



# McGrath Foundation Whistleblower Policy

**Effective date:** 1 June 2026

**Version:** 3.0

**Approved by:** Board

**Review cycle:** Annual

**Policy Owner:** Chief Executive Officer

## Summary:

The McGrath Foundation (the Foundation) is committed to acting with integrity and accountability, and to creating a culture where people feel safe to speak up.

This Policy explains how concerns about serious wrongdoing can be raised safely and confidentially, how those concerns will be handled, and how people who speak up will be protected.

This Policy is designed to support compliance with the *Corporations Act 2001 (Cth)* whistleblower protections, the ACNC Governance Standards, ACNC guidance on managing charity money, the FIA Code, and broader expectations for complaints handling, escalation and management of non-compliance.

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## Purpose

The purpose of this policy is to:

- encourage people to speak up about serious wrongdoing
- provide a safe and confidential way to make a disclosure
- protect eligible whistleblowers from retaliation or other detriment
- explain how disclosures will be assessed, managed and investigated
- support good governance, compliance and public trust in the Foundation.

## Scope

This Policy applies across the whole McGrath Foundation (“the Foundation”), including all programs, fundraising activities, operations, enabling services and strategic initiatives.

## Who the Policy applies to

This Policy applies, to the extent relevant to their role or relationship with the Foundation, to:

- all officers and directors
- team members (including casual, fixed-term and temporary team members)
- volunteers
- contractors, consultants, and suppliers
- associates and others acting for, or on behalf of, the Foundation

Where relevant under law, this Policy applies to:

- former team members and officers
- employees of suppliers and contractors
- relatives, dependants or spouses of eligible persons.

## What this Policy covers

This Policy applies to concerns about serious wrongdoing and reportable conduct connected with the Foundation.

It does not replace our other policies or processes for managing complaints, grievances or concerns, which continue to operate alongside this Policy. Where a concern involves serious wrongdoing, misuse of funds, systemic misconduct, victimisation, or other significant non-compliance, it must be escalated and handled under this Policy (or in conjunction with it).

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## Definitions

For the purposes of this Policy:

- **Disclosure** - a report or concern raised under this Policy about suspected serious wrongdoing.
- **Eligible Whistleblower** - a person who can make a disclosure under this Policy. This includes current and former employees, volunteers, officers, directors, contractors, consultants, suppliers, employees of suppliers, associates, and their relatives, spouses or dependants.
- **Reasonable grounds** - a genuine and reasonable basis to suspect wrongdoing. A person does not need proof, but the concern must be more than rumour, speculation or something they know is false.
- **Reportable Conduct** - serious wrongdoing, misconduct or an improper state of affairs connected to the Foundation. Examples are listed in section 2.
- **Detriment** - harm or disadvantage suffered because a person has made, may make, or is believed to have made a disclosure. It can include dismissal, threats, harassment, discrimination, reputational damage, financial loss or psychological harm.
- **Personal Work-Related Grievance** - a workplace concern that mainly affects the person raising it personally and does not involve serious wrongdoing or broader misconduct.

## Policy Statements

### 1. Speaking up is supported and encouraged

- We support a culture where people feel safe to raise concerns about serious wrongdoing early, and any concerns raised are handled appropriately.
- No person should avoid raising a concern because of fear of retaliation, disadvantage, damage to relationships or concern that the matter may be difficult or sensitive.
- Speaking up is an important part of protecting our Mission, supporters, partners, people, resources and reputation. It supports us to operate lawfully and in an accountable and responsible way.

### 2. This Policy applies to reportable conduct and protected disclosures

- This Policy applies where a person has reasonable grounds to suspect serious wrongdoing, misconduct, or an improper state of affairs connected with the Foundation.
- A disclosure can relate to a one-off event, repeated behaviour, a systemic issue, or an attempted cover-up.

### **Examples of reportable conduct**

Reportable conduct may include:

- fraud, theft, bribery, corruption or other dishonest behaviour
- misuse or improper handling of Foundation money, including donations or grants
- serious financial irregularity, false records, or failure to keep accurate records
- serious breaches of law, regulation, fundraising requirements, ACNC obligations or funding conditions
- serious conflicts of interest, misuse of position, or failure by a director or officer to meet their duties
- serious misconduct, unethical behaviour or systemic control failures
- conduct that puts supporters, team members, volunteers, the public, or public trust at serious risk
- serious safety risks or unsafe practices, especially where issues are repeated or systemic
- serious privacy breaches or misuse of confidential information
- victimisation or retaliation against someone who has spoken up or assisted an investigation
- deliberate concealment of any of the above, or instruction to cover it up.

### **3. Personal work-related grievances and general complaints are managed separately and under the appropriate pathway**

- This Policy is not intended to replace our usual processes for workplace grievances, service complaints, supporter complaints, internal disputes or other day-to-day concerns.
- If a concern is better handled under another policy or process, it may be redirected there. If it involves serious wrongdoing, misuse of funds, victimisation, systemic misconduct or significant non-compliance, it must be handled under this Policy (or alongside it).
- Nothing in this Policy prevents a person from making a disclosure that is protected by law.

- Some concerns may not meet the legal definition of a protected whistleblower disclosure. We will still take concerns seriously and will ensure they are handled under the appropriate process.

#### **4. Eligible whistleblowers can raise concerns through internal or external reporting channels**

- Eligible whistleblowers can raise concerns through our approved internal reporting channels and, where the law allows, through external channels.
- We will maintain reporting options that are accessible and support disclosures being made in writing, verbally and anonymously.
- Details of reporting contacts and channels are set out in the *Addendum*.

#### **5. Anonymous disclosures and confidentiality are respected and supported**

- People may raise concerns anonymously, use a pseudonym, and stay anonymous during and after the process if they choose.
- We must take reasonable steps to protect the identity of a whistleblower and any information likely to lead to their identification.
- Information will only be shared where needed to assess or investigate the matter, or where required or allowed by law. Records of whistleblower matters must be stored securely and only accessed by authorised people.

#### **6. Detrimental conduct, retaliation and victimisation are not tolerated**

- We do not tolerate retaliation, victimisation or other harmful treatment against someone because they have made, may make, or are suspected of making a disclosure, or because they helped with an assessment or investigation.
- This may include dismissal, disciplinary action without proper basis, threats, intimidation, harassment, discrimination, reputational harm, unfair changes to duties, exclusion, financial harm, or psychological harm.
- Any concern about victimisation or retaliation must be treated as a serious matter and escalated immediately.

#### **7. Disclosures are assessed and investigated fairly, independently and proportionately**

- We must assess all disclosures received under this Policy in a timely manner to determine how they should be handled, whether immediate protective action is needed, and whether an investigation is required.
- Matters will be handled fairly, objectively, confidentially and in a way that is proportionate to the seriousness of the issue.

- Investigations will be conducted in a manner that ensures they are free from actual, potential or perceived conflicts of interest. Where needed, we may appoint an internal or external investigator.
- We will keep appropriate records of how matters are assessed, investigated, resolved and closed.

## **8. People involved are supported and protected**

- We will consider the risk of harm or disadvantage to the whistleblower and others involved, and will take reasonable steps to provide support and protection where needed.
- This may include practical workplace adjustments, wellbeing support, changes to reporting lines, or other steps to reduce risk.
- We will also ensure fair treatment of anyone named in a disclosure, including confidentiality and procedural fairness.

## **9. Whistleblowing, complaints and dispute resolution work together**

- We will keep a clear distinction between whistleblower disclosures, general complaints and workplace disputes, while making sure these pathways work together properly.
- Complaints and internal dispute resolution processes must be accessible, fair, timely and documented, and must support escalation where a matter becomes a whistleblower, fraud, safeguarding, people, or compliance issue or risk.
- Fundraising-related complaints must also be handled in line with our fundraising obligations and applicable code requirements.

## **10. Serious matters are escalated appropriately**

- We must escalate whistleblower matters promptly where they involve serious legal, regulatory, financial, reputational, governance or people risk.
- Examples include suspected fraud/corruption/misuse of funds, significant non-compliance, matters involving senior leaders or directors, systemic control failure, High or Extreme risk, or possible regulatory reporting / law enforcement referral.
- Escalation must occur through our governance pathways and in alignment with the *Risk Management Framework*, complaints handling arrangements and non-compliance processes.

## **11. Regulatory and external reporting obligations are considered**

- We must consider whether a matter needs to be reported or referred outside the organisation.

- This may include reporting or referral to regulators, law enforcement, funders, insurers or other external bodies where required or appropriate.
- Where relevant, this includes considering whether reporting to the Australian Charities and Not-for-profits Commission (ACNC), the Australian Securities and Investments Commission (ASIC), the Australian Taxation Office (ATO), or another authority is needed.

## **12. Good faith reporting is supported**

- We will support a person who raises a concern honestly and on reasonable grounds, even if the concern is later not substantiated.
- Knowingly false, malicious or vexatious reports are not protected and may lead to disciplinary or other action.

## **13. Action is taken where issues are identified**

- Where a disclosure identifies wrongdoing, control weaknesses or non-compliance, we will take appropriate action.
- This may include corrective action, disciplinary action, control improvements, training, process changes, risk treatment or external reporting.
- We will also consider whether the matter points to a broader issue that needs to be addressed.

## **14. Records, reporting and confidentiality are maintained**

- We will maintain appropriate records of disclosures, decisions, investigations, actions and outcomes.
- Internal reporting on whistleblower matters must protect confidentiality and focus on themes, risks, actions and lessons learned unless more detailed reporting is necessary and lawful.
- Records must be retained in accordance with our privacy, confidentiality and records management requirements.

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## Roles and Responsibilities

The **Board** approves this Policy and oversees serious whistleblower matters and the overall effectiveness of the Foundation's whistleblower framework.

The **Chief Executive Officer (CEO)** owns this Policy and is accountable for making sure disclosures are handled appropriately, fairly and lawfully, including escalation where needed.

The **Head of People and Culture** plays a key supporting role in whistleblower matters that involve people, conduct or workplace issues. This includes receiving disclosures as a nominated contact; leading or supporting investigations where appropriate; helping ensure procedural fairness and appropriate support for people involved; and implementing people-related outcomes and actions.

The **Risk & Compliance Manager** is responsible for administering this Policy and supporting the handling of disclosures, including triage, risk assessment, escalation, non-compliance management, recordkeeping, trend reporting and control improvement.

**People Leaders** must encourage speaking up, escalate concerns promptly, support confidentiality and non-retaliation, and must not attempt to investigate or manage protected disclosures outside the authorised process unless directed.


**All team members** are expected to speak up about serious wrongdoing, escalate concerns promptly where needed, cooperate with authorised assessments and investigations, maintain confidentiality where required, and not engage in retaliation or victimisation.

## Oversight, monitoring and review

We will maintain oversight of this Policy through our governance, risk and compliance processes. This includes oversight of serious whistleblower matters, themes and trends, protection of whistleblowers, investigation outcomes, control improvements and remediation actions, and compliance with reporting obligations.

This Policy will be reviewed annually, or earlier if needed because of legal or regulatory change, a significant incident or disclosure, audit findings or governance review, or changes to our operating model or related policies.

We will also monitor how this Policy works in practice, including whether reporting pathways are accessible, matters are handled in a timely way, and any lessons learned

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are acted on. A copy of this Policy is available on the McGrath Foundation public website.

## Supporting Documents

This Policy is supported by the following McGrath Foundation governance documents:

- Workplace Standards Policy
- Workplace Health and Safety Policy
- Risk Management Framework
- Feedback and Complaints Policy

## Interpretation and Guidance

If any additional guidance and further interpretation are required, please contact the Chief Executive Officer or the Risk & Compliance Manager.

## Revision History

Version	Location in Document	Comment/Description of change
3.0	Throughout	<p>Transitioned to standard policy template</p> <p>Clarified scope and structure</p> <p>Updated roles and responsibilities in line with organisational change</p>
	Addendum A	<p>Separated procedural detail to the Addendum</p> <p>Consolidated whistleblower contacts into a single table and updated contact details</p>

# Addendum A \_ Whistleblower Procedures and Reporting Channels

## A1. How to Make a Disclosure

A disclosure may be made verbally or in writing, and may be anonymous (including using a pseudonym). A person making a disclosure does not need to use legal language or prove the concern - but should provide as much information as they can, including what happened, who was involved, when it occurred, and any supporting information available.

## A2. Who a disclosure can be made to

A disclosure may be made through any of the channels below. These options include internal disclosure officers, an independent hotline, and other recognised recipients under law. Disclosures can be made during or outside office hours, and the person making the disclosure can remain anonymous throughout the process if they choose.

Category	Who / Role	How to contact	When to use
Disclosure Officer (internal)	Head of People and Culture	Email: <a href="mailto:emma.schwebel@mcgrathfoundation.com.au">emma.schwebel@mcgrathfoundation.com.au</a>  Phone: 02 8962 6164  Address: C/O Level 1, 76 Berry Street, North Sydney, 2060	If comfortable reporting internally
Disclosure Officer (internal)	Chief Executive Officer	Email: <a href="mailto:ryan.barlow@mcgrathfoundation.com.au">ryan.barlow@mcgrathfoundation.com.au</a>  Phone: 02 8962 6153	If the matter is serious/urgent, or prefer to contact the CEO

		Address: C/O Level 1, 76 Berry Street, North Sydney, 2060	
<b>Anonymous written disclosure</b>	Letter to the CEO marked "CONFIDENTIAL"	Post: Chief Executive Officer, McGrath Foundation Limited, C/O Level 1, 76 Berry Street, North Sydney, 2060	For a written anonymous option or outside office hours
<b>Independent hotline</b>	ProAct Link (ProActive Strategies - external reporting service)	Online: <a href="http://www.proactlink.com.au">www.proactlink.com.au</a> Phone: 1800 888 340 Email: <a href="mailto:report@proactlink.com.au">report@proactlink.com.au</a>	For an independent channel or prefer not to speak internally
<b>Other eligible recipients (internal)</b>	Officer (Director or Company Secretary)	Contact via Foundation channels	Recognised recipients under the law
<b>Other eligible recipients (internal)</b>	Senior Manager (e.g. Board member, Leadership Team member)	Contact via Foundation channels	Recognised recipients under the law
<b>Auditor</b>	Auditor (internal or external - KPMG / audit team member)	Contact via audit engagement channels	Recognised recipient
<b>Legal advice</b>	Legal practitioner	Contact your chosen lawyer	Legal advice about



			protections/ process
<b>Regulator</b>	ASIC / APRA / ACNC	Via regulator channels	External disclosure where permitted/ appropriate

### A3. What happens after a disclosure is received

Once a disclosure is received, we will usually:

- acknowledge receipt where possible (including via anonymous channels where a contact method exists)
- assess whether the matter falls under this Policy and consider any immediate risks, including risk of detriment
- decide whether the matter should be investigated and who should handle it
- keep appropriate records and manage confidentiality
- provide updates where appropriate and possible.

If the issue is not a whistleblower matter, it will be redirected to another appropriate process.

If it involves serious wrongdoing, misuse of funds, victimisation, systemic misconduct or significant non-compliance, it will be handled under this Policy (or alongside it).

### A4. Protection and investigation arrangements

Where needed following the initial assessment, we will appoint people to manage protection and fair investigation arrangements.

This may include:

- A **Protection Officer** - responsible for considering and managing the risk of detriment to the whistleblower and others involved.
- An **Investigation Officer** - responsible for assessing and, where appropriate, investigating the disclosure.

These roles may be held by different people and may be filled by internal or external parties. Appointments must avoid actual, potential or perceived conflicts of interest.

### **Conflict-safe appointment approach (role-based):**

To help maintain independence:

- where a team member is implicated, the Chief Executive Officer may appoint the Protection Officer and Investigation Officer
- where the Chief Executive Officer or a Board member is implicated, the Board Chair may appoint these roles
- where the Board Chair is implicated, another senior Board officeholder may appoint these roles.

We will ensure confidentiality is maintained throughout the assessment and investigation process, and that matters are handled with procedural fairness for all parties.

### **A5. Investigation approach**

Where an investigation is required, it will be handled in a way that is fair, independent, confidential and proportionate to the seriousness of the issue.

The exact steps and timing will depend on the nature of the matter, but may include:

- preliminary assessment
- investigation planning
- gathering information
- speaking with relevant people
- making findings
- documenting outcomes and recommendations.

Where possible and appropriate, the whistleblower will be updated during the process and advised of the outcome (noting confidentiality and that they may not receive a full investigation report).

### **A6. Outcomes, remediation and Continuous Improvement**

If a disclosure is substantiated, we may take one or more actions, including:

- disciplinary action
- referral to a regulator or law enforcement
- control improvements

- policy or process changes
- training or communication
- remediation of any identified compliance issue.

Feedback on the outcome may be provided to the whistleblower where lawful and appropriate.

## **A7. Escalation and external reporting**

Serious matters may be escalated to senior management, the Board or Board committee, external legal advisers, regulators or law enforcement.

Escalation will be considered where a matter involves:

- suspected fraud, corruption or misuse of funds
- serious legal or regulatory non-compliance
- systemic governance or control failure
- significant risk to people or public trust
- senior leaders or directors
- possible external reporting obligations.

Some tax-related disclosures may attract additional protections under Australian tax law.

## **A8. Recordkeeping and confidentiality**

Records relating to disclosures will be kept securely and access will be limited to authorised people.

Information will be handled carefully to protect confidentiality and comply with privacy and legal obligations.

Where reporting is provided internally for governance purposes, it should be de-identified unless more detail is necessary and lawful.

## **A9. Review and continuous improvement**

We may use information from disclosures, in a de-identified way and only where appropriate, to improve governance, controls, training, risk management, complaints handling and compliance frameworks across the organisation.