

Corruption, Fraud and Mismanagement Procedure

Purpose

1. This Procedure gives effect to the Corruption, Fraud and Mismanagement Policy.

Scope

2. This Policy applies to all GHE staff.
3. The conduct of Board and committee members is managed under the provisions in the relevant Terms of Reference and the **Board Appointment, Renewal and Removal Policy**.
4. Allegations of misconduct by a student are managed under the provisions of the **Student Non-Academic Conduct and Misconduct Policy**.

Definitions

5. Definitions for key terms are presented in the Glossary of Terms which may be accessed on the GHE website at <https://www.globalhe.edu.au/policy>

Suite documents

6. This Procedure is linked to the Corruption, Fraud and Mismanagement Policy.

Procedure

7. GHE's approach to the handling of fraud, corruption and mismanagement is based on [Australian Standard for Fraud and Corruption Control AS 8001:2008](#).

Prevention

8. GHE will ensure that all staff have a general awareness of what constitutes fraud, corruption and mismanagement, and how they should respond if this activity is detected or suspected. The Operations Director will ensure that this is achieved through the inclusion of relevant information into staff induction processes, including the provisions in this and related policies, and refresher training for existing staff.
9. The Operations Director will also ensure that:
 - a) all staff with management responsibilities have appropriate levels of training and professional development for their roles;
 - b) operational systems have appropriate built-in controls and business rules to prevent fraud and corruption as much as possible, and to support early detection where it does occur;
 - c) internal reviews of all areas are undertaken at least annually and any material changes in circumstances or risk ratings are reported to the Audit and Risk Committee;
 - d) all new potential recruits to GHE are subject to the following pre-employment checks:
 - i. verification of identity and qualifications;
 - ii. police checks;
 - iii. comprehensive and direct referee checks.

10. Senior managers and supervisors will:
 - a) be alert to the possibilities for mismanagement, fraud and corruption in their areas of activity;
 - b) assess risks associated with these activities;
 - c) actively manage those risks according to the provisions in GHE's **Risk Management Policy**.

Detection

11. GHE supports the disclosure by individuals of wrongdoing so that appropriate action can be undertaken.
12. All staff are encouraged to report any suspected fraud, corruption or mismanagement as soon as possible to their immediate supervisor. If for any reason this is not appropriate the report should be made to the relevant senior manager, being the Academic Director or Operations Director who should in turn submit the report to the Chief Executive Officer or alternative delegate where required.
13. Reports can be made orally or in writing and should clearly explain the basis for the allegation. GHE will treat all information disclosed in a confidential manner so far as circumstances permit and will provide appropriate protection for those who make disclosures in accordance with the *Whistleblower Protection Act 1993 (SA)*.
14. All staff are expected to operate in good faith in respect of any allegations made and will be required to cooperate with any investigation.
15. On receiving any report of fraud or corruption the Chief Executive Officer, or alternative delegate where required, must:
 - a) advise General Counsel;
 - b) communicate any reports that have the potential to impact on the operations or reputation of GHE to the Chair of the Audit and Risk Committee;
 - c) submit the report to the Board of Directors.
16. The regular analysis of data such as management accounting reports and the periodic reviews of transactions will further support the detection of suspicious activity.

Response

17. All allegations of fraud, corruption or mismanagement must be appropriately recorded, investigated and resolved.
18. Depending on the nature of the report received the Board of Directors may direct that a working group be convened to manage an investigation.
19. The working group will determine the appropriate course of action, which may include:
 - a) the appointment of an independent investigator;
 - b) disciplinary action under the relevant employment agreement;
 - c) referral to law enforcement agencies and/or other external agencies as appropriate;
 - d) a strategy or process to recover money, assets or property.

Recording and reporting

20. GHE will accommodate any duty to report to or cooperate with external agencies.
21. The Board of Directors will authorise:
 - a) any external communications in relation to any allegation, investigation or outcome;
 - b) any referral to regulatory organisations, funding bodies or law enforcement agency.

22. All information regarding suspected mismanagement, fraud or corruption will be collected, classified and handled appropriately and have regard to requirements for reporting to law enforcement agencies, privacy, confidentiality, legal professional privilege and the requirements of procedural fairness and natural justice.

Roles and responsibilities

23. The Operations Director is responsible for ensuring that:
- a) staff receive adequate induction and training in detection and prevention;
 - b) adequate controls are in place for the prevention and detection of fraud, corruption and mismanagement and that these are reviewed annually;
 - c) appropriate senior managers are advised when reports of allegations are made;
 - d) all records arising from this Procedure are appropriately maintained.
24. The Board of Directors is responsible for determining appropriate action for any allegations of fraud or corruption.
25. The Chief Executive Officer is responsible for managing any external communications in relation to allegations, investigations or outcomes in relation to fraud or mismanagement under instruction from the Board of Directors.
26. The Manager, Quality and Compliance is responsible for:
- a) ensuring compliance with this Procedure;
 - b) benchmarking GHE policy and standards with those adopted elsewhere in the tertiary sector;
 - c) monitoring of information available from the review of records relating to the implementation of this Policy and Procedure.
27. All staff are responsible for becoming familiar and complying with this Procedure.

Associated information

Related Internal Documents	<p>Corruption, Fraud and Mismanagement Policy Board Appointment, Renewal and Removal Policy Conflict of Interest Policy Delegation of Authority Policy and Schedule Financial Framework Governance Framework Human Resources Framework Intellectual Property and Copyright Policy Risk Management Policy Student Academic Integrity and Academic Misconduct Policy Student Non-Academic Conduct and Misconduct Policy Glossary of Terms</p>
Related Legislation, Standards and Codes	<p><i>Tertiary Education and Quality Standards Agency Act 2011</i> <i>Higher Education Standards Framework (Threshold Standards) 2021</i> <i>Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth)</i> <i>Corporations Act 1990 (SA)</i> <i>Corporations Act 2001 (Cth)</i> <i>Crimes Act 1914 (Cth)</i> <i>Independent Commissioner Against Corruption Act 2012</i> <i>Criminal Code Act 1995 (Cth)</i> <i>Criminal Law Consolidation Act 1935 (SA)</i> <i>Public Finance & Audit Act 1987 (SA)</i> <i>Surveillance Devices Act 2016 (SA)</i> <i>Tertiary Education Quality Standards Agency Act 2011 (Cth)</i> <i>Public Interest Disclosure Act (SA)</i> <i>National Security Legislation Amendment (Espionage and Foreign Interference) Act 2018</i> TEQSA Guidance Notes: <i>Corporate Governance</i>, Version 2.4</p>
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	23-July-20	V1.1 Administrative updates
	9-Oct-23	V1.2 administrative updates following TEQSA registration

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