

 <p>Winnipeg Regional Health Authority Office régional de la santé de Winnipeg Caring for Health À l'écoute de notre santé</p> <p>POLICY</p>	<p>WRHA GOVERNED SITES Applicable to programs, departments and services of the WRHA governed sites</p>		Level: 2A
	Policy Name: Disclosure of Staff Concerns	Policy Number: 20.10.060 (previous #20.80.020)	Page: 1 of 4
	Approval Signature: <i>Original signed by M. Nader.</i>	Section: HUMAN RESOURCES	
	Date: July, 2021	Supercedes: September 2018	

1.0 PURPOSE:

To establish processes for Staff to disclose, in confidence, potential Wrongdoing or Misconduct.

2.0 DEFINITIONS:

- 2.1 Disclosure – Information disclosed within the organization in good faith, based on reasonable belief, by one or more Staff concerning a potential Wrongdoing or Misconduct that someone has committed or intends to commit.
- 2.2 Act - The Public Interest Disclosure (Whistleblower Protection) Act, C.C.S.M. c. P217)
- 2.3 Staff – all persons employed by the WRHA and its direct sites as well as members of the medical staff, volunteers, board members and students associated with contracts with the WRHA and its direct sites.
- 2.4 Designated Officer –A senior official who has been designated by the Chief Executive Officer to receive and address all Staff Disclosures of potential wrongdoing made under the Act. The Designated Officer shall also have the responsibility to receive all disclosures of potential Misconduct. The WRHA Designated Officer is currently the Shared Health Regional Director, Risk and Audit Services.
- 2.5 Non-Devolved Facility – Facility that maintains a separate Board of Directors from the Winnipeg Regional Health Authority and are accountable to the WRHA through the Health System Governance and Accountability Act and related service purchase/operating agreements.
- 2.6 Supervisor– An individual who has supervisory responsibility over one or more Staff.
- 2.7 Wrongdoing – as defined by the Act:
- An act or omission that is an offence under a Statute or Regulation;
 - An act or omission that creates substantial and specific danger to life, health or safety to persons or the environment, not including dangers inherent to the Staff's job;
 - Gross mismanagement, including of public funds or a public asset; or,
 - Knowingly directing or counseling a person to commit any of the above.

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- 2.8 **Misconduct** – An act or omission or a reasonable perception of an act or omission that does not meet the definition of Wrongdoing but concerns:
- Serious and/or persistent violation of policy; or,
 - Administrative mismanagement.

3.0 **POLICY:**

- 3.1 Staff shall determine if the disclosure constitutes a Wrongdoing or Misconduct as defined above and follow the appropriate process. If it is not clear whether a Disclosure constitutes a Wrongdoing versus Misconduct, Staff shall follow the process for disclosing Wrongdoing.
- 3.2 All Disclosures and any related investigations shall be dealt with in a confidential manner to protect the identity of the persons involved, including the disclosing Staff and alleged offender, to the fullest extent possible.
- 3.3 Staff shall be protected from reprisal when they make Disclosures in good faith.
- 3.4 Outcomes of any investigation/review shall be reported back to Staff making the Disclosure, as appropriate, taking into account issues of confidentiality.
- 3.5 All Disclosures received by the WRHA Designated Officer regarding a Non-Devolved Facility may be brought forward to the Designated Officer of the respective facility.

4.0 **PROCEDURE:**

4.1 **Disclosures of Wrongdoing**

- 4.1.1 Staff shall submit a written Disclosure of Wrongdoing to either the Staff's Supervisor, the Designated Officer or externally to the provincial Ombudsman.
- If a Disclosure relates to an urgent matter, which has imminent life, health or safety risk, disclosing Staff can make Disclosure to an external authority such as a law enforcement agency at the same time and/or prior to Disclosure to a Supervisor or the Designated Officer.
- 4.1.2 A Supervisor receiving a Disclosure of Wrongdoing shall be responsible for the following:
- Reviewing the Disclosure and meeting with the disclosing Staff;
 - Ensuring that information pertaining to the Disclosure is confidentially maintained;
 - Advising the Staff that further review and handling will be undertaken by or under the direction of the Designated Officer; and
 - Notifying the Designated Officer and taking any actions directed by the Designated Officer.

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- 4.1.3 The Designated Officer shall be responsible for the following:
- Receiving all Disclosures either directly from the Staff or through the disclosing Staff's Supervisor;
 - Reviewing the validity and relevance of the Disclosure;
 - Notifying the WRHA CEO of the Disclosure and the nature of the Wrongdoing
 - Determining if an investigation is warranted; and
 - Identifying, documenting and communicating outcomes of investigation to the disclosing Staff, alleged wrongdoer and the WRHA CEO.
- 4.1.4 If a Disclosure pertains to a matter outside of the Designated Officer's area of responsibility, the Designated Officer has the authority to refer the Disclosure as appropriate.
- 4.1.5 A Disclosure made directly to the Ombudsman will be reviewed by that authority and may require subsequent cooperation by the WRHA in the handling of the Disclosure.
- 4.1.6 The WRHA CEO shall be responsible for:
- Establishing procedures to manage Disclosures;
 - Designating a senior official to be the Designated Officer to receive and deal with Disclosures;
 - Ensuring that information about the Act and Disclosure procedures are communicated widely to Staff; and
 - Preparing a report annually on any Disclosures of Wrongdoing that have been made to a Supervisor or to the Designated Officer

4.2 Disclosures of Misconduct

- 4.2.1 Where possible, disclosures and concerns relating to Misconduct shall be raised initially by Staff through normal reporting practices, policies and procedures.
- 4.2.2 Staff may make a Disclosure of Misconduct directly to the Designated Officer if a Staff member
- Is reluctant to report a concern to their Supervisor;
 - Has been unsuccessful or dissatisfied with the handling or the outcome of the matter using normal reporting protocols; or
 - Has determined that normal reporting processes are not possible.
- 4.2.3 The Designated Officer shall be responsible for the following:
- Receiving, recording and reviewing Disclosures concerning potential Misconduct;
 - Determining whether the Disclosure should be referred (e.g. Human Resources, Legal, Patient Safety, Occupational Health & Safety) and/or is more appropriately dealt with pursuant to a different WRHA process/policy and/or legislative enactment; and
 - Communicating the Disclosure to a senior level of management within the appropriate area of responsibility, transferring the handling of the Disclosure to that related area and advising Staff of this decision.

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4.2.4 Management assigned to handle the Disclosure shall be responsible for the following:

- Ensuring that information pertaining to the Disclosure is confidentially maintained.
- Upon request, disseminating information on this policy, providing interpretation and related advise.
- Establishing what action will be taken and so advising Staff making the Disclosure. The two options are:
 - (a) The matter may not be pursued if it is without merit, fails to provide adequate particulars, if it is determined to be submitted in bad faith or not on the basis of reasonable belief, or if it is trivial or vexatious; or,
 - (b) The matter may be pursued, in which case a decision will be based on the nature and particulars of the Misconduct to determine the most appropriate next steps.

5.0 **REFERENCES:**

- 5.1 The Public Interest Disclosure (Whistleblower Protection) Act - <http://home.wrha.mb.ca/education/whistleblower.php>
- 5.2 Thomas Recommendation Report
- 5.3 WRHA Confidentiality Policy 20.10.030.
- 5.4 WRHA Respectful Workplace Policy 20.10.040
- 5.5 The Health System Governance and Accountability Act.

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