

Protected Disclosure (Whistleblower) Procedures			
Parent Policy	Protected Disclosure (Whistleblower) Policy		
Policy Sponsor	Vice President, Finance and Performance Services & Chief Financial Officer	Category	Administrative
Policy Contact	Chief Internal Auditor	Effective Date	May 19, 2021
Procedure Contact	Chief Internal Auditor	Review Date	May 19, 2026

1. Purpose

This procedure guides the reporting of a Protected Disclosure, informs the Whistleblower of protection provisions and explains the processes for the investigation and response to a Protected Disclosure.

2. Scope

This procedure applies to any individual who makes a Protected Disclosure, including members of the Athabasca University Community and anyone in a business relationship with the University. It assigns responsibility for the management and investigation of Protected Disclosures.

3. Definitions

Board Audit Committee	Assists the Board in fulfilling its due diligence, fiduciary, financial reporting and audit responsibilities and to approve, monitor, evaluate and provide advice on matters affecting the external audit, internal audit, risk management, legal and regulatory compliance, and the financial reporting and accounting control policies and practices of the University.
Chief Internal Auditor	An employee who directs the delivery of internal audit services for Athabasca University under the terms of the Internal Audit Charter. This employee is also designated by the Chief Officer to manage and investigate a Protected Disclosure, as prescribed in the <i>Public Interest Disclosure (Whistleblower Protection) Act</i> .
Public Interest Commissioner	Means the Public Interest Commissioner appointed under section 38 of the <i>Public Interest Disclosure (Whistleblower Protection) Act</i> .
Good Faith	Honestly intended action based on reasonable belief and not malicious, frivolous, or vexatious in nature.
PIDA	<i>Alberta Public Interest Disclosure (Whistleblower Protection) Act, SA 2012, c P-39.5.</i>

Procedural Fairness and Natural Justice	The right of a person to be heard in a fair and unbiased manner prior to a decision being made that may have a negative impact on their rights or interests. This includes being informed of the facts alleged and given a full opportunity to respond. However, this does not include being informed of the identity of person(s) who have made Protected Disclosures.
Protected Disclosure	A report of a Wrongdoing, made in Good Faith, in accordance with this Policy.
Reprisal	Any retaliatory or punitive measures that are taken against an individual because the individual has sought advice about making a Protected Disclosure, made a Protected Disclosure in good faith, co-operated in an investigation of a Protected Disclosure, or declined to participate in behavior that would breach University policy.
Service Provider	An independent external organization contracted by Athabasca University to provide a confidential process that enables people to make Protected Disclosures.
Supervisor	A person who has charge of a work site or authority over a worker.
University Community	All faculty and staff, students, Board Members, contractors, postdoctoral fellows, volunteers, visitors and other individuals who work, study, conduct research or otherwise carry on business of the University.
Whistleblower	A person making a Protected Disclosure.
Wrongdoing	<p>A known or suspected act which has occurred, suspected to have occurred or is anticipated to occur, which includes, but is not limited to:</p> <ul style="list-style-type: none"> • a serious contravention of Athabasca University policies, procedures or regulations; • acts which are in a contravention of relevant legislation (Federal, Provincial or Municipal acts or regulations); • acts of fraud or financial irregularity; • a misuse of funds, assets or resources; • a gross mismanagement of Athabasca University funds or assets; • an act or omission that creates a substantial or specific danger to the life, health or safety of persons or to the environment; • a behavior or conduct of a systemic nature that indicates a problem in the culture of the organization relating to bullying, harassment or intimidation; • a serious breach of ethics or code of conduct;

- an interference;
- a Reprisal;
- a serious misrepresentation;
- directing or counselling a person to commit a Wrongdoing; and
- any behavior, act or omission described in wrongdoing referred to in section 3 of PIDA may also make use of the PIDA-specific procedure.

4. Guiding Principles

4.1. The University will establish and maintain Protected Disclosure processes that are guided by these overarching principles:

- a) Reporting mechanisms will ensure anyone can confidentially disclose Wrongdoing.
- b) The University will promote a culture that supports any individual who comes forward, in Good Faith, to report wrongdoing; and afford them protections including prohibiting subsequent Reprisals against them.
- c) Internal audit mechanisms will ensure its investigations of a Protected Disclosure are systematic, disciplined, and timely. Processes will be guided by principles for Procedural Fairness and Natural Justice.
- d) Any employee of Athabasca University may also undertake a Protected Disclosure through the Public Interest Commissioner where eligible under the *Public Interest Disclosure (Whistleblower Protection) Act* and pursuant to the provisions in PIDA and any applicable internal Standard Operating Procedures.

4.2. Key Roles and Responsibilities

- a) The University's Chief Internal Auditor is designated with responsibility for the management and investigation of Protected Disclosures including:
 - i. Receipt of disclosures of Wrongdoing at Athabasca University.
 - ii. Provision of information and advice to anyone who is considering making a Protected Disclosure.
- b) Members of the University Community have a responsibility to cooperate during an investigation, and to provide any information the Chief Internal Auditor or Public Interest Commissioner may require. Employees are protected for seeking advice from their Supervisor.

4.3. Types of Protected Disclosures

- a) Any action defined as a Wrongdoing by this Procedure may be reported as a Protected Disclosure to the Chief Internal Auditor.
- b) A wrongdoing as set out in section 3 of PIDA, by those entitled to make a Protected Disclosure in accordance with that legislation, may also report a Protected Disclosure to the Public Interest Disclosure Commissioner as allowable by that Act.

4.4. Seeking Advice

- a) Anyone seeking advice on making a disclosure is protected from any adverse action or Reprisal as a result of seeking advice in accordance with the provisions in sections.
- b) In circumstances where a complaint relates to the Chief Internal Auditor or the University President, individuals are encouraged to seek advice from the Public Interest Commissioner.
 - i. The Office of the Public Interest Commissioner may be contacted at:
Email: info@pic.alberta.ca
Phone: 1.855.641.8659
www.yourvoiceprotected.ca

4.5. Reporting Wrongdoing

- a) Any individual, who is acting in Good Faith and believes that a Wrongdoing has been committed or is about to be committed, is expected to report the Wrongdoing. Individuals may also be obligated by their governing code of conduct to report Wrongdoing.
- b) Individuals have three ways to securely and confidentially make a Protected Disclosure.
 - i. Individuals who want to report Wrongdoing should contact the Chief Internal Auditor. Individuals should clearly indicate they are making a Protected Disclosure and provide the information as set out in 4.6 below. The Chief Internal Auditor may be contacted at:
Email: internalaudit@athabascau.ca
 - ii. Individuals may contact the anonymous Confidence Line, an authorized external Service Provider, by telephone or online at: 1-800-661-9675 or <http://www.athabasca-university.confidenceline.net; or>

- iii. In accordance with the PIDA and any applicable internal Standard Operating Procedures, where an individual is entitled to make a Protected disclosure pursuant to section 3 of PIDA.
- c) Disclosures of Wrongdoing relating to the University President or the Chief Internal Auditor that meet the criteria under PIDA should be made to the Public Interest Commissioner.
- d) Individuals considering reporting a Wrongdoing anonymously should seek advice from the Chief Internal Auditor. Anonymous disclosures may not be acted on if there is inadequate particulars provided about the alleged Wrongdoing and would therefore not permit the conduct of a fair and effective investigation.

4.6. Receiving a Protected Disclosure

- a) Protected Disclosures must include:
 - i. a description of the Wrongdoing;
 - ii. dates associated with the Wrongdoing;
 - iii. name and title of the alleged wrongdoer(s);
 - iv. name and title of any other parties involved;
 - v. if applicable, the specific division or business unit where the Wrongdoing occurred; and
 - vi. whether you have reported the Wrongdoing using any other internal procedure, and the outcome.
- b) Once received, the disclosure must be acknowledged in writing within five business days in one of the following:
 - i. If made through to the Chief Internal Auditor, written confirmation will be provided to the person making the Protected Disclosure;
 - ii. If made through the Confidence Line, the Service Provider will provide written confirmation to the person making the Protected Disclosure; or
 - iii. If an eligible disclosure is made to the Public Interest Commissioner pursuant to PIDA, the Public Interest Commissioner will respond in accordance with the provisions of the Act and their internal processes and procedures.

4.7. Investigation of Protected Disclosures

- a) The Chief Internal Auditor carries out or causes to be carried out a preliminary review of the facts presented to determine whether there are reasonable and probable grounds to warrant an investigation.

- b) The Chief Internal Auditor must conclude an investigation not more than 120 business days from the date the disclosure of wrongdoing was received.
- c) The Chief Internal Auditor may request any additional information that he or she may reasonably require in order to investigate the matters set out in the Protected Disclosure.
- d) The Chief Internal Auditor may consult with appropriate internal and external resources, regarding the management and investigation of a Protected Disclosure.
- e) The Chief Internal Auditor will determine whether the Protected Disclosure merits investigation based upon various considerations as to the veracity of the Protected Disclosure. The decision will be relayed, in writing, to the individual who made the Protected Disclosure.
- f) If a decision has been made not to investigate or to discontinue an investigation, the person (if named) making the Protected Disclosure will be advised by the Chief Internal Auditor of the decision and the reasons for it.
- g) Investigations will be in accordance with the principles of Procedural Fairness and Natural Justice and in compliance with applicable policies, codes of conduct and collective agreements.
- h) If the matter is determined to constitute an imminent risk of substantial or specific danger to the life, health or safety of individuals, or to the environment, the Chief Internal Auditor will take steps to immediately address the matter and will report the matter the President and Chair of the Audit Committee will also be informed.
- i) If the matter is outside the University's scope or jurisdiction, the matter will be forwarded to the appropriate entity or authority. This includes matters pertaining to federal, provincial, or municipal legislation or regulations. This decision shall be documented by the Chief Internal Auditor and the President will be informed of this decision.

4.8. Confidentiality

- a) To the fullest extent possible, the Chief Internal Auditor will ensure the confidentiality of the information collected in accordance with these Procedures and contained in the Protected Disclosure and the investigations conducted under this Procedure.
- b) Information will only be shared if it will fulfill one or more of the following outcomes:

- i. establishing interim measures to address the Wrongdoing if needed;
 - ii. initiating, investigating and resolving the Wrongdoing;
 - iii. conforming to the principles of Procedural Fairness and Natural Justice;
 - iv. satisfying legal requirements; and
 - v. ensuring the health and safety of employees in the workplace.
- c) Information may only be released as determined by the Chair of the Audit Committee (or designate) based on recommendations from the President or Designated Officer (or their respective designates).

4.9. Protection from Reprisals

- a) Athabasca University supports individuals who come forward in Good Faith to report Wrongdoing. Reprisals will not be tolerated.
- i. Anyone who takes, directs, or counsels a Reprisal against an individual may be subject to disciplinary action, including termination of employment, by Athabasca University. Any action will be in consideration of applicable provisions contained in any collective agreements.
 - ii. Anyone who takes, directs, or counsels a Reprisal against an employee as set out in PIDA is liable to prosecution under the *Alberta Public Interest Disclosure (Whistleblower Protection) Act*.
- b) For individuals who believe they have been the target of a Reprisal, they may make a complaint of Reprisal directly to the Public Interest Commissioner using the form on the Public Interest Commissioner's website if entitled to do so in accordance with PIDA.
- c) Any individual who has, in Good Faith, taken any of the following actions is protected from Reprisal:
- requested advice about making a Disclosure from a Supervisor, the Chief Internal Auditor, or the Public Interest Commissioner;
 - made a Protected Disclosure;
 - cooperated in an Investigation; or
 - declined to participate in a Wrongdoing; or
 - done anything in accordance with this Procedure and its Policy.

4.10. Reporting and Outcomes

- a) The final report of the investigation will provide a comprehensive summary of the investigation that addresses the overall management of the

investigation by the Chief Internal Auditor as well as by any other internal or external resources engaged during the investigation.

- b) A final report will be prepared by the Chief Internal Auditor and provided to the Vice President, Finance and Performance Services & Chief Financial Officer, the President, and the Board Audit Committee.
- c) Once finalized an investigation's final report will provide a summary of the incident, including results of the investigation and outcomes including:
 - i. recommendations to improve the effectiveness of governance, risk management, and control processes for consideration by decision-makers.
 - ii. any disciplinary action, termination and/or civil action to mitigate financial losses.
- d) The University President is responsible for implementing corrective measures at the conclusion of an investigation.
- e) Should the investigation involve the President or a Vice President, the final report will be submitted to the Chair of the Board Audit Committee.
- f) On a regular basis, the Chief Internal Auditor will provide a summary report of each Protected Disclosure to the Vice President, Finance and Performance Services and Chief Financial Officer, the President, and the Board Audit Committee.

5. Applicable Legislation and Regulations

[Post-Secondary Learning Act](#)

[Alberta Public Interest Disclosure \(Whistleblower Protection\) Act](#)

[Freedom of Information and Protection of Privacy Act](#)

[Athabasca University Regulation](#)

[Athabasca University Regulation](#)

6. Related Procedures/Documents

[Protected Disclosure \(Whistleblower\) Policy](#)

[Code of Conduct and Conflict of Interest Guidelines for the Board of Governors](#)

[Code of Conduct for Members of the University Community](#)

[Conflict of Interest in Research Policy](#)

[Fraud and Financial Irregularity Policy](#)

[Protection of Privacy Policy](#)

[Non-Academic Misconduct Policy](#)

[Research Integrity Policy](#)

[Security of Digital Information and Assets Policy and related Procedures](#)

[Student Academic Misconduct Policy](#)

[Harassment, Violence and Sexual Violence Policy](#)

NOTE: The subject matter and scope of this procedure are also supported by internal-use only guidelines and Standard Operating Procedures.

History

<i>Date</i>	<i>Action</i>
May 19, 2021	Revised Policy Approved (Executive Team)
January 22 2015	Revised Policy Approved (Board of Governors Motion #194-11)
December 13, 2007	Policy Approved (Executive Group Motion #160-4)