

	Disclosure of Wrongdoings and Protection of Persons who Disclose Wrongdoings	Corporate Policy & Procedures Manual
		Number: III-70
		Date Approved May 15, 2018
Approved by: Chief Executive Officer Chief Mission and Ethics Officer (Designated Officer)		Date Effective June 8, 2018
		Next Review (3 years from Effective Date) June 2021

Purpose

To deter and detect wrongdoings* within Covenant Health in order to positively impact the reputation, effectiveness, resources and Catholic identity of Covenant Health, and enhance the working environment for our personnel.

To provide clear guidance for the safe disclosure of any wrongdoings occurring within Covenant Health.

To protect from retaliatory action against any Covenant Health personnel, or other individual, who in good faith discloses a wrongdoing occurring within Covenant Health.

To comply with whistleblower legislation including the *Public Interest Disclosure (Whistleblower Protection) Act [Alberta]* (PIDA).

Policy Statement

Covenant Health is committed to maintaining a positive working environment for its personnel and upholding the integrity of its business and clinical operations. Covenant Health will take action in an objective manner to address allegations of wrongdoing within Covenant Health without retribution to personnel who report wrongdoings in good faith.

Duty to Disclose:

Any Covenant Health personnel who has a reasonable basis to believe that a wrongdoing has occurred or is occurring within Covenant Health is required to disclose the information on which the belief is based.

Protection from Retaliation:

Covenant Health will not take or condone any adverse action (including demotion, suspension, termination, harassment, or denial of service or benefits) against any Covenant Health personnel or other individual who: (a) is the purported perpetrator of the wrongdoing, in the absence of reasonable evidence; or (b) in good faith and without malice or desire for personal benefit, reports a wrongdoing in accordance with this policy.

Applicability

This policy and procedure applies to all Covenant Health facilities, staff, members of the medical staff, volunteers, students, and to any other persons acting on behalf of Covenant Health ("personnel").

* Refer to 'Definitions'

Responsibility

Any personnel who believes that he or she is being asked to commit a wrongdoing, or who believes that a wrongdoing has been committed, shall immediately disclose the matter to the reporting manager or the next higher level of management if the alleged incident involves the reporting manager. This is consistent with the principle of subsidiarity in attempting to resolve issues closest to the level in which it occurs, as noted in Covenant Health's code of conduct, *Our Commitment to Ethical Integrity*. However, subject to the criteria set forth in section 1.3 below, any personnel who feels this process does not fit his or her circumstances may email the confidential mailbox of the Designated Officer for Covenant Health at PublicInterestDisclosure@covenanthealth.ca. Alternatively any personnel may contact the Alberta Public Interest Commissioner's office at info@pic.alberta.ca.

Management or any person acting on behalf of management shall not:

- dismiss or threaten to dismiss an employee;
- discipline or suspend or threaten to discipline or suspend an employee;
- impose any penalty upon an employee; or
- intimidate or coerce an employee

for disclosing wrongdoings in accordance with the requirements of this policy/procedure. Any of the above actions by management or any person acting on behalf of management will result in disciplinary action up to and including dismissal.

Managers must promptly communicate all disclosures of wrongdoings to the appropriate Executive Member* who will assess the allegation and direct an investigation.

Executive Members shall report all significant disclosures* of wrongdoings to the Designated Officer, who in turn will report material items to the Board of Directors and to the Office of the Public Interest Commissioner (Alberta).

Principles

1. Disclosures of wrongdoings shall be in good faith and shall be reported in writing or in person. Sufficient factual detail regarding a wrongdoing must be provided at the time of disclosure to enable an investigation to be commenced including:
 - (i) a description of the wrongdoing,
 - (ii) the name(s) of individual(s) alleged to have committed a wrongdoing,
 - (iii) the date of the wrongdoing,
 - (iv) any additional information the Designated Officer or Office of the Public Interest Commissioner (Alberta) may reasonably require in order to investigate the matters contained in the disclosure.

The disclosure of wrongdoings report is provided to assist with the reporting process. While confidentiality of disclosure shall be maintained in the manner set out in this policy, anonymous disclosures of wrongdoing will not be investigated.

2. In the event disclosures of wrongdoing are not reported in the manner prescribed in the procedures, Covenant Health will not be responsible for the protection of these employees.
3. Where personnel who previously disclosed wrongdoing or participated in an investigation of a wrongdoing and subsequently faces reprisal, he/she shall report this matter directly to the next higher level of management or Human Resources if in the opinion of the personnel, there are reasonable grounds to not report to management. Management shall authorize a review and take all necessary measures to:
 - permit the personnel to return to his/her duties;
 - reinstate the personnel;
 - pay compensation in an amount not greater than the amount that is equivalent to any financial or other penalty imposed on the personnel.
4. All disclosed wrongdoings will be dealt with in a prompt and timely manner. Timeframes described under PIDA are as follows:
 - 4.1 Maximum five business days to acknowledge receipt of a disclosure of wrongdoing to the employee making the disclosure.
 - 4.2 Maximum twenty business days from date the disclosure was received to determine whether an investigation into a disclosure will be commenced and to communicate that decision to the employee making the disclosure.
 - 4.3 Maximum one hundred and twenty business days from the date the disclosure was made to investigate and submit the written investigation report to the Designated Officer.
 - 4.4 A maximum of thirty business days can be approved by the Designated Officer to extend a time limit for the management of disclosures. Further extensions can only be granted by the Office of the Public Interest Commissioner (Alberta).
5. Any wrongdoing regarding members of the medical staff (physicians, dentists, podiatrists and oral maxillary surgeons) will be managed as outlined by the Medical Staff Bylaws, Section 6.
6. It is Covenant Health's intent to fully investigate any suspected or reported/ alleged acts of wrongdoing. An objective and impartial investigation will be conducted by the appropriate Executive Member regardless of the position, title, length of service or relationship with Covenant Health or any party who might be or becomes or is the subject of such investigation.

7. In addition to, and apart from, any other sanction provided for by law, a Covenant Health personnel is subject to appropriate disciplinary action, including termination of employment, if he or she commits a wrongdoing.
8. Covenant Health will pursue every reasonable effort to obtain recovery of losses from the offender or other appropriate sources.

Procedure

1. All Employees

- 1.1 Any employee who has knowledge of an occurrence of wrongdoing, or has reason to suspect that a wrongdoing has occurred, shall immediately notify his/her manager, either in person or in writing (disclosure of wrongdoings report) or, subject to the criteria contained in 1.3 below, may email the confidential mailbox of the Designated Officer or subject to the criteria contained in 1.4 below, may email the confidential mailbox of the Office of the Public Interest Commissioner (Alberta). Disclosures should be factual rather than speculative and contain as much detailed information as possible. Employees who knowingly make false accusations will be subject to discipline up to and including dismissal.
- 1.2 The employee may report the matter directly to the next higher level of management if he/she is of the opinion that:
 - The matter has not been appropriately addressed by the manager, or
 - It would not be appropriate, based on reasonable grounds, to disclose the matter to his or her manager.
- 1.3 The employee may report the matter directly to the Designated Officer via the confidential email address PublicInterestDisclosure@covenanthealth.ca if he/she is of the opinion that:
 - The matter has not been appropriately addressed by management/ Executive Member, or
 - It would not be appropriate, based on reasonable grounds, to disclose the matter to his or her manager or the next higher level of management, or
 - There are reasonable grounds to bring the issue to the attention of the Designated Officer directly.
- 1.4 The employee may report the matter directly to the Office of the Public Interest Commissioner (Alberta) via the confidential email address info@pic.alberta.ca in the following circumstances:
 - If a disclosure has been made in accordance with the procedures in section 1.3 and an investigation concerning the disclosure has not been completed in accordance with those procedures;

- If a disclosure has been made in accordance with the procedures in section 1.3 and the matter has not been resolved within the time periods established above;
- If a disclosure has been made in accordance with the procedures in section 1.3, the investigation has been completed, a final decision has been issued relative to the disclosure and the disclosing party is dissatisfied with the decision;
- If the subject matter of the disclosure involves the Designated Officer;
- If there is a reasonable belief that the matter disclosed constitutes a wrongdoing under PIDA and there is insufficient time to make a disclosure to the Designated Officer. However, in these circumstances, the disclosing party must as soon as is reasonably practicable make a disclosure of this matter to the Designated Officer; or
- If the disclosing party has made a disclosure to the Designated Officer, however is unable to complete the procedures because of a reprisal directed towards them, or reasonably believes a reprisal is likely to be taken or directed towards them, if the disclosure is made in accordance with section 1.3.

1.5 The employee shall not discuss the matter with anyone other than those noted above, unless authorized to do so by the above.

1.6 An allegation of wrongdoing that occurred in isolation more than two years prior to the date of the disclosure will generally not be open for review unless the matter involves gross misconduct; criminal activity; manipulation of financial statements; represents a continued or future risk to employees, independent health professionals, students, volunteers, the public, patient safety, the integrity and reputation of Covenant Health, and/or to the clinical or business operations or other significant activity not listed that warrants an investigation. However, personnel are encouraged to make the disclosure and allow Covenant Health to determine if the matter will be reviewed.

2.0 Members of the Medical Staff

2.1 Any member of the medical staff who has knowledge of an occurrence of wrongdoing, or has reason to suspect that a wrongdoing has occurred, shall immediately notify his/her Facility Chief or Medical Director, either in person or in writing (disclosure of wrongdoings report) or, subject to the criteria contained in 2.3 below, may email the confidential mailbox of the Designated Officer or subject to the criteria contained in 2.4 below, may email the confidential mailbox of the Office of the Public Interest Commissioner (Alberta). Disclosures should be factual rather than

speculative and contain as much detailed information as possible. Members of the medical staff who knowingly make false accusations will be subject to a triggered initial assessment as per the Medical Staff Bylaws, Section 6.1.

2.2 Members of the medical staff may report the matter directly to the Chief Medical Officer if he/she is of the opinion that:

- The matter has not been appropriately addressed by the Facility Chief or Medical Director, or
- It would not be appropriate, based on reasonable grounds, to disclose the matter to his or her Facility Chief or Medical Director.

2.3 Members of the medical staff may report the matter directly to the Designated Officer via the confidential email address PublicInterestDisclosure@covenanthealth.ca if he/she is of the opinion that:

- The matter has not been appropriately addressed by Chief Medical Officer, or
- It would not be appropriate, based on reasonable grounds, to disclose the matter to his or her manager or the next higher level of management, or
- There are reasonable grounds to bring the issue to the attention of the Designated Officer directly.

2.4 Members of the medical staff may report the matter directly to the Office of the Public Interest Commissioner (Alberta) via the confidential email address info@pic.alberta.ca if he/she is of the opinion that:

- If a disclosure has been made in accordance with the procedures in section 1.3 and an investigation concerning the disclosure has not been completed in accordance with those procedures;
- If a disclosure has been made in accordance with the procedures in section 1.3 and the matter has not been resolved within the time periods established above;
- If a disclosure has been made in accordance with the procedures in section 1.3, the investigation has been completed, a final decision has been issued relative to the disclosure and the disclosing party is dissatisfied with the decision;
- If the subject matter of the disclosure involves the Designated Officer;
- If there is a reasonable belief that the matter disclosed constitutes a wrongdoing under PIDA and there is insufficient time to make a

disclosure to the Designated Officer. However, in these circumstances, the disclosing party must as soon as is reasonably practicable make a disclosure of this matter to the Designated Officer; or

- If the disclosing party has made a disclosure to the Designated Officer, however is unable to complete the procedures because of a reprisal directed towards them, or reasonably believes a reprisal is likely to be taken or directed towards them, if the disclosure is made in accordance with section 1.3.

2.5 Members of the medical staff shall not discuss the matter with anyone other than those noted above, unless authorized to do so by the above.

2.6 An allegation of wrongdoing that occurred in isolation more than two years prior to the date of the disclosure will generally not be open for review unless the matter involves criminal activity, manipulation of financial statements, represents a continued or future risk to employees, independent health professionals, students, volunteers, the public, patient safety, the integrity and reputation of Covenant Health, and/or to the clinical or business operations or other significant activity not listed that warrants an investigation. However, members of the medical staff are encouraged to make the disclosure and allow Covenant Health to determine if the matter will be reviewed.

3.0 Managers/Directors/Facility Chief or Medical Director

3.1 Upon notification from personnel of a suspected wrongdoing, the manager/ director/Facility Chief or Medical Director shall immediately notify their Executive Member/ in writing or in person.

3.2 The manager/director/Facility Chief or Medical Director shall not attempt to investigate the matter or discuss the matter with anyone other than the person to whom the disclosure was reported.

4.0 Executive Member

4.1 Upon notification of suspected wrongdoings, the Executive Member/ will immediately report all significant cases to the Designated Officer.

4.2 All disclosures of wrongdoings are taken seriously by Covenant Health and will be reviewed by the Executive Member and Designated Officer, who will discuss all cases with and will authorize an investigation by one or more of the following (as applicable and appropriate):

- Management
- Human Resources

- Ethics
- Risk Management
- Police
- Forensic Auditors
- Clinical Staff
- To any other body having jurisdiction in respect of the alleged offence disclosed under an Act or regulation if discovered during an investigation.

4.3 The Executive Member will oversee all investigations.

4.4 Upon conclusion of the investigation, the Executive Member shall decide on the appropriate course of action in conjunction with the Designated Officer (if applicable) and legal counsel (if applicable), and shall report results of all significant disclosures of wrongdoings to the Designated Officer or information purposes.

5.0 Designated Officer

5.1 Upon receiving an email detailing a suspected wrongdoing, the Designated Officer will immediately report all significant wrongdoings to the CEO and the Chair of the Board of Directors and the Office of the Public Interest Commissioner (Alberta). All other cases will be directed to the appropriate Executive Member.

5.2 The Designated Officer must prepare a report annually on all disclosures that have been made to the Designated Officer. The annual reports by the Designated Officer must include the following information:

- a) the number of disclosures received or referred to the Designated Officer;
- b) the number of disclosures acted on;
- c) the number of disclosures not acted on by the Designated Officer;
- d) the number of investigations commenced by the Designated Officer as a result of disclosures; and
- e) in the case of an investigation that results in a finding of wrongdoing, a description of the wrongdoing and any recommendations made or corrective measures taken in relation to the wrongdoing or the reasons why no corrective measure was taken.

This annual report will be included as part of other annually reporting for Covenant Health and will be made publicly available.

6.0 Chief Executive Officer

- 6.1 The CEO or Designated Officer shall report all significant disclosures of wrongdoing and results of investigations to the Board of Directors.
- 6.2 The CEO or Designated Officer shall report all disclosures as outlined under PIDA involving:
- Where an offence has been committed under an Act or regulation or under an Act or regulation of the Parliament of Canada, that person must, as soon as reasonably practicable, report the alleged offence to a law enforcement agency and to the Minister of Justice and Solicitor General; and
 - A matter that the Chief Officer, the Designated Officer or the Commissioner reasonably believes could constitute an imminent risk of a substantial and specific danger to the life, health or safety of individuals, or to the environment, that person must disclose the matter;
 - (a) to an appropriate law enforcement agency,
 - (b) in the case of a health-related matter, to the Chief Medical Officer of Health appointed under section 13 of the Public Health Act,
 - (c) to the department, public entity, office or prescribed service provider responsible for managing, controlling or containing the risk, if any, and
 - (d) to a person identified in the procedures described in section 5(2)(c) of PIDA or a person prescribed in the regulations for the purposes of this clause.

The Chief Executive Officer or the Designated Officer, as the case may be,

- (a) must suspend the investigation of a disclosure or complaint of a reprisal reported under 6.2(1) or disclosed under 6.2(1),
- (b) may suspend the investigation of any other disclosure or complaint referred to in this section, and
- (c) may resume a suspended investigation only after any charge relating to an alleged offence, or any investigation by a law enforcement agency or the Minister of Justice and Solicitor General, has been finally disposed of.

7.0 Follow-up to Disclosures

At the conclusion of the review or investigation process, the Executive Member shall follow-up or direct follow-up with the parties to the matter.

8.0 Human Resources

8.1 If the wrongdoing is substantiated by the investigation, disciplinary action, up to and including dismissal, shall be taken by the appropriate level of management, in consultation with one or more of the following:

- Human Resource Services
- Legal Counsel
- Medical Services

9.0 Media Inquiries

9.1 Any employee contacted by the media with respect to an investigation shall refer the media to Communications. Communications will determine media response and identify an appropriate spokesperson, as required.

10.0 Records

10.1 All reports of suspected wrongdoings and investigations of such must be fully documented.

10.2 Executive member overseeing the investigation must ensure that all documentation is promptly forwarded to Risk Management for filing and retention as per the records retention and disposition policy.

Definitions

For the purpose of this policy:

Chief Officer means the individual prescribed under PIDA who for Covenant Health is the Chief Executive Officer.

Designated Officer means the senior official designated by the Chief Officer to manage and investigate disclosures under PIDA who for Covenant Health is the Chief Mission and Ethics Officer.

Executive Member means any member of the Senior Leadership Team (SLT) or Executive Leadership Team (ELT).

Significant disclosure means, but is not limited to, any disclosure that: (i) relates to the financial position of Covenant Health; (ii) affects the safety or wellbeing of staff or patients; or (iii) relates to any criminal acts.

Wrongdoing means either a “wrongdoing under PIDA or a “further defined wrongdoing” as outlined below :

- A “wrongdoing under PIDA” means:
 - (a) a contravention of an Act, a regulation made pursuant to an Act, an Act of the Parliament of Canada or a regulation made pursuant to an Act of the Parliament of Canada;
 - (b) an act or omission that creates
 - (i) a substantial and specific danger to the life, health or safety of individuals other than a danger that is inherent in the performance of the duties or functions of an employee, or
 - (ii) a substantial and specific danger to the environment;
 - (c) gross mismanagement, including an act or omission that is deliberate and that shows a reckless or wilful disregard for the proper management of
 - (i) public funds or a public asset,
 - (ii) the delivery of a public service, including the management or performance of:
 - (A) a contract or arrangement identified or described in the regulations, including the duties resulting from the contract or arrangement or any funds administered or provided under the contract or arrangement, and
 - (B) the duties and powers resulting from an enactment identified or described in the regulations or any funds administered or provided as a result of the enactment, or
 - (iii) employees, by a pattern of behaviour or conduct of a systemic nature that indicates a problem in the culture of the organization relating to bullying, harassment or intimidation;
 - (c.1) a wrongdoing prescribed in the regulations to PIDA;
 - (d) knowingly directing or counselling an individual to commit a wrongdoing mentioned in clauses (a) to (c.1).

and; in addition to the above wrongdoing under PIDA,

- Covenant Health defines the following additional acts as “further defined wrongdoing”:
 - (a) deliberate manipulation and misrepresentation of financial records;
 - (b) unethical and/or illegal activities or those that threaten to undermine our Catholic identity or risk scandal
 - (c) intentional contravention of Covenant Health policies;
 - (d) serious breach of conduct;
 - (e) violation of conflict of interest policies;
 - (f) taking reprisal against staff who disclose wrongdoing; and
 - (g) other similar acts.

**Related
Documents**

Covenant Health Corporate Policies/Procedures:

- Building a Just Culture - #III-35
- Disclosure of Adverse Events, Close Calls and Hazards - #III-40
- Responding to Adverse Events, Close Calls and Hazards - #III-45
- Conflict of Interest - #III-15
- Relationships with Industry - #III-20
- Records Management, #III-55

Covenant Health Resources:

- Our Commitment to Ethical Integrity (Code of Conduct)
- Health Ethics Guide
- Covenant Health Medical Staff Bylaws
- Disclosure of Wrongdoings Report
- Statement on the application of the Conflicts of Interest Act (Alberta)

PIC Resources:

- Procedure Checklist - Legislated Requirements

References

- The Criminal Code (Canada)
- The Freedom of Information and Protection of Privacy Act (Alberta)
- The Health Information Act (Alberta)
- Public Interest Disclosure (Whistleblower Protection) Act (Alberta)
- Complaints of reprisal can be referred to the Public Interest Commissioner (Alberta) for investigation. Those who wish to make a complaint of reprisal must complete a Schedule 3 "Complaint of Reprisal Form," which can be found on the Public Interest Commissioner website at www.yourvoiceprotected.ca

Revisions

August 15, 2014