

SAFE DISCLOSURE POLICY			
Effective Date	February 2, 2017	Cross-Reference	1. Fraud Policy 2. Employee Code of Conduct Policy 3. Progressive Discipline Policy 4. Freedom of information and Protection and Privacy Act (FOIP) 5. Office of the Public Interest Commissioner www.yourvoiceprotected.ca Phone # 1-855-641-8659
Responsibility	Director, Human Resources		
Approver	Executive Council		
Review Schedule	Every 5 Years		

1. Policy Statement

- 1.1. Grande Prairie Regional College (“GPRC” or “the Institution”) is committed to providing a supportive environment where employees can disclose, make enquiries about, or seek advice regarding potential wrongdoing and cooperate in an investigation of wrongdoing without fear of reprisal.

2. Background

- 2.1. GPRC values ethical conduct in all of its operations, including; academia, administration, with students, with industry partners, and its relationship with the Community at large.

3. Policy Objectives

- 3.1. GPRC recognizes that the good faith reporting of wrongdoing is a necessary and valuable service to all its stakeholders. This Policy provides for an impartial channel for disclosure of wrongdoing and for protection from reprisal of those who make such disclosures. Where a member of the GPRC community feels that wrongdoing has occurred or is occurring, a confidential disclosure may be filed.
- 3.2. All reasonable steps shall be taken to protect the position, reputation, privacy and confidentiality of the discloser.
- 3.3. Investigations shall be conducted in a manner that ensures fair treatment for and, to the extent possible, the privacy of the discloser and the respondent.
- 3.4. There shall be no retaliation against a discloser who makes a Good Faith report. There shall be no retaliation or discipline against an innocent respondent.
- 3.5. Nothing in this Policy relieves those responsible for the administration and management of academic, administrative or service units from the responsibility of addressing situations of wrongdoing in accordance with good management practice, existing policies, guidelines and the limitation of this policy.
- 3.6. This policy provides guidance on GPRC’s expectations for the safe disclosure of any suspected wrongdoing, investigation and make recommendations respecting disclosures of wrongdoing and reprisals in compliance with the Public Interest Disclosure (Whistleblower Protection) Act (“the Act”).

4. Scope

- 4.1. Reporting of a wrongdoing is the responsibility of all members of the GPRC Community.

5. Definitions

- 5.1. “Chief Officer” means the President and CEO of GPRC.
- 5.2. “Commissioner” means the Public Interest Commissioner appointed under the Act.
- 5.3. “Designated Officer” means the Director, Human Resources who may be designated by the Chief Officer to manage and investigate disclosures under this Policy and the Act.
- 5.4. “Wrongdoing” includes:
 - 5.4.1 A contravention of an Act, a regulation made pursuant to an Act, an Act of the Parliament of Canada or a regulation made pursuant to an Act of the Parliament of Canada.
 - 5.4.2 An act or omission that creates: substantial and specific danger to the life, health or safety of individuals other than a danger that is inherent in the performance of duties or functions of an employee.
 - 5.4.3 A substantial and specific danger to the environment.
 - 5.4.4 Gross mismanagement, including an act or omission that is deliberate and that shows a reckless or wilful disregard for the proper management of:
 - 5.4.4.1 GPRC’s funds or assets
 - 5.4.4.2 GPRC’s delivery of a services, including the management or performance of:
 - 5.4.4.2.1 A contract or arrangement, including the duties resulting from the contract or arrangement or any funds administered or provided under the contract or arrangement and,
 - 5.4.4.2.2 The duties and power resulting from an enactment identified or described in regulations or any funds administered or provided as a result of the enactment, or
 - 5.4.4.3 Employees, by a pattern of behaviour or conduct of a systemic nature that indicates a problem in the culture of the organization relating to bullying, harassment, or intimidation.
 - 5.4.5 A wrongdoing prescribed in regulations.
 - 5.4.6 Knowingly directing or counselling an individual to commit one of the wrongdoings listed above.
- 5.5. “Good Faith” is defined as a sincere belief that the information given is done honestly and objectively with no deliberate intent to defraud, misinform or mislead.

- 5.6. “GPRC Community” includes:
- 5.6.1. Students;
 - 5.6.2. Employees;
 - 5.6.3. Volunteers;
 - 5.6.4. Consultants; and
 - 5.6.5. Service and supply contractors and their employees while they are engaged in activities related to GPRC
- 5.7. “Reporter” refers to the person or persons who make reports of a wrongdoing under this Policy.
- 5.8. “Reprisal” is defined as any adverse action taken against an employee who: seeks advice on making a disclosure, makes a disclosure, declined to participate in a wrongdoing, acted in accordance with the Public Interest Disclosure Act, or co-operates in an investigation of a wrongdoing. Examples of reprisal include, but are not limited to:
- 5.8.1 a dismissal, layoff, suspension, demotion, transfer, discontinuation or elimination of a job, change of job location, reduction in wages, change in hours of work or reprimand,
 - 5.8.2 any other measure that adversely affects the employee’s employment or working conditions
 - 5.8.3 A threat to take any of the aforementioned reprisals.
- 5.9. “Imminent Risk” means a situation of immediate danger, such as a real and present danger to health and safety of the Community, or to the environment, or a significant threat to infrastructure, information or financial systems, and assets of the Institution. For example, Imminent Risk may include such serious reports as a pending violent attack, a gas leak, a highly contagious illness, an information systems breach, and / or infiltration of Institution financial or banking systems.

6. Guiding Principles

- 6.1. All employees who are aware of possible wrongdoing have a responsibility to disclose that information in accordance with section 8 of this Policy.
- 6.2. GPRC has zero tolerance for reprisals made against Reporters of information related to wrongdoing.
- 6.3. The Institution will take action in an objective manner on all reports of wrongdoing it receives.
- 6.4. Any investigative activity required in relation to a suspected wrongdoing will be conducted impartially and objectively as directed by the Chief Officer or Designated Officer.
- 6.5. The Designated Officer must ensure that internal processes are in place to collect all reports made, regardless of form, and regardless of to whom they are made.
- 6.6. Anyone who suspects a wrongdoing must make a report immediately and will not attempt to personally conduct investigations or interviews related to any suspected wrongdoing.

- 6.7. GPRC will ensure that its staff and faculty are aware of the safe disclosure procedures, the protection of Reporters of wrongdoing under the Act, and have received periodic training on the Employee Code of Conduct, as well as this Policy.
- 6.8. The Safe Disclosure Policy will not in any way contravene the Act or other laws in the Province of Alberta. In the event of any inconsistency of this Policy with Federal and Provincial statutes, the Federal and Provincial statutes will take precedence.

7. No Reprisals

- 7.1. An employee, who in good faith:
 - 7.1.1 Seeks advice about making a disclosure,
 - 7.1.2 Makes or made a disclosure
 - 7.1.3 Cooperated in an investigation, or
 - 7.1.4 Declined to participate in a wrongdoing, will not be subject to reprisal.
- 7.2. An employee may make a written complaint to the Public Interest Commission if the employee alleges that a reprisal has been taken or directed against the employee. Complaints of reprisal can only be made to / investigated by the Public Interest Commissioner, and must be made on a Complaint of Reprisal Form available on the cross-referenced website.
- 7.3. Reasonable human resource management decisions made in good faith do not constitute a reprisal.
- 7.4. If following an investigation, the Commissioner finds a reprisal occurred; the Commissioner is obligated to refer the decision to the Labour Relations Board for determination as to the appropriate remedy, which could include prosecution, or financial restitution and / or reinstatement.

8. Disclosure

- 8.1. Any employee considering making a disclosure may request in confidence information or advice from the employee's Supervisor, Designated Officer, Chief Officer, or the Commissioner (website and phone number listed under Cross-Reference section). The Designated Officer, the Chief Officer or the Commissioner may require a request for information or advice to be in writing.
- 8.2. Disclosures of wrongdoing must be made in writing. A disclosure of wrongdoing must include:
 - 8.2.1 A description of the wrongdoing.
 - 8.2.2 The name of the individual or individuals alleged to have committed the wrongdoing, or to be about to commit wrongdoing.
 - 8.2.3 The date of the wrongdoing.
 - 8.2.4 Identify if whether a disclosure in respect of a wrongdoing has already been made and whether a response has been received. If a response was received, a copy of the response must be attached.

- 8.2.5 Any additional information reasonably required in order to investigate the matters set out in the disclosure.
- 8.3. The Chief Officer will ensure the safe disclosure program provides several options for individuals to make a wrongdoing report (“report”), including, but not limited to:
 - 8.3.1 Reporting directly to the Designated Officer or Chief Officer in confidence
 - 8.3.2 Reporting to a secondary designated individual(s)
 - 8.3.3 An option for individuals to make anonymous and confidential reports
- 8.4. Any employee may also contact the office of the Public Interest Commissioner to advise they have made a disclosure to their Designated Officer for the purposes of commencing an investigation.
- 8.5. Disclosures should be factual rather than speculative and contain as much specific information as possible.
- 8.6. In the event that disclosure to the Designated Officer is not appropriate due to conflict of interest with respect to the nature of the disclosure of the person involved, disclosure may be made to the Chief Officer. The Chief Officer may then refer the disclosure to an alternate employee that the Chief Officer deems appropriate to manage and investigate the disclosure under this Policy and the Act.
- 8.7. Employees can disclose directly to the Public Interest Commissioner, circumventing their Chief Officer and their Designated Officer.
- 8.8. The Chief Officer or Designated Officers is to report matters of imminent risk to the life, health or safety of individuals or the environment, to:
 - 8.8.1 an appropriate law enforcement agency;
 - 8.8.2 in the case of a health-related matter, to the Chief Medical Officer of Health;
 - 8.8.3 the department, public entity or office responsible for managing, controlling, or containing the risk, if any.

The investigation into the disclosure must be suspended until the matter of imminent risk has been disposed of by the above entity that it was reported to.
- 8.9. In circumstances where the Chief Officer or Designated Officer has reason to believe that a criminal offence has been committed under a statute or regulation, the Act requires the offence be reported to a law enforcement agency and to the Minister of Justice and Solicitor General as soon as reasonably practicable. The investigation into the disclosure must be suspended until a law enforcement agency or the Minister of Justice and Solicitor General has finally disposed of the matter.
- 8.10. If required, the Designated Officer will request advice from the Commissioner with respect to the management and investigation of a disclosure.

9. Confidentiality

- 9.1. GPRC will maintain its reports in the highest confidence, kept secure and apart from its other business records. Maintaining confidentiality is paramount to the success of the process. Accordingly, the risk of confidentiality will be strictly managed from the outset of a disclosure being

received through to the end of the investigation and report release. In order to enhance confidentiality, as few people as are required will handle disclosures. Employees must not share information or evidence regarding disclosures or wrongdoing with fellow employees who do not have a need to know such information and who are not authorized to address disclosures.

9.2. All participants (including the Chief Officer, and Designated Officer) in an investigation shall keep confidential:

9.2.1 The identity of individuals involved in the disclosure process.

9.2.2 The identity of individuals alleged to have committed the wrongdoings.

9.2.3 The identity of witnesses.

9.2.4 The information collected in relation to a disclosure.

9.2.5 The details and results of the investigation provided however such confidentiality may not be maintained for matters which pose an imminent risk of a substantial and specific danger to life, health or safety of individuals, or to the environment.

9.3. Confidentiality is also subject to the provisions of Alberta's Freedom of Information and Protection of Privacy Act (FOIP) and other legislation. FOIP restricts on the right of access to a record that would reveal the identity of a person who has requested advice about making a disclosure, made a disclosure, or submitted a complaint of reprisal or whose complaints have been referred to the Labour Relations Board, unless that information can reasonably be severed from a record.

9.4. Restrictions to access to information requests must go through GPRC's Information and Privacy Coordinator.

10. Investigations

10.1. Upon receiving a disclosure, the Designated Officer shall determine whether or not an investigation is warranted.

10.2. An investigation may involve both internal and external sources to assist in determining whether an improper activity has occurred and what corrective action may be appropriate.

10.3. Any corrective action will be imposed by the Chief Officer or Designated Officer in accordance with the Progressive Discipline Policy, or other applicable GPRC policies.

10.4. Where a disclosure received by the Designated Officer would, in the view of the Designated Officer, be more appropriately dealt with by the Commissioner or by another department, public entity or office of the Legislature, the Designated Officer shall refer such disclosure to the Commissioner or the Chief Officer or Designated Officer of such department, entity or office within 15 business days of receipt. The employee or other person making the disclosure will be advised by the Designated Officer about the referral.

10.5. A single investigation may be conducted in circumstances where multiple disclosures are made on the same matter.

10.6. If during an investigation the Designated Officer has reason to believe that another wrongdoing has been committed or may be committed the Designated Officer may investigate that wrongdoing.

10.7. Offences discovered under a provincial or federal Act or regulation must be reported as per the requirements of that Act or regulation.

- 10.8. An investigation report will include: evidence, rational fact finding, and a conclusion indicating if the claim was substantiated or unsubstantiated. The report will be forwarded to the Designated Officer for consideration, recommendations and action.

11. Timelines

- 11.1. The employee who submitted a disclosure of wrongdoing shall be acknowledged not more than 5 business days from the date on which the disclosure of wrongdoing or complaint of reprisal is received.
- 11.2. The Designated Officer has not more than 20 business days from the date on which the disclosure of wrongdoing is received to determine whether an investigation is warranted and to communicate that decision to the employee making the disclosure.
- 11.3. An investigation must be concluded not more than 120 business days from the date on which the disclosure of wrongdoing was received with a written report is received submitted to the Chief Officer.
- 11.4. These timelines may be extended by up to 30 days by the Chief Officer, or for a longer period of time if approved by the Public Interest Commissioner.

12. Reporting

- 12.1. The Designated Officer will maintain a detailed log and original documentation of all reports received within a five-year period, and provide semi-annual reporting on reports received to the Chief Officer. The Chief Officer will provide annual reporting of its activities, reports received and actioned or not actioned, and outcomes to the Board of Governors.
- 12.2. Annual reports by the Chief Officer will include the following:
 - 12.2.1 The number of total disclosures received or referred to the Designated Officer.
 - 12.2.2 The number of disclosures acted upon.
 - 12.2.3 The number of disclosures not acted on.
 - 12.2.4 The number of investigations commenced by the Designated Officer.
 - 12.2.5 In the case of an investigation that results in a finding of wrongdoing, a description of the wrongdoing and any recommendations made or corrective measures taken in relation to the wrongdoing or the reasons why no corrective measure was taken.
- 12.3. The Act specifically restricts the Chief Officer from publicly identifying in their annual report, an employee who sought advice, made a disclosure, or made a complaint of reprisal, and from disclosing individually identifying health information.
- 12.4. The Chief Officer's report described in 12.2 must be included in GPRC's Annual Report.

13. Redress

- 13.1. Anyone who contravenes this policy may be subject to a range of corrective measures, up to and including dismissal from the Institution. This includes any employee who is found to have taken retribution against an individual who has disclosed wrongdoing or an employee who knowingly made malicious, misleading, or false disclosures.

13.2. Decisions to prosecute or refer investigative results to the appropriate law enforcement and/or regulatory agencies will be made in conjunction with the Designated Officer, Chief Officer, and external legal counsel, as will final decisions on disposition of the case.

13.3. Outcomes will be fair and reasonable for all persons involved.

14. Roles and Responsibilities

STAKEHOLDER	RESPONSIBILITIES
Executive Council	<ul style="list-style-type: none"> • Approve and formally support this Policy
President and CEO (Chief Officer)	<ul style="list-style-type: none"> • May appoint a Designated Officer to directly manage the safe disclosure program • Ensure systems are in place to mitigate the risk of reprisals • Ensure information about this Act and the procedures established are widely communicated to employees
Director, Human Resources	<ul style="list-style-type: none"> • Act as Designated Officer if appointed by the Chief Officer to manage the Safe Disclosure program • Ensure that knowledge of reports received is strictly limited to those persons who must know in order to carry out procedures.
Supervisors	<ul style="list-style-type: none"> • Supervisors are to be aware of the Act and their obligation to provide information and advice about the Act to employees under their supervision. This can include providing detailed information and advice, or simply referring the employee to the Designated Officer, or to the Commissioner
GPRC Community	<ul style="list-style-type: none"> • Be knowledgeable of and compliant with this Policy • Comply with all policies and procedures in conducting their work • Report any wrongdoing without delay.

15. Inquiries

15.1. Inquiries regarding this policy can be directed to the Designated Officer or the Chief Officer.

16. Amendments (Revision History)

16.1. Amendments to this policy will be published from time to time and circulated to the GPRC Community.

16.2. Post-Implementation Policy Review: Approved June 4, 2019