

TITLE
SAFE DISCLOSURE/WHISTLEBLOWER

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NOTE: Terms that appear in bold in the body of this document are defined terms – See Definitions.

If you have any questions or comments regarding the information in this policy, please contact the Corporate Policy Department at corporatepolicy@albertahealthservices.ca. The Corporate Policy website is the official source of current approved corporate policies, procedures, and directives.

PURPOSE

- To deter and detect **improper activity** within Alberta Health Services (“AHS”) in order to positively impact the reputation, effectiveness and finances of AHS, and enhance the working environment for **AHS personnel**.
- To provide clear guidance for the safe disclosure of any improper activity occurring within AHS.
- To protect from retaliatory action any AHS personnel, or other individual, who in good faith discloses improper activity occurring within AHS. Protection from retaliation is also known as “whistleblower” protection.

POLICY STATEMENT

AHS is committed to maintaining a positive working environment for AHS personnel and upholding the integrity of its business and clinical operations including those of its subsidiary corporations. AHS will take action in an objective manner to address reports of improper activities within AHS without retribution to AHS personnel or members of the public who report improper activities in good faith.

Duty to Disclose:

Any member of AHS personnel who has a reasonable basis to believe that improper activity has occurred or is occurring within AHS is required to disclose the information on which the belief is based.

Protection from Retaliation:

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

APPLICABILITY

This policy applies to all AHS personnel.

The protection from retaliation provisions of this policy (but not the duty to disclose provisions) also apply to benefit any member of the public who in good faith reports an improper activity.

POLICY ELEMENTS

1. Disclosures

1.1 AHS Personnel

There are three avenues for AHS personnel to disclose improper activities:

- a) **Manager** – Unless his or her manager is believed to be involved in the improper activity in question, a member of AHS personnel must disclose any improper activity to his or her manager. Such disclosure may be made confidentially. The confidential disclosure shall be submitted in writing by the manager to the Ethics & Compliance Officer for consultation or to direct follow-up and/or investigation (if the improper activity pertains to the manager, the disclosure can be made to the next highest level of management, human resources contact, or to the professional practice leader).
- b) **Ethics & Compliance Officer** - If an allegation of improper activity cannot be resolved with the manager or if the discloser is not able to report the improper activity to his or her manager, the discloser can disclose the improper activity to the Ethics & Compliance Officer. Such disclosure may be made confidentially. The Ethics & Compliance Officer can be contacted at complianceofficer@albertahealthservices.ca.
- c) **External Confidential Reporting and Disclosure Service** - AHS has engaged an external disclosure service to receive anonymous (or confidential) disclosures of improper activity. If disclosure to the manager or the Ethics & Compliance Officer is not appropriate, the discloser can disclose the improper activity to the external disclosure service. The information contained in the disclosure will be submitted to the Ethics & Compliance Officer for follow-up and/or investigation unless the improper activity involves the Ethics & Compliance Officer, in which case the disclosure must be

submitted to the chair of the Governance Committee. The external reporting and disclosure service can be contacted at **1-800-661-9675**.

For disclosures made pursuant to paragraphs 1.1 a), b) and c) above, the effective investigation of an improper activity may require further contact with the discloser. The Ethics & Compliance Officer (or the chair of the Governance Committee if the improper activity is believed to involve the Ethics & Compliance Officer) will request a way to contact the person reporting the improper activity that maintains his or her confidentiality (or anonymity) to obtain follow-up information. Investigation or other action in respect of confidential (or anonymous) disclosures may not be pursued where insufficient information prevents due process, or where the identity of the individual disclosing the improper activity is required by law or policy in order to proceed.

1.2 **Members of the Public**

Members of the public may report disclosures of improper activity through the independently managed external confidential reporting and disclosure service retained by AHS, and such disclosures are subject to the applicable provisions of this policy. The information contained in the disclosure will be provided to the Ethics & Compliance Officer for follow-up and/or investigation.

1.3 **Content of Disclosures**

Disclosures should be factual rather than speculative and contain as much specific information as possible.

1.4 **Limitation Period**

An allegation of improper activity 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 represents a continued or future risk to employees, independent health professionals, students, volunteers, the public, patient safety, the integrity and reputation of AHS, and/or to the clinical or business operations. However, AHS personnel and members of the public are encouraged to make the disclosure and allow AHS to determine if the matter will be reviewed.

2. Response to Disclosures

2.1 All disclosures of improper activity are taken seriously by AHS and will be reviewed by the Ethics & Compliance Officer or in consultation with the Ethics & Compliance Officer. Dependent upon the outcome of the review, the disclosure may be investigated by the Ethics & Compliance Officer or the appropriate AHS department.

2.2 A decision/recommendation made by the Ethics & Compliance Officer as a result of a review and/or investigation may be appealed to the Review Committee, an ad

hoc committee appointed by the Chair of the Alberta Health Services Board from the membership of the Governance Committee and/or AHS senior management.

3. Protection of Individuals Making Disclosures

- 3.1 AHS strictly prohibits AHS personnel from seeking retribution against any AHS personnel or members of the public who disclose improper activity or who participate in an investigation related to a disclosure. Retribution includes workplace harassment, prejudicial treatment or dismissal unrelated to documented performance issues, or misconduct.
- 3.2 Any AHS personnel who believe that they have been subjected to retribution as a result of disclosing improper activity or participating in an investigation of a disclosure of improper activity may report this matter to the Ethics & Compliance Officer. Any other individual who believes that he or she has been subjected to retribution as a result of disclosing improper activity may report the matter to the external disclosure service.
- 3.3 The *Criminal Code* (Canada) protects individuals from adverse employment action if they disclose any type of criminal activity undertaken by their employer. The *Freedom of Information and Protection of Privacy Act* (Alberta) and the *Health Information Act* (Alberta) protects individuals from adverse employment action if they disclose any information in accordance with these Acts. This policy is intended to enhance those protections and will not interfere with AHS personnel or members of the public reporting a matter to the appropriate government agency.
- 3.4 The provisions of this policy will not interfere with normal employment action taken as a result of poor job performance or misconduct.

4. Retribution or Malicious Disclosures

Any AHS personnel who is found to have taken retribution against an individual who has disclosed an improper activity or knowingly make malicious, misleading or false disclosure are subject to appropriate disciplinary action up to and including termination of contractual relationship, termination of employment and/or loss of privilege/appointment, as would be the case with any other disciplinary action.

5. Follow-up to Disclosures

At the conclusion of the review or investigation process, the Ethics & Compliance Officer shall follow-up or direct follow up with the parties to the matter, except where such contact may breach the confidentiality or anonymity of any AHS personnel or other person who made the disclosure, or otherwise unduly compromise the privacy of any individual involved in the review or investigation.

6. Retention of Records

In accordance with applicable laws, the Ethics & Compliance Officer (or his or her designate) shall retain all records relating to a disclosure of improper activity and subsequent action taken.

7. Reporting Requirements

The Ethics & Compliance Officer shall report functionally to the chair of the Governance Committee and administratively to the CEO (or his or her designate). The Ethics & Compliance Officer shall, as directed, provide periodic reports on the activities of the Ethics & Compliance Officer to the CEO (or his or her designate), the Governance Committee and the Audit and Finance Committee.

DEFINITIONS

AHS Personnel means anyone who provides care or services or who acts on behalf of AHS, which may include AHS Board members, all AHS employees, contractors, physicians, dentist, podiatrists, midwives and other allied health professionals with an AHS appointment and privileges, subsidiaries, students volunteers, researchers working with AHS or studying AHS, staff or patients.

Improper activity means any alleged material, unethical, illegal and other improper activity including without limitation, fraud, theft, violations of laws, violations of the AHS Code of Conduct, principles, policies or bylaws (including the Conflict of Interest Bylaw), and negligence of duty.

Manager means the person an individual directly reports to.

REFERENCES

- Alberta Health Services Bylaws and Policies
 - Code of Conduct
 - Workplace Abuse and Harassment Policy and Procedure
 - Conflict of Interest Bylaw
- *Criminal Code* (Canada)
- *Freedom of Information and Protection of Privacy Act* (Alberta)
- *Health Information Act* (Alberta)

REVISIONS

May 3, 2012