

WHISTLEBLOWER POLICY

Policy number	03	Version	01
Drafted by	Company Secretary	Approved by Board on	16 May 2024
Responsible person	CEO	Scheduled review date	Two-yearly 2026

1. PURPOSE

This policy is to outline the framework for receiving, investigating and addressing allegations of wrongdoing where it concerns the activities of the Migration Institute of Australia (MIA) or current and former directors, officers, employees and contractors of the MIA. It helps to provide a supportive work environment in which eligible persons can raise issues of legitimate concern to them and to the MIA.

This policy addresses requirements of the *Corporations Act 2001 (Cth)* Part 9.4AAA Section 1317AI.

2. POLICY STATEMENT

The Migration Institute of Australia Limited (MIA) is committed to the highest standards of ethical behaviour and good corporate governance. The MIA will not tolerate any illegal or undesirable conduct that may result in its reputation being brought into disrepute.

This policy documents the Institute's intent at maintaining an environment in which people are able to disclose and report their concerns about any "disclosable matters" that they believe may be occurring in the name of the MIA, in an appropriate way and without fear of retaliatory action.

This policy sets out what is a "disclosable matter", how to make a report about a "disclosable matter(s)", what protections apply in those circumstances, and the processes at MIA for responding to reports about "disclosable matters".

This policy compliments normal reporting and communication channels within the Institute.

This policy is not intended to replace the processes and procedures governed by the *Fair Work Act 2009 (Cth)*.

3. PRINCIPLES

- All concerns raised will be treated fairly and properly
- The MIA will apply principles of procedural fairness and natural justice to the conduct of any investigation and resultant findings arising under this Policy.
- The MIA will not tolerate the harassment or victimisation of anyone raising a genuine concern
- Any individual making a disclosure will retain their anonymity unless they agree otherwise
- The MIA will ensure that any individual raising a concern is aware of who is handling the matter

4. PROCEDURES

The attached policy contains the procedures to follow if an eligible person believes reasonably and in good faith that wrongdoing exists in the workplace.

Eligible persons who have raised concerns internally, will be informed of who is handling the matters, how they can make contact with them and if there is any further assistance required. The identity of the person will not be disclosed without prior consent.

5. RESPONSIBILITIES

- **CEO / Management** – establishing and operating effective internal whistleblowing procedures, identifying risks and strategies to manage, regular reporting of issues, maintain compliance with policy and laws governing whistleblowing.
- **Authorised Recipients** – receiving alerts/reports of possible wrongdoing, maintaining two-way communication with the eligible whistleblower and ensuring dealt with appropriately.
- **Board/ All Directors** – maintaining oversight and requiring independent assurance that the whistleblowing policy and procedures are effective in achieving the appropriate outcomes, policy approval, risk management and ensuring compliance with the policy and relevant laws.
- **Corporate Governance Committee** – handles and investigates whistleblower disclosures as appropriate, reviewing of the MIA’s whistleblowing policy and procedures, assessing the effectiveness and ensuring the whistleblowing practices are consistent with the policy. All “disclosable matters” will ultimately be reported to the Corporate Governance Committee.
- **Lead Investigator** – the person leading the investigation will report their findings to the Chair of the Corporate Governance Committee and where appropriate advise the recommended course of action (if any) the MIA should take in response to the findings.
- **Chairs of the Corporate Governance Committee and Finance and Audit Committee** (or other appropriate decision-maker, as decided depending on the circumstances) – may act as an Authorised Recipient, receive disclosures and act as the main contact point.
- **Company Secretary** – supports the board/committee, administrative support as appropriate.

6. RELATED DOCUMENTS

- Privacy Policy
- Corporate Governance Board Charter and Committee Terms of Reference

7. DEFINITIONS

A “**Whistleblower**” is anyone who makes a report of a “disclosable matter” under the Policy, and is, or has previously been, a director, officer, employee, member, volunteer, supplier of goods or services or an associate of MIA or is a relative or dependent of such persons.

A “**Protected Disclosure**” is an eligible report made in accordance with this Policy – refer Section 2.

8. AUTHORISATION



Helen Duncan
Chief Executive Officer
16 May 2024

Whistleblower Policy

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1. Purpose

The purpose of this Policy is:

- a. to set out the scope of, and protections available under, the Whistleblower Protection Regime and how disclosures may be made by eligible whistleblowers and handled by The Migration Institute of Australia Limited (MIA);
- b. ensure individuals who disclose wrongdoing can do so safely, securely and with confidence that they will be protected and supported;
- c. ensure disclosures are dealt with appropriately and on a timely basis;
- d. provide transparency around the association's framework for receiving, handling and investigating disclosures;
- e. promote a positive culture of openness, honesty and transparency and to encourage more disclosures of wrongdoing; and
- f. help deter wrongdoing, promote better compliance with the law and promote a more ethical culture, by increasing awareness that there is a higher likelihood that wrongdoing will be reported.

2. Example of disclosures that may be protected under this policy

- a. Illegal conduct, such as theft, dealing in, or use of illicit drugs, violence or threatened violence, and criminal damage against property;
- b. fraud, money laundering or misappropriation of funds;
- c. offering or accepting a bribe;
- d. financial irregularities;
- e. failure to comply with, or breach of, legal or regulatory requirements; and
- f. victimisation – see section 8.

3. Example of disclosures that do not qualify protection under this policy

- a. concerns a personal work-related grievance of the eligible whistleblower like:
 - a. an interpersonal conflict between the discloser and another employee; and
 - b. decisions that do not involve a breach of workplace laws:
 - i. about the engagement, transfer or promotion of the discloser;
 - ii. about the terms and conditions of engagement of the discloser; or
 - iii. to suspend or terminate the engagement of the discloser, or otherwise to discipline the discloser.

4. Who can be an eligible whistleblower

- a. A volunteer or an employee of the MIA (including without limitation a part time, fixed term or temporary employee);
- b. Directors and Officers of the MIA;
- c. Members of the MIA;
- d. a person who supplies goods or services to the MIA (whether paid or unpaid), and employees of those suppliers;
- e. an individual who is an associate of the MIA; or
- f. a relative, dependent or a dependent of the spouse of any individual referred to in paragraphs (a) to (e) above.

5. Who can receive a disclosure

For protections under the Whistleblower Protection Regime to apply, a disclosure must be made directly to an 'eligible recipient', regardless of whether the eligible whistleblower or the recipient recognises that the disclosure qualifies for protection at that time.

The MIA encourages disclosures be made internally to the persons referred to below (Authorised Recipient), each of whom has relevant experience to deal with such matters. Authorised Recipients can be contacted in the following ways: to the Chief Executive Officer at CEO@mia.org.au ; or to the Senior Manager Stakeholder Relations and Advocacy: Level 3, 33 York St Sydney NSW 2000: Bronwyn.Markey@mia.org.au

Where the whistleblower believes the MIA's internal processes are inappropriate because:

- a) the alleged "disclosable matter" involves a director or officer of an executive of the MIA; or
- b) the whistleblower considers the matter should not be referred to the Authorised Recipients,

then the whistleblower may make that report to the Chair of the Corporate Governance Committee at whistleblowerChairCGC@mia.org.au (for non-financial matters) or the Chair of the Finance and Audit Committee at whistleblowerChairFAC@miag.org.au (for financial and fraud related matters).

Disclosures may be made anonymously or on a confidential basis by eligible whistleblowers. They can refuse to answer questions that they feel could reveal their identity during follow-up conversations. A discloser may choose to adopt a pseudonym for the purposes of disclosure and not use their true name.

However, eligible whistleblowers are encouraged to consent in writing to having their identity disclosed as this will assist in a more effective investigation of the matter and will enable the MIA to keep the eligible whistleblower informed of the progress of the investigation.

At the least, anonymous disclosers should maintain two-way communication with their Authorised Recipient so the MIA can ask follow-up questions or provide feedback.

The MIA's approach is intended to help build confidence and trust in this Policy as well as its processes and procedures.

6. How disclosures may be made

Disclosures may be made anonymously or on a confidential basis by eligible whistleblowers including through the relevant Authorised Recipient email addresses. They can refuse to answer questions that they feel could reveal their identity during follow-up conversations. A discloser may choose to adopt a pseudonym for the purposes of disclosure and not use their true name.

However, whistleblowers are encouraged to consent in writing to having their identity disclosed as this will assist in a more effective investigation of the matter and will enable the MIA to keep the eligible whistleblower informed of the progress of the investigation.

At the least, anonymous disclosers should maintain two-way communication with their Authorised Recipient so the MIA can ask follow-up questions or provide feedback.

The MIA's approach is intended to help build confidence and trust in this Policy as well as its processes and procedures.

7. Handling and Investigation of Disclosures

The Corporate Governance Committee will be responsible for handling and investigating a disclosure.

If the MIA determines that it will need to investigate a disclosure, the MIA will need to determine:

- the nature and scope of the investigation;
- the persons within and/or outside the MIA that should lead the investigation;
- the nature of any technical, financial or legal advice that may be required to support the investigation; and
- the timeframe for the investigation.

The MIA will acknowledge a discloser after receiving their disclosure and provide updates during the key stages, comprising:

- a. when the investigation process has begun;
- b. while the investigation is in progress; and
- c. after the investigation has been finalised.

The MIA will aim to keep the eligible whistleblower regularly updated and informed of the progress of the investigation. However, due to obligations of confidentiality, the MIA may be prohibited from providing details of the investigation or any disciplinary action taken as a result of an investigation. In addition, the frequency and timeframe may vary depending on the nature of the disclosure.

8. Protection against victimisation

For disclosures which qualify for protection under Policy, it is unlawful for a person to:

- a. engage in conduct that causes any detriment to an eligible whistleblower or another person because the person engaging in the conduct believes or suspects that the eligible whistleblower or another person made, may have made, proposes to make, or could make, a disclosure; or

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- b. make a threat (whether express or implied, conditional or unconditional, intentional or reckless) to cause any detriment to an eligible whistleblower or another person because the whistleblower or another person has made, or may make, a disclosure.

For the purposes of this Policy, detriment includes:

- a. dismissal of an employee;
- b. injury of an employee in their employment;
- c. alteration of an employee's position or duties to their disadvantage;
- d. discrimination between an employee and other employees;
- e. harassment or intimidation of a person;
- f. harm or injury to a person, including psychological harm;
- g. damaging a person's property, reputation, business or financial position; and any other damage to a person.

Penalties apply for engaging in any of the conduct referred to above.

9. Vexatious and deliberately false disclosures

A discloser will only be protected by the MIA if they have objectively reasonable grounds to suspect that the information that they disclose concerns misconduct or an improper state of affairs or circumstances.

The protections available under the Whistleblower Protection Regime will not extend to deliberately false or vexatious disclosures or complaints.

10. Fair treatment of individuals named in a disclosure

It is important that all investigations of disclosures made under this Policy are conducted in a procedurally fair and confidential manner, to ensure the fair treatment of any individuals named in the protected disclosure or to whom the protected disclosure relates.

11. Consequences for breach of this Policy

All employees and officers of the MIA are responsible for understanding and complying with this Policy. Breach of this Policy may be regarded as misconduct and may lead to disciplinary action up to and including termination of employment or engagement, as applicable.

12. Access to this Policy

This Policy including any updates to this Policy will be made available to employees of the MIA through the relevant the MIA shared drive. In addition, this Policy will be published on the MIA website, and will be incorporated in employee induction information and training for new starters.

13. Reporting of material matters to the Corporate Governance Committee

The Corporate Governance Committee will be notified of any material matters reported under this Policy at each of its scheduled meetings, having regard to the obligations of confidentiality set out in this Policy.

14. Regular Review of Policy

This Policy must be reviewed as required from time to time to ensure it remains consistent with the association's objectives and existing regulatory requirements and recommendations.

15. Last Updated

15.1 Approval and Review

Lead Author	CEO
Approver	Board
Date endorsed	
Date reviewed	
Timeframe for next review	2 yearly / 2026

15.2 Version History

	Date	Action
1	January 2024	Created