

Let's yarn about
ageing well



TOOLBOX TALK

Understanding Whistleblower Protections

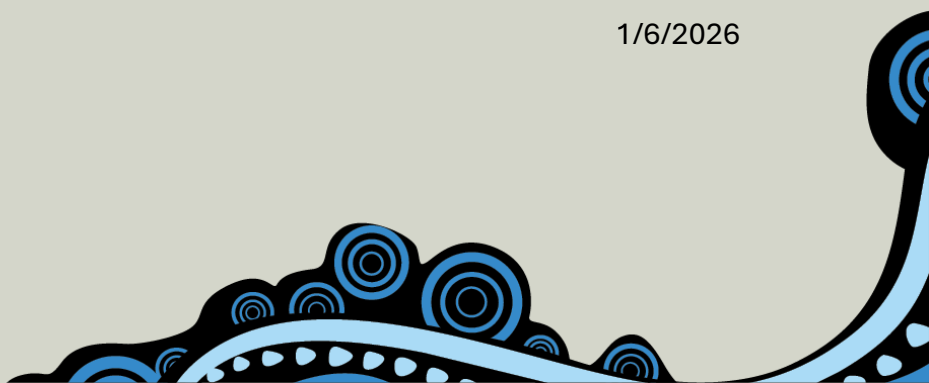
This resource was developed in partnership with [Ninti One Limited](#) and [Culturally Directed Care Solutions](#) (CDCS) as part of the NATSIFACP Regulation Support Hub. The Support Hub was commissioned and funded by the Department of Health, Disability and Ageing and is delivered by Ninti One and CDCS to provide tailored assistance and training to NATSIFACP service providers as they transition to the *Aged Care Act 2024*. Operating from 1 July 2025 to 30 June 2027, the Support Hub connects providers with practical resources and experienced aged care advisors to support understanding of, and compliance with, the new legislation.

health.gov.au

1/6/2026



Australian Government
**Department of Health,
Disability and Ageing**



Contents

What is whistleblowing?	3
Scenario 1: An everyday service issue leads to whistleblowing	4
Scenario 2: Clinical example	4
Scenario 3: This is NOT whistleblowing	5
Whistleblower protections – what staff need to know	6
What should staff do?	7
1. Start with normal reporting	7
2. Watch what happens next	7
3. Escalate if needed	7
You do not have to only report internally	7
Can you get in trouble for escalating outside the organisation?	8
Myth vs Fact: speaking up and whistleblowing	10
References and further information	12

We acknowledge the Traditional Custodians of the Country on which this organisation operates, and pay our respects to Elders past, present and emerging. This tool is grounded in the principle that community control is a governance strength, and that Elders are at the centre of all decisions made in their name.

What is whistleblowing?

Whistleblowing is the reporting of suspected misconduct, abuse, neglect, or unsafe practices within an aged care service. It is usually reported by a person connected to the organisation, to help protect residents and ensure compliance with standards and laws.

Whistleblowing often involves reporting on:

- ongoing risk to older people receiving care
- systemic issues
- misconduct, neglect, or cover-ups

There are different types of problems at work. Not every problem raised is whistleblowing or necessarily leads to whistleblowing.

Most issues you will see in aged care are:

- feedback
- hazards
- incidents, or
- complaints

These should be managed through normal reporting and complaints systems first – they may become whistleblowing if not addressed appropriately.

Type	What it is	Example
Hazard	Something that could cause harm	Cracked pavement
Incident	Harm has occurred – someone was hurt or something went wrong	Person trips and falls
Complaint	Someone raises a concern or says they are not happy with something	Family complains about the fall
Whistleblowing	A serious issue or problem that is ignored or covered up. People may still be at risk.	No action taken, risk continues, or records falsified. Note: not all whistleblowing is preceded by a complaint or feedback.

Speaking up keeps older people safe. But not every issue is "whistleblowing".

If everything is labelled as whistleblowing, staff can:

- feel overwhelmed or unsure what to do
- bypass normal processes
- misunderstand their legal protections

In our work, we all see things sometimes that are not right. Most of the time we report it, and it gets fixed. That is how it should work. But sometimes, things are not fixed. That is when we need to understand whistleblowing.

Scenario 1: An everyday service issue leads to whistleblowing

Steps	Issue type	Scenario example
1	Hazard	A care worker notices a cracked pathway outside the day respite centre (or residential care home)
2	Incident	An older person trips and falls
3	Complaint	The family raises concerns with management
4	Escalation to whistleblowing	<p>The issue is ignored: no repair is organised, the incident is not documented properly, and the risk remains for others.</p> <p>A worker or family member reports externally because people are still at risk and the provider has failed to act.</p>

✓ This is whistleblowing

Scenario 2: Clinical example

Steps	Issue type	Scenario example
1	Concern identified	A worker notices medication is regularly being given late, and staff write the wrong time in notes to cover this.
2	Internal reporting	They report it to a supervisor.
3	Issue continues	The supervisor ignores the issue. Records continue to be altered to show medication was given on time.
4	Escalation	The worker reports the issue through a whistleblower channel because older people may be harmed and records are being falsified (potentially unlawful).

✓ This is whistleblowing

Scenario 3: This is NOT whistleblowing

Not every concern or report is whistleblowing. This scenario shows how a problem can be raised and resolved through normal channels – and that is exactly how things should work.

Steps	Issue type	Scenario example
1	Concern identified	A care worker notices that a resident has not been getting their weekly shower because rostering changes have left the task uncovered on certain shifts.
2	Internal reporting	The worker raises it with their team leader at the end of their shift, using the normal incident reporting system.
3	Issue addressed	The team leader acknowledges the concern, updates the care plan and adjusts the roster to make sure the task is always covered. The worker is thanked for raising it.
4	Resolved	The problem is fixed. The resident is receiving their regular personal care. There is no ongoing risk and no cover-up.

✓ This is NOT whistleblowing - and that is a good thing

The worker did exactly the right thing. They spoke up, used the normal reporting process, and the issue was fixed. This is how aged care is supposed to work.

Whistleblowing would only become relevant if the report had been ignored, the problem continued, the worker was told to stay quiet, or the risk to the resident was ongoing.

Key difference

Complaint	Whistleblowing
“Something went wrong” Reported through normal workplace processes Expectation is that it will be fixed	“Something serious is wrong AND not being addressed” May involve misconduct, risk, or illegality Requires protection for the person speaking up

Whistleblower protections – what staff need to know

Under the *Aged Care Act 2024* (the Act) (which commenced on 1 November 2025), when someone makes a genuine whistleblower report:

- They cannot be punished (e.g. dismissed, demoted, bullied or discriminated against)
- Their identity is protected and can be kept confidential, and they can choose to report anonymously
- They can report internally within the organisation or externally (e.g. Aged Care Quality Commission, Complaints Commissioner, Department of Health, Ageing and Disability, advocate, police)
- They are protected even if the concern turns out to be unfounded, if it was raised honestly and in good faith.

Who can make a whistleblower disclosure?

Under the *Aged Care Act 2024*, whistleblower protections apply broadly to any individual who has relevant information not just employees. This includes:

- aged care workers (current and former)
- family members and carers of residents
- volunteers and contractors
- any other person with information about a possible breach of the Act

Serious penalties for organisations that punish whistleblowers

Organisations that punish or threaten staff for making a whistleblower report face serious legal consequences under Section 551 of the *Aged Care Act 2024*.

This includes significant civil penalties (currently equivalent to hundreds of thousands of dollars for corporations) and court orders requiring compensation, reinstatement and, in serious cases, additional damages.

What should staff do?

1. Start with normal reporting

- Report hazards, incidents, and complaints internally

2. Watch what happens next

- Is the issue addressed?
- Is risk reduced?

3. Escalate if needed

- If the issue is ignored, unsafe, or covered up – consider whistleblowing

You do not have to only report internally

Raise your concern internally where it is appropriate and you feel safe to do so. However, sometimes you may not feel comfortable raising an issue with management — especially if you feel management are involved in the problem.

It is ok to go directly to an outside body if:

- you don't feel safe raising the issue internally
- you think nothing is being done or will be done by management
- the issue involves managers or leaders
- the issue is very serious - for example, ongoing risk of harm to an older person, or something that may be breaking the law.

Under the *Aged Care Act 2024*, you can report to any of the following:

Organisation	Role
The Aged Care Quality and Safety Commission	The main regulator for aged care quality and safety
The Complaints Commissioner	A role under the <i>Aged Care Act 2024</i> specifically for complaints
The Department of Health, Disability and Ageing	The government department that oversees aged care
An independent aged care advocate	Someone independent who can support you through the process
The Police	If the matter involves a criminal offence

Your employer must have a whistleblower policy

Under the *Aged Care Act 2024*, your organisation is required by law to have a whistleblower policy and system in place. If you are unsure how to make a report, ask your manager or check your organisation's policy.

For supervisors and managers: if a disclosure is made to you

Under the *Aged Care Act 2024*, if someone makes a whistleblower disclosure to you, you also have legal obligations. You must:

- keep their identity confidential – do not share it without their consent
- not take any action that could harm them for speaking up
- not reveal information that might identify them
- follow your organisation's whistleblower policy

Breaching these obligations is a contravention of the Act and can result in serious penalties

Can you get in trouble for escalating outside the organisation?

Whistleblower protections are very strong under the *Aged Care Act 2024*.

You are protected if you:

- report something honestly
- believe it is true
- have reasonable grounds to suspect something is wrong
- even if it turns out to be wrong – honesty is what matters

You are NOT protected if you:

- make something up
- lie about what happened
- try to get someone in trouble on purpose

Key message

Speaking up is part of safe care.

- Most issues will be reported and resolved internally
- Serious issues that are ignored or covered up should be escalated — whistleblower protections apply
- Whistleblowing is about making sure older people are safe and their rights are upheld

- You can report anonymously and you can choose who you report to

Myth vs Fact: speaking up and whistleblowing

Myth	Fact
<i>“Every problem is whistleblowing.”</i>	<ul style="list-style-type: none"> • Most problems are hazards, incidents or complaints • Whistleblowing is when the issue is serious AND not fixed AND people are still at risk
<i>“I could get in trouble if I report something and I’m wrong.”</i>	<ul style="list-style-type: none"> • You are protected if you are honest; and • You believe what you are saying is true and there is serious risk to people
<i>“Whistleblowing is about getting people in trouble.”</i>	<ul style="list-style-type: none"> • Whistleblowing is about keeping older people safe and making sure problems are fixed • It is about safety, not blame
<i>“I must report everything inside the organisation first.”</i>	<ul style="list-style-type: none"> • You can choose where you feel safest to report • Most issues should be reported inside first so they can be fixed • But you can go straight to an external body if you don’t feel safe, don’t trust the process, the issue involves managers or leaders, or the issue is serious (e.g. ongoing risk of harm, or possible breach of the law)
<i>“If I speak up, I might lose my job.”</i>	<ul style="list-style-type: none"> • The Aged Care Act 2024 protects you strongly • You cannot be punished, dismissed, demoted, harassed or treated unfairly • Your identity can be kept private • Organisations that retaliate face significant fines and court orders
<i>“I need proof before I report something.”</i>	<ul style="list-style-type: none"> • You do not need proof - just report what you saw, heard, or believe is not right • The organisation or appropriate authority will investigate
<i>“I can say anything because I am protected.”</i>	<ul style="list-style-type: none"> • You must be honest • You are protected if you tell the truth and report what you believe is causing harm • You are not protected if you make something up, lie, or try to get someone in trouble on purpose
<i>“Only staff can make a whistleblower disclosure.”</i>	<ul style="list-style-type: none"> • The Aged Care Act 2024 defines eligible whistleblowers broadly as ‘any individual’ with relevant information

- This includes family members, carers of residents, volunteers and contractors - not just employees
-

References and further information

Aged Care Quality and Safety Commission – Whistleblower protections for workers:

<https://www.agedcarequality.gov.au/workers/whistleblower-protections-workers>

Aged Care Quality and Safety Commission – Reform changes for workers:

<https://www.agedcarequality.gov.au/workers/reform-changes-workers>

Aged Care Quality and Safety Commission – Managing Whistleblower Disclosures Policy:

<https://www.agedcarequality.gov.au/resource-library/managing-whistleblower-disclosures-policy-0>

This toolbox talk has been prepared for aged care workers as a plain-language educational resource. It reflects the current legislative framework under the *Aged Care Act 2024* and has been informed by guidance from the Aged Care Quality and Safety Commission and the Department of Health and Aged Care. It is not legal advice and does not substitute for professional legal or regulatory advice. Legislation, Rules and regulatory guidance in this area continue to develop - always check for current information. Refer to your organisation's whistleblower policy, the Aged Care Quality and Safety Commission (agedcarequality.gov.au) and the Department of Health and Aged Care (health.gov.au) for up-to-date guidance.

Version: June 2026

