



## Regina Community Clinic Board of Directors Policies and Procedures

**Policy:** Governance  
Whistle Blower Policy/Integrity  
Assurance  
**Policy #** GOV-013

**Approved:**  
**Date:**

Board of Directors  
September 18, 2024

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### Policy: Whistle Blower / Integrity Assurance

#### Purpose:

The purpose of this policy is to encourage employees and Board members to report concerns about illegal, unethical or inappropriate actions without fear of reprisal.

#### Procedure:

The Regina Community Clinic (RCC) is committed to operating with honesty and integrity. Where this is not the case or is in doubt, RCC will seek to remedy the situation.

A “Whistleblowing incident” may include but is not limited to the following:

- Conduct involving risk to public health or safety.
- Conduct involving risk to RCC patients or clients.
- Inappropriate use of RCC resources.
- Accounting, auditing or other financial reporting fraud or misrepresentation.
- A complaint may be submitted in writing to the Executive Director, or if the Executive Director is involved, to the Chair of the Board of Directors. The written statement should include:
  - Description of the activity
  - Date person became aware of the activity
  - Name of individual(s) involved in activity
  - Steps taken (if any) prior to written submission (e.g.: spoke to supervisor)
- Receipt of the complaint will be acknowledged in writing by the Executive Director or the Chair of the Board of Directors depending on who is involved in the complaint.
- The individual making the submission will not be terminated, demoted, suspended, threatened or harassed as a result of communicating this concern. Any RCC employee found to be doing so may be subject to disciplinary action up to and including termination of employment. A Board Member found to be doing so may be asked to resign from the Board.
- An individual must act in good faith and provide sufficient evidence to show that there are sufficient reasons for concern, but is not required to provide proof of the allegation.
- All complaints will be treated as confidential and sensitive. Anonymous complaints will not be considered. The person making the submission must identify themselves so that investigations can be properly conducted.
- Anyone filing a complaint concerning a violation or suspected violation must be acting in good faith and have a reasonable grounds for believing the information disclosed constitutes a violation. Any allegations that prove not be substantiated and which prove to have been made maliciously or knowingly to be false will be subject to disciplinary action up to and including termination of employment.
- Any witnesses called as part of an investigation must complete an oath of confidentiality.



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For additional administrative procedures, see Appendix A.

Approval/Implementation/Evaluation Process	
Date Approved:	September 18, 2024
Approved by:	Board of Directors
Who & Date Reviewed:	Governance Committee, January 19, 2021; Board of Directors, January 27, 2021; Human Resources Committee, September 12, 2024
If revised, indicated the policy cancelled or suspended:	Article VI-5.0
Distribution:	
Monitor Date:	
Type of Monitoring:	
Director Responsible:	Governance



# **Regina Community Clinic Board of Directors Policies and Procedures**

## **GOV-013 Appendix A**

### **Procedures**

#### **Investigation**

When an allegation is received, an investigation may be conducted internally or using an external resource as per criteria established in these procedures. The Executive Director or Chair of the Board of Directors will involve those deemed necessary to conduct a thorough and fair investigation (other employees, legal counsel, accounting advisors, etc.). A report will be completed and appropriate action taken. Each complaint will be dealt with as confidentially as possible and with due care. The results of the investigation will be shared with the person making the submission to the extent possible. Any witnesses called as part of an investigation must complete an oath of confidentiality.

#### **Instructions**

Please provide as much detail as possible. Additional pages can be added. Forms will be made available where they can be accessed privately. Forms should be completed and inserted into an envelope addressed to the CEO or Board Chair or both as appropriate. They can be left discretely on the CEO's desk to protect confidentiality. Receipt of the complaint will be acknowledged in writing by the Executive Director or the Board of Directors, depending on who is involved in the complaint.

### **Whistleblower Form**

- 1) Please provide details with respect to the location of the incident (e.g. specific location and department).
- 2) Please describe the nature of your concern regarding financial and/or operational matters. Include sufficient information for an independent person to understand the concern and to enable further investigation.
- 3) Please state the full name(s) and title (s) of individual(s) whom you suspect of wrongdoing.
- 4) How many times has this incident taken place (if applicable)?
- 5) How long has this incident been taking place (if applicable)?
- 6) Would you like to arrange a meeting/telephone call with the CEO and/or Board Chair to discuss this matter?  
(    ) No                      (    ) Yes

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Name of individual filing the complaint

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Phone number