



# RED LAKE MARGARET COCHENOUR MEMORIAL HOSPITAL

## -STATEMENT OF POLICY AND PROCEDURE-

<b>SUBJECT: Whistleblower</b>		<b>DOC. ID#: BG-ACC-01/ADM-HR-V-19</b>
<b>MANUAL: Board of Directors / Administration</b>		<b>ORIGINAL DATE: Jan-12</b>
<b>CATEGORY: Accountability / Human Resources</b>		<i>LAST REVISION DATE: SEE ELECTRONIC COPY.</i>
<b>DEVELOPED BY: CEO</b>	<b>APPROVED BY: Board</b>	<i>NEXT REVISION DATE: SEE ELECTRONIC COPY.</i>
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### 1. PURPOSE:

Red Lake Margaret Cochenour Memorial Hospital requires all Directors, officers, physicians and employees to observe high standards of business and personal ethics in the conduct of their duties and responsibilities. All members of the organization are expected to practice honesty and integrity in fulfilling their responsibilities and to comply with applicable laws and regulations.

The purpose of the policy is to:

- Identify the obligation to report illegal/unethical conduct;
- Assure reporting in good faith can be done without fear of retaliation;
- Document a process to be followed for reporting suspected improper behaviour or activities.

#### **NO RETALIATION:**

No Director, officer, physician or employee who, in good faith, reports a violation of the Code shall suffer harassment, retaliation or adverse employment consequences. A physician or employee who retaliates against someone who has reported a violation in good faith is subject to discipline up to and including termination. The Whistleblower Policy is intended to encourage and enable employees and others to raise serious concerns within the organization prior to seeking resolution outside the organization.

### 2. ACCOUNTABILITY:

All Directors, officers, physicians and employees are to comply with this Code and to report suspected violations in accordance with this policy.

### 3. POLICY/PROCEDURE/STANDARD:

Concerns regarding alleged improper activity should be brought forward through the regular channels of communication. A member of the organization may alternately contact the President & CEO or the Chair of the Board of Directors if there is a reason or concern not to follow the usual reporting channels. If fraud is suspected the Chair of the Board of Directors has the specific and exclusive responsibility to investigate all reported violations.

Concerns may be made verbally or in writing. Reports must be specific and factual to allow for proper assessment of the nature and urgency of the investigation. Suspected violations will be held confidentially to the extent possible, consistent with the need to conduct an adequate investigation. All reports will be promptly investigated and appropriate corrective action will be taken if warranted by the investigation.

Where applicable, a Collective Agreement or Professional Code of Conduct process shall supersede the above.

**ACTING IN GOOD FAITH:**

Anyone filing a complaint concerning a suspected violation of the Code must be acting in good faith and have reasonable grounds for believing the information disclosed indicates a violation of the Code. Any allegations that prove not to be substantiated and which prove to have been made maliciously or knowingly to be false will be viewed as a serious disciplinary offence.

This policy will be consistent with and adhere to any statutory or legislated regulations that may apply.

## Statement of Understanding

I, \_\_\_\_\_, have read and understand the preceding policy.

Employee Signature:	Date:
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Board Member Signature:	Date:
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