

PETERBOROUGH PUBLIC HEALTH

Board of Health

POLICY AND PROCEDURE

Section: Board of Health	Number: 2-403	Title: Ethics Reporting Policy
Approved by: Board of Health		Original Approved by Board of Health On (YYYY-MM-DD): 2018-02-14
Signature: _____		Author: Medical Officer of Health
Date (YYYY-MM-DD): 2022-11-09		
References: 2-200 Effective Governance by Effective Board Members Peterborough Public Health Civility and Respect Guidelines Public Servants Disclosure Protection Act, 2007 Public Service of Ontario Act, 2006		

NOTE: This is a **CONTROLLED** document for internal use only, any document appearing in a paper form should **ALWAYS** be checked against the online version prior to use.

POLICY

The purpose of this policy is to provide direction regarding the communication of events or concerns, with respect to issues of integrity and honesty relating to Peterborough Public Health (PPH) and, in particular, of questionable financial or operational matters.

Definitions:

Whistleblower Event: For the purposes of this policy and as defined by Federal and Provincial legislation, a Whistleblower event is triggered if any one of the following incidents occur:

- a) A contravention of any Act of Parliament or of the legislature of a Province;
- b) A misuse of public funds or public assets;
- c) A gross mismanagement or omission or neglect of duty;
- d) An abuse of authority;
- e) An act or omission that creates a substantial and specific danger to the life, health or safety of persons, or to the environment;
- f) Conduct that contravenes [board policy](#) or PPH Civility and Respect Guidelines;
- g) Breach of fiduciary duty and/or abuse of trust;
- h) Knowingly directing a person to commit a wrongdoing set out above; or
- i) Concealment of any of the above or any other breach of this policy.

A whistleblower event may also include activities or actions that are considered a wrongdoing, illegal, unethical, or misuse of PPH entitlements or benefits.

Policy Statement

Peterborough Public Health (PPH) is committed to conducting itself with honesty and integrity at all times. If, at any time, this commitment is not followed or appears in doubt, PPH seeks to identify and remedy such situations. Accordingly, it is the policy of PPH to ensure that when an individual has reasonable grounds to believe that a PPH employee, student, volunteer or board member has committed, or is about to commit, a financial or other wrongdoing:

- a) The reporting person should disclose this information by following the procedure below;
- b) The matter will be reviewed and if warranted and where possible, investigated by the designated individual (see procedure).
- c) The employee, volunteer or board member will be protected from reprisals if reporting was done in good faith;
- d) The subject of the disclosure will be provided with an opportunity to respond to the allegations;
- e) All parties to an investigation will be treated fairly and equitably;
- f) Privacy will be maintained to the greatest extent possible;
- g) If wrongdoing is found, remedial and/or disciplinary action(s) will be taken as appropriate.

PPH cannot act on anonymous reporting as proper investigation may prove impossible without the opportunity to substantiate allegations by obtaining further facts and information and confirming good faith.

PROCEDURE:

1. Dependent on the individual involved in the financial or other wrongdoing, a written statement must be submitted to the following individuals:
 - a) If the wrongdoing is with respect to any PPH employee, student or volunteer or party acting on behalf of PPH, the statement must be submitted to the Medical Officer of Health with a copy sent to the Manager, Human Resources.
 - b) If the wrongdoing is with respect to a member of the Management Team, the statement must be submitted to the Medical Officer of Health with a copy sent to the Manager, Human Resources.
 - c) If the wrongdoing is with respect to the Medical Officer of Health, the statement must be submitted to the Chair of the Board with a copy sent to the Director of Operations.
 - d) If the wrongdoing is with respect to a Member(s) of the Board, the statement must be submitted to the Chair of the Board with a copy to the Medical Officer of Health.
 - e) If the wrongdoing is with respect to the Chair of the Board, the statement must be submitted to the Vice Chair of the Board with a copy to the Medical Officer of Health.
2. The Whistleblower must immediately communicate the Whistleblower event or concern as soon as the Whistleblower becomes aware of such situations as reasonably possible. Details of the event or concern must be communicated and where possible received in writing, containing information relating to direct observations or witnessed events; and sent to the appropriate individual(s) described above.

3. The Whistleblower will be protected from reprisal if reporting was done in good faith. The Whistleblower will not be threatened, harassed, or in any other manner discriminated against as a result of communicating a genuine Whistleblower event done in good faith.

Any PPH employee found to be in violation of this policy (i.e., continued harassment of the Whistleblower) may be subject to corrective action up to and including termination of employment. Similarly, any student, volunteer or Board member found to be in violation of this policy may have their relationship with PPH terminated or suffer consequences appropriate to the situation (i.e., reporting to appropriate association etc...).

4. The Whistleblower is not required to prove the truth of an allegation, but he/she is required to act in good faith. Any individual who does not act in good faith in reporting a suspected violation may be subject to corrective action and/or disciplinary action up to and including termination of employment or relationship with PPH.
5. All reported Whistleblower events or concerns will be treated as confidential and sensitive to the degree possible. In addition, the Whistleblower shall be provided the opportunity to remain anonymous, save and except in those circumstances where the nature of the disclosure and/or the resultant investigation make it necessary to disclose their identity, for example where the resultant investigation or reporting may bring about criminal charges (e.g., legal investigations, criminal acts, etc.). In such cases, all reasonable steps shall be taken to protect the Whistleblower from harm as a result of having made a disclosure.

Review/Revisions

On (YYYY-MM-DD): 2018-02-14

On (YYYY-MM-DD): 2020-03-11 (Board review, no changes)

On (YYYY-MM-DD): 2022-11-09 (Board review, no changes)

On (YYYY-MM-DD):