version No.	Details	Dates	CM9 Reference	Resolution No.
1	Initial Issue	20 October 2025 to today	VF/25/405	N/A
This policy was adopted by the Chief Executive Officer, Stacy Williams			Date:	23/10/25

Council reserves the right to review, vary or revoke this policy at any time
This Policy is scheduled for review in before 2029

NOTE:

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DISCLAIMER:

This document was formulated to be consistent with Murray River Council's legislative obligations and with the scope of Council's powers. This document should be read in conjunction with relevant legislation, guidelines and codes of practice. In the case of any discrepancies, the most recent legislation should prevail. This document does not constitute legal advice. Legal advice should be sought in relation to particular circumstances and liability will not be accepted for losses incurred as a result of reliance on this document.

It is recognised that, from time to time, circumstances may change leading to the need for minor administrative changes to this document. Where an update does not materially alter this, such a change may be made administratively. Examples include a change to the name of a Business Unit, position title or a change to the name of a Federal or State Government department, and a minor update to legislation which does not have a material impact. When such changes are made the version number will be amended and an extension added (eg V#1.1)