Policy Name **WHISTLEBLOWER POLICY**			Policy Category **OPERATIONS**
Date of Approval March 13, 2023	*Activation Date* March 13, 2023		*Replacing Previous Version* **March 31, 2021**
Approved By **Board of Directors**		*Review Cycle* **Governance Committee – every two years or more often as necessary due to *Complaint and Discipline Policy* revision**	

1. PURPOSE

The purpose of this Policy is to allow Workers to have a discrete and safe procedure by which they can disclose incidents of wrongdoing in the workplace without fear of unfair treatment or reprisal.

2. WORKERS

Worker – Any person who performs work for FHC including employees, managers, supervisors, temporary workers, volunteers, student volunteers, part-time workers, and independent contractors.

3. APPLICATION

This Policy only applies to Workers who observe or experience incidents of wrongdoing committed by Directors or by other Workers.

If the Board Chair or CEO is the subject of the incident of wrongdoing or misconduct that is being investigated, the Vice Chair will replace any decision making role for the Board Chair or CEO within this policy.

Incidents of wrongdoing or misconduct observed or experienced by participants, volunteers, spectators, parents of participants, or other individuals not employed or contracted by FHC can be reported under the terms of the ***Complaints and Discipline Policy*** and/or reported to the Board Chair or Chief Executive Officer to be handled under the terms of the individual Worker's Employment Agreement or Contractor Agreement, as applicable, and/or the organization's policies for human resources.

Matters reported under the terms of this Policy may be referred to be heard under the ***Complaints and Discipline Policy***, at the discretion of the Compliance Officer.

Any violation of this Policy that may be considered "Prohibited Behaviour" or "Maltreatment" (as defined in the UCCMS) when the Respondent is a Registered Participant who has been designated by FHC as a UCCMS Participant (as defined in the ***Complaints and Discipline Policy***), will be handled pursuant to the policies and procedures of the Office of the Sport Integrity Commissioner ("OSIC"), subject to the rights of FHC as set out in the ***Complaints and Discipline Policy*** and any applicable workplace policies

4. WRONGDOING

Wrongdoing can be defined as:

a) Violating the law;

b) Intentionally or seriously breaching of the ***Code of Conduct and Ethics***;

c) Committing or ignoring risks to the life, health, or safety of a participant, volunteer, Worker, or other individual;

d) Directing an individual or Worker to commit a crime, serious breach of a policy, or other wrongful act; or

e) Fraud.

5. PLEDGE

FHC pledges not to dismiss, penalize, discipline, or retaliate or discriminate against any Worker who discloses information or submits, in good faith, a report against a Worker or Director under the terms of this Policy.

Any individual affiliated with FHC who breaks this Pledge will be subject to disciplinary action.

6. REPORTING WRONGDOING

A Worker who believes that a Director or another Worker has committed an incident of wrongdoing should prepare a report that includes the following:

a) Written description of the act or actions that comprise the alleged wrongdoing, including the date and time of the action(s);

b) Identities and roles of other individuals or Workers (if any) who may be aware of, affected by, or complicit in, the wrongdoing;

c) Why the act or action should be considered to be wrongdoing; and

d) How the wrongdoing affects the Worker submitting the report (if applicable).

7. AUTHORITY

A Compliance Officer has been appointed to receive reports made under this Policy. The link is publicly available on FHC website

After receiving the report, the Compliance Officer has the responsibility to:

a) Assure the Worker of the **Pledge;**

b) Determine if the report is frivolous, vexatious, or not submitted in good faith (e.g., the submission of the report is motivated by personal interests and/or the content of the report is obviously false or malicious) and, if so, inform the Worker that no action will be taken on the report and the reasons why the report has been considered frivolous, vexatious, or not in good faith;

c) Determine if the ***Whistleblower Policy*** applies or if the matter should be handled under the ***Complaints and Discipline Policy***;

d) Determine if the local police service be contacted;

e) Determine if mediation or alternative dispute resolution can be used to resolve the issue;

f) Determine if the Board Chair and/or Chief Executive Officer should or can be notified of the report; and

g) Begin an investigation.

8. INVESTIGATION

If the Compliance Officer determines that an investigation should be launched, the Compliance Officer may decide to contract an external investigator. In such cases, the Board Chair and/or Chief Executive Officer may be notified that an investigation conducted by an external investigator is necessary without the nature of the investigation, content of the report, or identity of the Worker who submitted the report being disclosed. The Board Chair and/or Chief Executive Officer may not unreasonably refuse the decision to contract an external investigator.

An investigation launched by the Compliance Officer or by an external investigator should generally take the following form:

a) Follow-up interview with the Worker who submitted the report;

b) Identification of Workers, participants, volunteers or other individuals that may have been affected by the wrongdoing;

c) Interviews with such-affected individuals;

d) Interview with the Director(s) or Worker(s) against whom the report was submitted; and

e) Interview with the supervisor(s) of the Worker(s) against whom the report was submitted, if applicable.

The investigator will prepare an Investigator’s Report – omitting names whenever possible and striving to ensure confidentiality – that will be submitted to the Board Chair and/or Chief Executive Officer for review and action.

9. DECISION

Within fourteen (14) days after receiving the Investigator’s Report, Board Chair and/or Chief Executive Officer will take corrective action, as required. Corrective action may include, but is not limited to including:

a) Enacting and/or enforcing policies and procedures aimed at eliminating the wrongdoing or further opportunities for wrongdoing;

b) Revision of job descriptions; or

c) Discipline, suspension, termination, or other action as permitted by the By-laws, provincial/territorial employment legislation, applicable policies for human resources, and/or the Worker's Employment Agreement or Contractor Agreement.

The corrective action, if any, will be communicated to the investigator who will then inform the Worker who submitted the report.

Decisions made under the terms of this Policy may be appealed under the terms of the *Appeals Policy* provided that:

a) If the Worker who submitted the initial report is appealing the decision, the Worker understands that their identity must be revealed if they submit an appeal, and

b) If the Director or Worker against whom the initial report was submitted is appealing the decision, the Worker or Director understands that the identity of the Worker who submitted the report will not be revealed and that the organization will act as the Respondent.

10. CONFIDENTIALITY

Confidentiality at all stages of the procedures outlined in this Policy – from the initial report to the final decision – is assured for all individuals (the Worker, the Worker(s), or Director(s) against whom the report is submitted, and the individuals interviewed during the investigation). An individual who intentionally breaches the confidentiality clause of this Policy will be subject to disciplinary action.

In all stages of the investigation, the investigator will take every precaution to protect the identity of the Worker who submitted the report and/or the specific nature of the report itself. However, FHC recognizes that there are some instances where the nature of the report and/or the identity of the Worker who submitted the report will or may be inadvertently deduced by individuals participating in the investigation.