

# Protected Disclosures & Whistleblowing Procedure

---

<b>Procedure Number:</b>	<b>1.6.1.26(a)</b>
<b>Responsible Officer:</b>	<b>Director Assurance and Compliance</b>
<b>Policy Editor/Contact:</b>	<b>Director Assurance and Compliance</b>
<b>Approving Authority:</b>	<b>Executive Committee</b>
<b>Date Approved:</b>	<b>29 September 2022</b>
<b>Review Date:</b>	<b>September 2025</b>

## 1. Purpose

The Whistleblowing Procedure outlines the way in which individuals can internally raise serious concerns and will ensure that the University of the South Pacific will respond to matters raised by whistleblowers through the approved avenues and using the processes described in this procedure document.

## 2. Scope

The Whistleblowing Procedure describe the processes that will be undertaken to address the disclosures made under the Protected Disclosure & Whistleblowing policy relating but not limited to:

- a criminal offence;
- a failure to comply with any legal obligations;
- a miscarriage of justice
- endangering the health or safety of any individual (includes risks to the general public as well as other employees or students of the University);
- significant damaging of the environment
- financial or non-financial maladministration and malpractice, bribery or fraud
- evidence of academic or professional malpractice e.g. falsifying or misrepresenting academic qualifications
- failure of an individual(s) to disclose a serious conflict of interest
- action or inaction that could lead to damaging the reputation of the University, (such as a failure to notify management of any health and safety issues which may cause injury to an individual on University premises or any breaches of relevant requirements relating to research which is governed by legislation/statutory requirements)

## 3. Procedure

### *3.a. Reporting a Serious Wrongdoing*

- i) Anyone who has become aware of and has concerns about serious wrongdoing connected with this University but fears reprisal, may make a whistleblowing disclosure regarding those concerns by:
  - Submitting disclosures directly through the [University's Whistleblowing Platform](#);  
or
  - Filling in the Whistleblowing Reporting Form and submitting it directly to any of the Whistleblowing Disclosure Officers.

- ii) If a whistleblower is not comfortable about reporting the allegation of wrongdoing via the [University's Whistleblowing Platform](#) or to any member of the University, the whistleblower may report to the External Auditor of the University using the Whistleblowing Reporting Form.
- iii) If a disclosure of a wrongdoing is made to any member of the University other than an Authorised Disclosure Officer, it must be immediately submitted via the [University's Whistleblowing Platform](#) or forwarded in confidence to an Authorised Disclosure Officer.
- iv) All disclosures submitted outside the [University's Whistleblowing Platform](#) must use the Whistleblower Reporting Form for it to be considered as this form will curtail malicious and unfounded allegations being submitted for investigation.
- v) Investigation and disciplinary actions will be taken against employees who have intentionally reported false information or have otherwise acted in bad faith to cause an investigation that is ill-founded. This is categorized as a gross misconduct.
- vi) The Authorised Disclosure Officers for the University are the:
  - Whistle-blower Disclosure Coordinator – Director Assurance and Compliance;
  - Whistle-blower Protection Officer – Executive Director People & Workforce Strategy; and
  - Members of Senior Management Team.

### *3.b. Confidentiality*

- i) The University is committed to preserving the confidentiality of the identity of the whistleblower. Therefore, any recipient of a protected disclosure, or any employee approached for assistance, advice or support in making a protected disclosure, must endeavour not to disclose information that might identify the whistleblower who made the protected disclosure unless they have their written consent to do so.
- ii) Notwithstanding the University's commitment to preserve confidentiality of the identity of the whistleblower, the Vice – Chancellor and any Whistleblowing Investigation Officer may disclose information that might identify the whistleblower if they reasonably believe this is essential:
  - For the effective investigation of the allegations in the protected disclosure;
  - To prevent serious risk to public health & safety or the environment; or
  - To comply with the principles of natural justice.
- iii) Information coming into the possession of a member of the University from a whistleblower must not be released to any person who is not an authorised recipient of the disclosures or not involved in the conduct of the investigation of the disclosures.
- iv) A declaration of confidentiality will be signed by the whistleblower, those engaged in the handling of the whistleblowers report and those who will be interviewed or engaged in the course of the investigation.
- v) Although whistleblowers have the right to disclose serious wrongdoing anonymously, the University strongly recommends that whistleblowers identify themselves so the University can ensure the necessary protection and support is provided.
- vi) If an anonymous disclosure is made, the whistleblower must ensure that the disclosure is supported by the provision of all relevant details as per the Whistleblower Reporting form and evidence to substantiate the disclosure.

### *3.c. Protection of Whistleblowers*

- i) The Whistle-blower Protection Officer for the University is the Executive Director People & Workforce Strategy. However, in the instance where the whistle has been blown against a member of the Human Resources section, the Whistle-blower Protection Officer will be the Director Assurance & Compliance.
- ii) Complaints about a breach of confidentiality or victimization in connection with a Whistleblower's disclosure or attempted disclosure of wrongdoing should be directed to the Whistleblower Protection Officer.
- iii) The Whistleblower Protection Officer will direct such complaints to be investigated as a separate matter by a senior experienced person, who is not conflicted with the protected disclosure. The results of the investigation will be reported to the Executive Director People & Workforce Strategy.
- iv) If it is established that a breach of confidentiality or victimization has occurred, the Executive Director People & Workforce Strategy must be notified to ensure all reasonable steps are taken to stop the activity and protect the Whistleblower. This may include disciplinary action against those in breach of confidentiality or involved in victimization and is categorized as a gross misconduct.
- v) Where appropriate, the Whistle-blower Protection Officer may take positive steps to protect the whistleblower from a breach of confidentiality or victimization which includes but not limited to:
  - Seeking approval from the Vice-Chancellor and President to grant specified leave of absence to the whistleblower; or
  - Making alternative arrangements of work for the whistleblower.
- vi) The protection of the whistleblower does not apply to an employee:
  - who is an anonymous whistleblower unknown to the University;
    - who makes a disclosure of information which he/she knows to be false or has otherwise acted in bad faith; or
    - who has not volunteered information but has provided information after being required to do so by law or demonstrated hostility during the course of an investigation of the matter.

### *3.d. Handling of Protected Disclosures*

- i) All Whistleblower Reporting forms including those submitted to the Authorized Disclosure Officers or the External Auditor, except those against any member of the Assurance and Compliance Section, are to be forwarded to the Director Assurance & Compliance. The Senior Fraud & Ethics Investigator will transfer the data from these forms to the [University's Whistleblowing Platform](#) and carry out the preliminary assessment of the disclosures on this platform, to determine the grounds for proceeding into a full scale investigation.
- ii) Whistleblower Reporting forms against any member of the Assurance and Compliance Section are to be forwarded to the Vice-Chancellor & President of the University. The Executive Officer for the Vice Chancellor will transfer the data from these forms to the [University's Whistleblowing Platform](#). The Vice – Chancellor will appoint an independent Whistleblowing Investigation Officer to carry out the preliminary assessment of these disclosures to determine the grounds for proceeding into a full scale investigation.

- iii) If the review of disclosures establishes that there are no grounds for proceeding further, the person making the disclosure will be informed of this decision and the reasons for this.
- iv) If the review of the disclosures confirm that this disclosure falls within the scope of another procedure, they will advise the whistleblower of this and refer it to the relevant manager for appropriate action. This does not mean that a concern is not taken seriously but that it can be addressed more effectively using the relevant procedure such as staff grievances will be dealt with under the Staff Grievance procedure.
- v) If no action is taken, the reason for this will be explained to the whistleblower who has made the disclosure.
- vi) The whistleblower will be kept informed as to the handling of his disclosures and given as much feedback as appropriate in respect of the outcome, as long as it does not infringe on the duty of confidence owed to someone else.

*3.e. Separation of Responsibilities of Whistleblower Protection Officer and Whistleblowing Investigation Officer*

- i) The Whistleblower Protection Officer is responsible for safeguarding the interests of Whistleblowers under this Policy
- ii) The Whistleblowing Investigation Officer is responsible for conducting preliminary assessment of protected disclosures and full investigation into the misconduct which is the subject of the disclosure.
- iii) The roles of the Whistleblower Protection Officer and the Whistleblowing Investigation Officer are separate and will not be performed by the same person.

*3.f. Investigation*

- i) The Director Assurance and Compliance as the Whistleblower Disclosure Coordinator will:
  - determine which cases will be investigated by the Assurance and Compliance section and which ones will be referred to the Human Resources department or outsourced for investigation;
  - determine the investigation process for investigating whistleblower disclosures made to the University;
  - develop and implement a strategy to investigate Fraud and Corrupt practices;
  - ensure that the investigation is thorough, appropriate and free from conflicts of interest; and
  - ensure that the Whistleblowing Investigation Officer is supported by other individuals with relevant expertise within or external to the University as and when required in the course of the investigation.
- ii) Investigators will have authority to access University records and interview any staff for the purpose of executing a fair and objective investigation process.
- iii) Investigation and disciplinary actions will be taken against University Personnel who willfully withhold, destroy records or information pertinent to an investigation, deliberately lie to an investigator, tamper with evidence or interfere with witnesses to pervert the cause of justice. This is categorized as a gross misconduct.
- iv) Principles of natural justice will apply to all investigations so that the investigation is conducted without bias and the matters which are the subject of the investigation are

made known to the person who is the subject of the disclosure and that person is given an adequate opportunity to respond to those matters.

- v) The investigation report detailing steps taken, the outcome of the investigation, the seriousness of misconduct or the recommended disciplinary action and steps taken will be documented for the purpose of review by an independent reviewer and in line with the Staff Disciplinary Ordinance.
- vi) The allegations/charges of misconduct with relevant disclosures will be provided to the staff under investigation and he will be given an opportunity to respond within the timeframe prescribed in the Staff Disciplinary Ordinance or as advised by either the Executive Director People & Workforce Strategy or the Vice-Chancellor.
- vii) Allegations against any Council Member including the Vice-Chancellor will be dealt with under the procedures defined by the USP Council.

### *3.g. Remediation Actions*

The investigation team will put together a summary of agreed management remediation actions that need to be undertaken to resolve any gaps in USP's control environment identified during the investigations. These remediation actions will be tracked and monitored by the investigation unit that carried out the investigations.

### *3.h. Reporting to External Stakeholders*

- i) For all Fiji matters that meet the elements of offences from sections 3 to 9 of the [Prevention of Bribery Acts 2007](#)<sup>1</sup> and any University personnel who has acted in a fraudulent manner must be reported to the Commissioner of the Fiji Police Force by the Director Assurance & Compliance as soon as reasonably practicable. In other matters that are criminal in nature or where the University has suffered a financial loss as a result of the misconduct by staff from any of its locations, the Director Assurance & Compliance in consultation with the Executive Director People & Workforce Strategy may refer the matter to the relevant Law Enforcement agencies.
- ii) The Director Assurance & Compliance will be responsible for reporting to the University's donor partners on fraud, corruption or serious criminal offences if required to do so under the partnership agreements.

### *3.i. Quarterly Reporting to Internal Key Stakeholders*

A summary of reported cases will be provided to the USP Operational Risk Executive Committee and the Audit and Risk Committee on a quarterly basis as follows:

- i) Gross or Major Misconduct by University Personnel
- ii) Regulatory breaches
- iii) Criminal matters

---

<sup>1</sup> <sup>1</sup> Schedule 1 of the [Prevention of Bribery Acts 2007](#)

<sup>1</sup> The [Prevention of Bribery Acts 2007](#), defines public servant in section 2(1) as any prescribed officer or employee of a Public Body. The [Crimes Act 2009](#) also defines "public official" in section 4, as any person who holds or performs the duties of an office established by or under any law. The University of the South Pacific is established under the University of the South Pacific Act in the Laws of Fiji.

#### **4. Related documents**

[Charter of the University](#)  
[Conflict of Interest Policy](#)  
[Crimes Act 2009](#)  
[Finance Regulation](#)  
[Fraud Policy](#)  
[Handling of complaints against the  
Chair & Deputy Chair of Council and  
Chairs of Council Committees](#)

[Ordinance for the Discipline of Staff](#)  
[Prevention of Bribery Act 2007](#)  
[Protected Disclosures & Whistleblowing Policy](#)  
[Statutes of the University of the South Pacific](#)  
[USP Vice - Chancellor Ordinance \(2015\)](#)  
[USP Council Code of Conduct](#)  
[MFAT Partner Agreement](#)  
[DFAT Partner Agreement](#)

#### **5. References**

This policy has borrowed information from the following Universities which are acknowledged:

[The University of Adelaide](#)  
[The University of Auckland](#)

[The University of Melbourne](#)  
[The University of Sheffield](#)