

Policy:	Policy Manual No.	Authorised By:	Policy Section:	Effective:	Review Date:
Protected Disclosures Policy (PDP)	GOV-PDP	Governance Group	Governance and Accountability (GOV)	Upon approval	April 2029; 3-yearly

Protected Disclosures Policy (PDP)

Public-facing policy for receiving, protecting, assessing and responding to protected disclosures of serious wrongdoing

Property of Glenfield Community Centre Incorporated

Last reviewed April 2026 | Next review April 2029 | Version 2026.1

1 Purpose:

The purpose of this policy is to ensure that Glenfield Community Centre Incorporated (GCC) provides a safe, lawful and confidential process for receiving, protecting, assessing and responding to protected disclosures about serious wrongdoing in or by GCC.

2 Scope:

This policy applies to protected disclosures made by current or former GCC employees, Governance Group members, officers, volunteers, contractors, secondees, persons concerned in the management of GCC and other workers or people who may be entitled to protection under the Protected Disclosures (Protection of Whistleblowers) Act 2022.

This policy applies where a person believes on reasonable grounds that there is, or has been, serious wrongdoing in or by GCC, and makes a disclosure in accordance with this policy or the Act.

This policy does not replace ordinary complaint, feedback, employment, disciplinary, privacy, health and safety, safeguarding, conflict of interest, membership, contractual or constitutional dispute processes where those processes are more appropriate. However, a matter may still be a protected disclosure if it involves serious wrongdoing as defined by law.

Complaints or grievances by members in their capacity as members, complaints about a member, and disputes between members and the Society must be managed consistently with the GCC Constitution unless the matter also constitutes, or may constitute, serious wrongdoing requiring action under this policy or the Act.

This policy must be read consistently with the GCC Constitution, including the Society's Principles, Objects, Governance Group powers, dispute-resolution requirements, financial-gain provisions, officer roles, delegation provisions and Appendix A values.

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3 Policy Statement:

GCC is committed to lawful, ethical, transparent and accountable conduct. People who have reasonable grounds to believe that serious wrongdoing is occurring, has occurred, or may occur in or by GCC should be able to raise that concern safely and without fear of retaliation.

GCC will receive and handle protected disclosures confidentially, fairly, promptly and in accordance with the Protected Disclosures (Protection of Whistleblowers) Act 2022.

A person who makes a protected disclosure in good faith is entitled to the protections available under the Act, even if they are mistaken and no serious wrongdoing is ultimately found.

GCC will not retaliate against, victimise, disadvantage, discipline or otherwise treat a person adversely because they have made, or are suspected of making, a protected disclosure in good faith.

Disclosures must be assessed on their substance rather than their label. A person does not need to use the words “protected disclosure” or refer to the Act for this policy to apply if the information disclosed may amount to serious wrongdoing.

GCC will distinguish protected disclosures from ordinary service complaints, interpersonal disputes, employment relationship problems, privacy requests and member grievances, while ensuring that serious wrongdoing is escalated and managed appropriately.

4 Definitions:

Protected Disclosure: A disclosure of information where the discloser believes on reasonable grounds that there is, or has been, serious wrongdoing in or by GCC, and the disclosure is made in accordance with the Protected Disclosures (Protection of Whistleblowers) Act 2022.

Serious Wrongdoing: Conduct that may include an offence, a serious risk to public health or safety, a serious risk to the health or safety of any individual, a serious risk to the environment, unlawful or corrupt use of public funds or resources, serious misconduct relating to public funds or public authority, or oppressive, unlawfully discriminatory, grossly negligent or grossly mismanaged conduct by a person or organisation performing a public function or using public funds or authority.

Discloser: A person who makes, or seeks advice about making, a protected disclosure. This may include a current or former employee, volunteer, contractor, Governance Group member, officer or other person covered by the Act.

Receiver: A person authorised or required to receive, assess or respond to a protected disclosure. For GCC, this may include the Chair, Deputy Chair, Centre Manager, Privacy Officer where relevant, another officer authorised by Governance, or an appropriate external authority.

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Appropriate Authority: An external person or body that may receive a protected disclosure under the Act, such as the Ombudsman, Police, WorkSafe New Zealand, Office of the Privacy Commissioner, Registrar of Incorporated Societies, Charities Services, Auditor-General, Human Rights Commission, or another regulator, professional body or public sector organisation with responsibilities relevant to the matter disclosed.

Retaliation: Adverse conduct or threat of adverse conduct against a discloser because they made, or are suspected of making, a protected disclosure, including dismissal, disadvantage, victimisation, harassment, intimidation, demotion, disciplinary action or other detriment.

Victimisation: Treating a person less favourably, or threatening to do so, because they made or supported a protected disclosure, sought advice, or assisted with a protected disclosure matter.

Confidentiality: The obligation to protect the identity of a discloser and information connected with a protected disclosure, except where disclosure is authorised, necessary to investigate or respond, required by law, or permitted by the Act.

Bad Faith: A disclosure made dishonestly, maliciously, knowingly falsely, or for an improper purpose. A person who knowingly makes a false or bad faith disclosure may not receive protection under this policy or the Act.

Support Person or Representative: A person authorised by the discloser to support, assist or communicate with them, such as a whānau member, advocate, legal adviser or community representative.

5 Roles and Responsibilities:

Governance Group: Approves this policy, maintains oversight of serious wrongdoing risk, ensures appropriate systems exist for receiving and managing protected disclosures, and receives reporting where required while protecting confidentiality.

Chair: Acts as a primary receiver for protected disclosures, ensures disclosures involving governance, senior staff, officers, conflicts of interest or significant risk are managed appropriately, and may seek legal, regulatory or specialist advice.

Deputy Chair: Receives or manages a protected disclosure where the matter involves the Chair, or where the Chair has a conflict of interest, is unavailable, or cannot act impartially.

Centre Manager: Acts as an authorised receiver for operational protected disclosures, supports implementation of this policy, safeguards information, coordinates practical response steps where appropriate, and escalates disclosures to the Chair where governance, legal, employment, financial, privacy, health and safety or reputational risk arises.

Governance Group members and officers: Must protect confidential information, declare conflicts of interest, avoid retaliation, cooperate with any lawful assessment or investigation, and not interfere with or discourage protected disclosures.

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Staff, volunteers, contractors and advisers: Must report serious wrongdoing concerns through this policy or to an appropriate authority, protect confidentiality, cooperate with lawful inquiries, and avoid retaliation or victimisation.

Receivers: Must acknowledge, assess, protect confidentiality, consider risks, decide appropriate action, keep records and communicate with the discloser in accordance with this policy and the Act.

Disclosers: Should act in good faith, provide as much relevant information as they can, identify any immediate risk, preserve relevant records where lawful and safe to do so, and avoid knowingly false, malicious or bad faith allegations.

6 Procedure / Implementation:

6.1 Making a protected disclosure

A protected disclosure may be made verbally or in writing. It may be made to the Chair, Deputy Chair, Centre Manager, another authorised receiver, or directly to an appropriate external authority.

A disclosure should include, where possible, the nature of the serious wrongdoing, the people or areas involved, relevant dates, locations, documents, witnesses, risks, any immediate safety concerns, and whether anyone else has been told.

A discloser may seek confidential advice before making a disclosure, including from the Ombudsman, a lawyer, union or representative, provided confidentiality is maintained and the disclosure is made in accordance with the Act.

6.2 Choosing the right receiver:

If the matter involves staff, operations, contractors, tenants, hirers, facility use, finance processing, health and safety, privacy or service delivery, the disclosure may be made to the Centre Manager unless the Centre Manager is involved or conflicted.

If the matter involves the Centre Manager, a Governance Group member, an officer, Governance decision-making, serious financial risk, conflicts of interest, or significant organisational risk, the disclosure should be made to the Chair or Deputy Chair.

If the matter involves the Chair, the disclosure should be made to the Deputy Chair, Treasurer, another non-conflicted Governance officer, or an appropriate external authority.

A discloser may make a protected disclosure directly to an appropriate authority at any time. They do not need to raise the matter internally first.

6.3 Receiving and acknowledging a disclosure:

A receiver must treat the matter as confidential and must not disclose the discloser's identity or identifying information except as permitted by law or as necessary for appropriate action.

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The receiver should acknowledge receipt as soon as practicable and, where possible, confirm the process, any immediate protection or safety steps, likely next steps, and how further communication will occur.

Within 20 working days of receiving a protected disclosure, the receiver should consider the disclosure, decide whether it warrants investigation, check whether it should be referred, and inform the discloser what action has been or will be taken, unless doing so would prejudice the response or breach another lawful obligation.

6.4 Assessing the disclosure:

The receiver must assess whether the matter appears to involve serious wrongdoing, immediate risk, health and safety risk, privacy risk, financial risk, criminal conduct, conflict of interest, employment issues, member disputes, or another process that must be used.

The receiver may seek confidential legal, employment, privacy, health and safety, accounting, governance or regulatory advice where required.

If the matter does not appear to be a protected disclosure, GCC may still manage it under another policy, such as the Complaints and Feedback Policy, Privacy and Confidentiality Policy, Conflict of Interest Policy, Health and Safety Policy, employment procedures, or the GCC Constitution.

6.5 Investigation, referral or other action:

Depending on the assessment, GCC may investigate the matter internally, appoint a non-conflicted person to investigate, seek external advice, refer the matter to an appropriate authority, take immediate risk-control action, refer the matter to Governance, or decide that no further action is required.

Any investigation or response must be fair, impartial, proportionate, confidential and consistent with natural justice, privacy, employment law, health and safety obligations, the GCC Constitution and approved GCC policies.

A person must not investigate, decide or influence a protected disclosure matter if there are reasonable grounds to believe they may not be impartial, may have a conflict of interest, may have a predetermined view, or may be involved in the alleged serious wrongdoing.

6.6 Protecting the discloser:

GCC must take reasonable steps to protect a discloser from retaliation, victimisation, intimidation, harassment, disadvantage or other detriment connected with making a protected disclosure in good faith.

Practical protection steps may include limiting disclosure of identity, appointing a single contact person, adjusting reporting lines, managing conflicts, restricting access to records, addressing unsafe conduct, or seeking external advice.

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A discloser who believes they have experienced retaliation or victimisation should report this immediately to the Chair, Deputy Chair, Centre Manager or an appropriate authority.

6.7 Confidentiality, privacy and records:

Protected disclosure records must be stored securely and separately from routine personnel, complaint or operational files where practicable. Access must be restricted to people with a legitimate need to know.

GCC will protect personal information and confidential information under the Privacy and Confidentiality Policy and the Privacy Act 2020. However, information may need to be used or disclosed where necessary to assess, investigate, refer, manage risk, comply with law, or protect health and safety.

Records should include the date received, receiver, summary of concern, risk assessment, actions taken, advice received, confidentiality steps, communication with the discloser, decisions made, referrals, outcomes and closure date.

6.8 Anonymous disclosures:

GCC may receive anonymous disclosures. Anonymous disclosures may be difficult to investigate or respond to, but they must still be assessed where enough information is provided or where the matter raises serious risk.

Where a discloser wants to remain anonymous, GCC should discuss the practical limits this may create, including limits on investigation, communication, protection and outcome reporting.

6.9 Bad faith or knowingly false disclosures:

A disclosure made in bad faith or knowingly falsely may not be protected. GCC may respond through appropriate employment, contract, membership, governance, legal or disciplinary processes where a person knowingly makes a false or malicious allegation.

A disclosure is not made in bad faith merely because it is mistaken, incomplete, difficult to prove, or not ultimately substantiated.

6.10 Closing and learning from the matter:

At the end of the process, the receiver should record the outcome, any action taken, any continuing risk, whether further monitoring is required, and any recommendations for governance, policy, training, systems or operational improvement.

Where appropriate and lawful, the discloser should be informed that the matter has been closed and given a summary of action taken, subject to privacy, confidentiality, employment, legal and organisational constraints.

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7 Monitoring, Reporting and Breach Management:

GCC will maintain a protected disclosures register or secure record sufficient to support confidentiality, lawful response, accountability, risk management and organisational learning.

Significant protected disclosure matters, serious wrongdoing risks, retaliation risks, systemic issues and recommended improvements must be reported to Governance in a way that protects the identity of the discloser and affected individuals unless disclosure is lawful and necessary.

The Centre Manager, Chair or another authorised receiver must report urgent risks to health and safety, privacy, finance, insurance, legal compliance, criminal conduct, safeguarding or organisational continuity to the appropriate internal or external authority as required.

Retaliation, victimisation, breach of confidentiality, interference with a disclosure, destruction of relevant records, or failure to follow this policy may result in guidance, training, access removal, contract management, employment processes, Governance processes, membership processes, legal advice, regulator notification or another lawful and proportionate action.

This policy must be reviewed earlier than the scheduled review date if there is a significant protected disclosure, serious wrongdoing allegation, retaliation concern, change in law, regulator guidance, audit finding, Governance direction or operational change affecting the handling of protected disclosures.

8 Legal and Compliance Requirements:

This policy is intended to support compliance with current statutes, regulations, constitutional requirements, charitable obligations, funding obligations and recognised good-practice requirements relevant to protected disclosures and serious wrongdoing.

Relevant requirements include, but are not limited to:

- GCC Constitution;
- Protected Disclosures (Protection of Whistleblowers) Act 2022;
- Incorporated Societies Act 2022;
- Charities Act 2005;
- Privacy Act 2020;
- Employment Relations Act 2000;
- Health and Safety at Work Act 2015;
- Human Rights Act 1993;
- Crimes Act 1961, where relevant;
- Auckland Council, Kaipātiki Local Board, lease, funding and accountability requirements; and
- recognised good-practice guidance from the Ombudsman and relevant regulators.

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The Protected Disclosures (Protection of Whistleblowers) Act 2022 supports people reporting serious wrongdoing in the workplace and applies to public, private and not-for-profit organisations. It allows protected disclosures to be made internally or directly to an appropriate authority.

The Act provides protections for disclosers who disclose in good faith and in accordance with the Act. These may include confidentiality protections, immunity from some proceedings relating to the disclosure, protection from retaliation, and protection from victimisation.

The GCC Constitution prevails where it prescribes a process for member complaints, member grievances, Governance decision-making, officer roles, delegation, financial gain, constitutional records or dispute resolution. If there is any inconsistency between this policy and the Constitution, the Constitution prevails unless Governance determines that the Constitution itself requires amendment to comply with law.

9 Related Documents:

- GCC Constitution;
- Policy and Procedure Framework;
- Master Policy and Procedure Register;
- Privacy and Confidentiality Policy;
- Complaints and Feedback Policy;
- Conflict of Interest Policy;
- Health and Safety Policy;
- Finance Policy;
- Delegations Policy / Delegations Schedule;
- Staff Code of Conduct;
- Governance Code of Conduct, if adopted;
- Employment policies and procedures;
- Protected Disclosure Register;
- Protected Disclosure Form;
- Meeting minutes and governance reporting records; and
- Records and Information Management Policy, if adopted.

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10 Document Management Control:

Prepared by	Centre Manager
Policy Owner	Governance Group / Chair
Authorised by	Governance Group
Approved by	Governance Meeting Motion: [insert motion number]
Date issued	April 2026
Last reviewed	April 2026
Review frequency	Three-yearly, or earlier if legislation, governance, risk, funding, structure, serious wrongdoing allegation, protected disclosure, regulator guidance or operational requirements change
Next review	April 2029
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Appendix One - Protected Disclosure Register Fields:

The Protected Disclosure Register should record the following information where relevant, unless Governance approves a different structure. Access to the register must be restricted.

Field	Purpose
Reference number	Unique protected disclosure reference.
Date received	Date the disclosure was received.
Receiver	Person who received the disclosure.
Discloser / representative	Name and contact details where known, or anonymous if applicable.
Type of matter	Alleged serious wrongdoing category, such as offence, serious health and safety risk, misuse of public funds, privacy, corruption, gross mismanagement or other category.
Summary of disclosure	Plain-English summary of the concern and any immediate risks.
People / areas involved	People, roles, contractors, tenants, hirers, services, funds, systems or decisions involved.
Confidentiality requirements	Any restrictions on access, identity protection, representative details or information-sharing limits.
Initial risk assessment	Health and safety, privacy, employment, financial, legal, reputational, safeguarding or governance risk.
Action taken	Acknowledgement, advice sought, investigation, referral, protection steps or other action.
20 working day response	Date and summary of information given to the discloser about action taken or proposed.
Outcome / decision	Outcome, action completed, referral made, no further action, or reason matter closed.
Date closed	Date the matter was closed.
Follow-up required	Policy review, training, system change, governance reporting, risk control or other follow-up.
Notes	Any further relevant information.

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Appendix Two - Protected Disclosure Form:

This form may be adapted for internal, website, email or paper use. A disclosure does not need to be made on this form to be protected.

Name	
Role / relationship to GCC	
Contact details	
Representative / support person, if any	
Date of disclosure	
Who is receiving this disclosure?	
Do you want your identity kept confidential? If so, explain any particular concerns.	
What serious wrongdoing do you believe has occurred, is occurring, or may occur?	
Who or what area is involved?	
When and where did this happen?	
What information, records or witnesses may support the disclosure?	
Is there any immediate health, safety, privacy, financial, legal or other risk?	
Has this matter been raised before? If so, with whom and when?	
What action or protection are you seeking?	
Signature, if not anonymous	

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Appendix Three - Protected Disclosure Response Pathway:

The following pathway may be used as the basis for GCC receiver guidance.

Stage	Action	Indicative timeframe
Receive	Receive the disclosure, protect confidentiality, check immediate risks and identify whether the receiver is appropriate and non-conflicted.	Immediately / as soon as practicable
Acknowledge	Acknowledge receipt where contact details are available, explain the process, confirm confidentiality limits and identify any support or safety needs.	As soon as practicable
Assess	Assess whether the matter may involve serious wrongdoing, whether urgent action is needed, whether advice is required, and whether referral is appropriate.	Promptly
Respond within 20 working days	Consider the disclosure, decide whether it warrants investigation, check whether action has been taken or should be taken, and tell the discloser what has been or will be done where lawful and practicable.	Within 20 working days
Investigate / refer / act	Investigate internally, appoint an investigator, refer to an appropriate authority, take risk-control action, or decide no further action where justified.	Depends on risk and complexity
Protect	Protect the discloser from retaliation or victimisation and manage confidentiality throughout the process.	Ongoing
Close and learn	Record the outcome, complete follow-up actions, report significant risks to Governance in a confidential form and identify system improvements.	At closure and during reporting

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Appendix Four - Suggested Acknowledgement and Outcome Wording:

The following wording may be adapted for protected disclosure correspondence.

Scenario	Suggested wording
Acknowledgement	Thank you for raising this matter with Glenfield Community Centre. We acknowledge receipt of your disclosure about [matter]. We will treat the information confidentially and assess it under the Protected Disclosures Policy. We may contact you if we need further information, unless you have asked us not to or we are unable to do so.
Request for further information	To help us assess this matter properly, please provide [specific information] if you are able to do so safely and lawfully. You may also let us know if you have any concerns about confidentiality, safety or retaliation.
20 working day update	We have considered your disclosure. The action we have taken or propose to take is [summary]. We are unable to provide some details because of privacy, confidentiality, employment, legal or investigation requirements.
Referral	The matter appears to fall within the responsibilities of [authority / process]. We have referred / recommend that you refer the matter to [authority / process]. We will continue to protect confidentiality as required.
Closure	We have now closed this protected disclosure record. The outcome is [summary]. Any agreed follow-up actions will continue to be monitored. Thank you for raising this matter.