	POLICIES & PROCEDURES Number: 7311-10-003 Title: SPEAKING-UP - PROTECTION OF PERSONS REPORTING WRONGDOING
Authorization <input checked="" type="checkbox"/> President and CEO <input type="checkbox"/> Vice President, Finance and Administration	Source: Director, Privacy and Compliance Cross Index: 7311-10-002, 7311-30-001, 7311-30-005, 7311-40-002 Date Approved: December 15, 2008 Date Revised: January 10, 2011 Date Reaffirmed: Date Effective: January 17, 2011 Scope: SHR

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OVERVIEW

All staff has the responsibility to promote a positive and ethical work environment; to respect and operate within the bounds of internal controls and exercise diligence in preventing losses because of fraudulent acts. Any report of wrongdoing will be investigated.

DEFINITIONS

All staff and stakeholders mean SHR employees, practitioner staff, professional staff, contractors, vendors, volunteers and students.

Reporting wrongdoing means giving information about a potential wrongdoing, illegal, underhanded or inappropriate practice.

Reprisal means actions, threats or pressure in any form including, but not limited to, physical harm, job loss, punitive work assignments or actions impacting salary or wages.

Wrongdoing means involvement in any unethical behavior and can include, but is not limited to:

- Knowingly breaching federal or provincial laws or regulations, whether civil or criminal
- A breach or failure to comply with SHR's *Our Values in Action* and /or an affiliates *Code of Conduct*
- A breach or failure to comply with any approved SHR policy
- Unprofessional conduct or conduct that is below recognized and established standards of practice
- Dangerous practice likely to cause physical harm or damage to any person or property
- Abuse of power or authority for any unauthorized or ulterior purpose
- Unfair discrimination in the course of employment or provision of services
- Misuse and/or misappropriation of SHR assets or funds

1. PURPOSE

The purpose of this policy is to provide a method for reporting wrongdoing that allows individuals to bring forward information, in good faith, without fear of reprisal.

2. PRINCIPLES

- 2.1 SHR expects all staff and stakeholders to uphold the reputation of SHR and maintain public confidence.
- 2.2 SHR must be given the opportunity to take corrective action against anyone who commits a wrongdoing.

3. POLICY

- 3.1 Saskatoon Health Region (SHR) employees, practitioner staff, professional staff, contractors, vendors, volunteers, affiliates, students are free to make known, without fear of reprisal, reports of wrongdoing within SHR.
- 3.2 SHR will not take, tolerate or allow any form of reprisal against any individual who reports an alleged wrongdoing in good faith.
- 3.3 Anyone who has been asked to commit a wrongdoing or who believes that a wrongdoing has been committed shall immediately report the matter within SHR.
- 3.4 SHR shall fully investigate any suspected acts of wrongdoing in a prompt and confidential manner.
- 3.5 The individual who made the report shall be kept informed, to the extent possible, about the progress of the review.
- 3.6 SHR staff who are found to have committed a wrongdoing are subject to disciplinary action, up to and including termination of employment.
- 3.7 Anyone who makes a report of wrongdoing in bad faith or with malicious intention shall be subject to disciplinary action, up to and including termination of employment.
- 3.8 Anyone contacted by the media with respect to a suspected wrongdoing shall refer the media to the Director, Communications.

4. ROLES AND RESPONSIBILITIES

4.1 Vice Presidents, Executive Directors, Directors, Managers and Supervisors

- 4.1.1 Promote a positive and ethical work environment.
- 4.1.2 Ensure control measures are implemented within respective departments to prevent and detect wrongdoing.
- 4.1.3 Hold all suspected wrongdoing information received in the strictest confidence.
- 4.1.4 Ensure that the suspicion of a wrong doing is reported.
- 4.1.5 Promptly advise the Vice President, People Strategies of complaints/concerns from employees regarding experiencing reprisal, for having made a report of wrongdoing or having participated in an investigation of wrongdoing.

4.2 All staff and stakeholders

- 4.2.1 Promote a positive and ethical work environment.

- 4.2.2 Respect and operate within the bounds of internal controls and exercise diligence in detecting wrongdoing.
- 4.2.3 Report witnessed and suspected incidents of wrongdoing to their supervisor/manager. Anyone reporting a potential wrongdoing in good faith will not be penalized or reprimanded.
- 4.2.4 Do not discuss suspected incidents of wrongdoing with anyone inside or outside of SHR other than those who have a legitimate need to know such results in order to perform their duties and responsibilities.
- 4.2.5 Actively participate in investigations of wrongdoing.
- 4.2.6 Hold all suspected wrongdoing information received in the strictest confidence.

4.3 Directors/Managers/Supervisors

- 4.3.1 Review all reports received of suspected wrongdoings and forwards the alleged incident to the appropriate department (e.g. Risk, Privacy and Compliance, OH&S, Security, Labour Relations).
- 4.3.2 Share information only on a legitimate need to know basis, with senior leadership, the Authority, Audit and Finance Committee, and/or law enforcement agencies.
- 4.3.3 Conduct process reviews, as directed, that surround the disposition of each incident and to make process improvements that will assist in the detection and deterrence of similar events within their respective departments.

4.4 Vice Presidents

- 4.4.1 Review all reports received of suspected wrongdoings.
- 4.4.2 Make decisions, in consultation with the Vice President, People Strategies, regarding disciplinary action.

4.5 Vice President People Strategies

- 4.5.1 Advise on issues relating to disciplinary actions.

4.6 President and CEO

- 4.6.1 Make decisions to refer the incident to a law enforcement agency, when applicable.

5. POLICY MANAGEMENT


The management of this policy including education, implementation, monitoring and amendment is the responsibility of the Director, Privacy and Compliance.

6. NON-COMPLIANCE/BREACH

- 6.1 Where a wrongdoing is substantiated, those involved in the wrongdoing shall be subject to disciplinary action up to and including termination and possible criminal prosecution as warranted.
- 6.2 Where an act of reprisal is substantiated, those involved in the act(s) shall be subject to disciplinary action up to and including termination of employment.
- 6.3 Anyone who makes a report of wrongdoing in bad faith or with malicious intention shall be subject to disciplinary action, up to and including termination of employment.

7. REFERENCES

- The Whistleblower Protection Act* (Government of Saskatchewan, Bill 203 of 2001)
- Employee Onus to Report Suspected Fraud or Similar Illegal Acts (Policy)*; Saskatchewan Ministry of Finance, Provincial Comptroller's Division, Financial Administration Manual. March 3, 2008.
- Our Values in Action/Code of Conduct*
- SHR Policy *Conflict of Interest*
- SHR Policy *Respect and Dignity*
- SHR Policy *Fraud and Irregularity*

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1. PURPOSE

The purpose of this procedure is to establish the process for reporting of wrongdoing.

2. PROCEDURE

2.1 Reporting

Suspected instances of wrongdoing must be reported. Notifications apply as follows:

2.1.1 All staff report suspected instances of wrongdoing to their immediate supervisor. It is the responsibility of a supervisor to ensure that the suspicion of wrongdoing is reviewed and/or reported to the responsible authority within the region (e.g. Risk Management, Privacy and Compliance, Occupational Health and Safety, Security, Labour Relations).

- If the report involves a suspected incident of Fraud, see SHR Policy/Procedure *Fraud and Irregularity (Reporting)*.

2.1.2 Any person(s) suspected of wrongdoing should not be confronted prior to commencement of the investigative process. Records related to the activity may need to be examined before the suspected person(s) becomes aware of any review.

2.2 Responding/Review

2.2.1 The responsible authority, in consultation with the supervisor, will assess all reports for reasonable and probable grounds to warrant a review.

2.2.2 The responsible authority will communicate with the person who made the allegation, to keep them informed regarding the progress of the review and/or investigation, unless that communication is not reasonably possible.

2.3 The Review

2.3.1 The responsible authority will conduct a review, according to predetermined protocols.

- 2.3.2 If the alleged wrongdoing involves a violation of federal or provincial laws or regulations, whether civil or criminal the matter must be referred to the President and CEO.
- 2.3.3 If an allegation or complaint cannot, for any reason, be satisfactorily examined and dealt with through these procedures, the Chair of the Saskatoon Regional Health Authority has final responsibility for determining an alternative approach.

2.4 Decision

- 2.4.1 Any decision to take disciplinary action will be made in consultation with the Vice-President People Strategies, or a representative. People Strategies or a representative will provide guidance related to discipline as a result of any response to or investigation of fraud or irregularity. Any disciplinary action initiated as a result of an investigation pursuant to this procedure will adhere to the applicable collective agreement.
- 2.4.2 The Director/Manager will review existing procedures within the department to assist in the prevention or detection of similar events.

3. PROCEDURE MANAGEMENT

The management of this procedure including procedure education, implementation, monitoring and amendment is the responsibility of the Director, Privacy and Compliance.