

## Kitchener Downtown Community Health Centre

### Type of Policy:

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|---|--|
| <input type="checkbox"/> Administration (A)               | <input type="checkbox"/> Client Services General (CG)        |
| <input type="checkbox"/> Board of Directors (B)           | <input type="checkbox"/> Client Services Programs (CP)       |
| <input type="checkbox"/> Financial (F)                    | <input type="checkbox"/> Primary Care (PC)                   |
| <input type="checkbox"/> Human Resources (H)              | <input type="checkbox"/> Acquired Brain Injury Program (ABI) |
| <input type="checkbox"/> KDCHC Governing Principles (K)   | <input type="checkbox"/> Diabetes Education Program (DEP)    |
| <input type="checkbox"/> Occupational Health & Safety (S) |  |
| <input type="checkbox"/> Volunteers (V)                   |  |

**Policy No: B0101**

**Title: Reporting of Inappropriate Activity**

### Policy

Kitchener Downtown Community Health Centre is committed to a culture of honesty, integrity, transparency and accountability. The purpose of this Policy is to describe the procedures through which all Board of Directors, employees, students and volunteers or community members may report concerns regarding serious problems in the event that the organization is participating in an activity that may be perceived as inappropriate.

### Definition

Inappropriate activity may include actions such as illegal activities (e.g. financial irregularities), unprofessional or unethical activities, serious violations of the Executive Limitations policy, or other activity that poses a severe risk to the organization. These matters may relate to highly confidential or sensitive information.

### Reporting Violations

Directors, officers, staff and volunteers should share their, concerns, or complaints with someone who can address them properly. In most cases, a manager or the Executive Director is in the best position to address an area of concern. This policy does not preclude a staff member from attempting to address a concern, if appropriate, through the Problem Resolution process described in section 7.4 of the Employee Relations Policy. However, if an employee or volunteer is not comfortable speaking with a manager or the Executive Director, or they are not satisfied with the response, they are encouraged to speak to the Board Chairperson.

The Board Chairperson may be contacted through the Director of Administration, whose e-mail address is listed on the KDCHC website. An individual (complainant) who becomes aware of a situation involving inappropriate activities on the part of the Executive Director, Managers, staff or volunteers should bring it to the attention of the Board Chairperson as soon as feasible.

No person who reports an inappropriate activity in good faith shall suffer harassment, retaliation or adverse employment consequence. Good faith refers to having reasonable grounds for the allegations

and to not maliciously or knowingly make allegations that are false. Employees or volunteers who do not act in good faith may be subject to disciplinary action in keeping with KDCHC policies.

### **Procedure**

1. In the event that an individual wishes to contact the Board Chairperson regarding a serious concern, they should contact the Director of Administration. The individual need not provide details of their concern to the Director of Administration.,
2. The Director of Administration will contact the Board Chairperson within two working days to notify them that a request for a meeting has been made.
3. The Board Chairperson will arrange for a meeting with the complainant to take place within ten working days of the initial contact. The meeting will take place at a mutually agreeable location.
4. The complainant will provide to the Chairperson a detailed written explanation of the issue(s) prior to the meeting, and may be requested to provide additional written information following the meeting. The complainant will be asked if they need support or an accommodation to communicate their concern or complaint.
5. The Chairperson will also meet with the Executive Director and will request written documentation.
6. Depending on the situation, the Chairperson may be able to address the situation directly or may meet with the Board Governance Committee to share information and get support for next steps and decisions that may be required. The Governance Committee may access the assistance of an external party and be able to pay a consultation fee as needed through the KDCHC budget.
7. The Chairperson will use best efforts to make a decision within 20 working days of the initial complaint.
8. The Chairperson will inform the complainant and the Executive Director of the decision in writing.
9. If no resolution is reached, or depending on the situation, the full Board will meet and make a decision within 25 working days from the time of the original complaint. All parties shall then be advised in writing.
10. Appropriate corrective or disciplinary action will be taken if warranted by the investigation.
11. All documentation will be kept in the personnel files associated with the people involved.

### **Reference Documents:**

Employee Relations Policy H0104; section 7.4 - Problem Resolution  
Executive Limitations Policy B1205

**Approved By: Board of Directors**

**Date: January 27, 2015**