



POLICY AND PROCEDURE	
SUBJECT/TITLE:	Whistleblower Protection Policy
APPLICABILITY:	All Staff
CONTACT TITLE & DIVISION:	Health Commissioner, Administration
ORIGINAL DATE ADOPTED:	01/27/2026
LATEST EFFECTIVE DATE:	01/27/2026
REVIEW FREQUENCY:	Every 5 years
BOARD APPROVAL DATE:	01/27/2026
REFERENCE NUMBER:	800-064-P

A. PURPOSE

The intent of this Whistleblower Protection Policy is to promote transparency, accountability, and ethical conduct by providing a safe and confidential process for employees and affiliated individuals of Canton City Public Health (CCPH) to report concerns regarding suspected misconduct, violations of law or policy, misuse of resources, or other unethical behavior. This policy affirms our organization's commitment to protecting individuals from retaliation, discrimination, or adverse employment consequences. By encouraging the reporting of concerns, we aim to foster a culture of integrity and trust while ensuring that potential issues are addressed promptly and appropriately in alignment with our organizational values and legal obligations.

B. POLICY

CCPH is committed to maintaining a workplace where individuals can raise concerns about suspected misconduct or violations of law, policy, or ethical standards without fear of retaliation. It is the policy of the Board of Health to encourage and support the good-faith reporting of such concerns and to promptly investigate and address them through appropriate channels.

This policy applies to all employees, contractors, interns, volunteers, board members, or other persons acting on behalf of the organization. Any individual who reports a concern in good faith will be protected from retaliation, harassment, adverse employment action, or any form of discrimination as a result of their report.

Reports may relate to, but are not limited to, financial irregularities, misuse of funds or resources, conflicts of interest, violations of public health laws or regulations, unsafe practices, harassment, or other behavior inconsistent with our values and standards of conduct.

Retaliation against a whistleblower is strictly prohibited. Any individual found to have engaged in retaliatory behavior will be subject to disciplinary action, up to and including termination.

C. BACKGROUND

The establishment of this Whistleblower Protection Policy is grounded in CCPH's dedication to operating with transparency, integrity, and in full compliance with applicable laws and regulations. In particular, Section 200.217 of Title 2 of the Code of Federal Regulations (Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards) mandates that recipients and subrecipients of federal funding must not retaliate against employees who, in good faith, disclose evidence of gross mismanagement of federal contracts or grants; gross waste of federal funds; abuse of authority; substantial and specific danger to public health or safety; or violations of laws, rules, or regulations related to a federal award.

As part of the 2024 enhancements to the Uniform Guidance, § 200.217 was formally introduced to broaden and clarify federal whistleblower protections. Awardees are now explicitly required to inform employees in writing



of their whistleblower rights and protections under statutes such as 41 U.S.C. 4712. This Policy ensures that CCPH aligns with these federal requirements, fosters a workplace where concerns can be raised safely, and complies with our ethical obligations and the expectations of our stakeholders.

D. GLOSSARY OF TERMS

41 U.S.C. 4712 - A federal statute that protects employees of federal contractors, subcontractors, and grant recipients from retaliation when they disclose evidence of gross mismanagement, waste of funds, abuse of authority, or substantial risks to public health or safety in connection with a federal award.

Affiliated individuals - persons or entities that have a close relationship with a company or another individual, often involving control, influence, or a shared interest. This relationship can be through ownership, management, or other connections that allow them to exert influence over the entity.

Employee - a person who performs a service for wages or other remuneration under a contract of hire, written or oral, express or implied, for the district.

Good faith – there is reasonable belief that the reported conduct constitutes misconduct or a violation, even if the report turns out to be mistaken.

Matter of public concern

- a) a violation of a state, federal, or municipal law, regulation, or ordinance;
- b) a danger to public health or safety; and/or
- c) gross mismanagement, substantial waste of funds, or a clear abuse of authority.

Public body - officer or agency of

- a) the federal government;
- b) the state;
- c) a political subdivision of the state including a municipality or a school district; and
- d) a public university in the state.

Retaliation - any adverse action taken against an individual because they, in good faith, reported a concern, participated in an investigation, or exercised their rights under this policy or applicable law. Retaliation can be overt or subtle and may include, but is not limited to:

- a) Termination, demotion, suspension, or denial of promotion
- b) Reduction in pay or hours
- c) Unjustified negative evaluations or disciplinary action
- d) Exclusion from meetings, communications, or work-related activities
- e) Intimidation, threats, harassment, or hostility in the workplace
- f) Any other conduct that would deter a reasonable person from reporting misconduct or participating in a related process

Uniform Guidance, § 200.217 - A section of the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (commonly referred to as the "Uniform Guidance") issued by the U.S. Office of Management and Budget (OMB). Section 200.217 requires recipients and subrecipients of federal funding to inform their employees of whistleblower protections under 41 U.S.C.



Whistleblower - an employee, contractor, intern, volunteer, board member, or other person acting on behalf of the organization who reports to one or more of the parties specified in this policy, an activity that they consider to be illegal, dishonest, unethical, or otherwise improper.

E. PROCEDURES

1) Reporting Process and Responsibility

- a. If an employee has knowledge of or a concern of illegal or dishonest/fraudulent activity, the employee is encouraged to report such serious concerns so that CCPH can address and correct inappropriate conduct and actions. Notification should be made to their immediate supervisor, the Health Commissioner or the City of Canton Director of Human Resources. Reports may be made in person, in writing, by email, telephone, or by any other reasonable means, including anonymously. All reports or concerns of illegal and dishonest activities will be submitted by the receiving supervisor to the Health Commissioner. Any concerns involving the Health Commissioner should be reported to the Director of Human Resources or the President Pro-Tempore of the Board of Health.
 - i. Prior to conducting any investigation into allegations, CCPH will contact the Law Department to determine jurisdiction, procedural requirements, and whether the matter should be referred to an external agency such as police internal affairs or the Auditor of State.
- b. Employees may also report concerns of fraud, waste, or abuse involving public funds directly to the Ohio Auditor of State's Fraud Reporting System, in accordance with ORC § 117.103. Reports can be made anonymously by phone at 1-866-FRAUD-OH (1-866-372-8364), online at <https://ohioauditor.gov/fraud>, or by mail.
- c. The whistleblower is not responsible for investigating the alleged illegal or dishonest activity, or for determining fault or corrective measures; appropriate management officials are charged with these responsibilities.
- d. Examples of illegal or dishonest activities include violations of federal, state, or local laws; billing for services not performed or for goods not delivered; and other fraudulent financial reporting. The employee must exercise sound judgment to avoid baseless allegations. An employee who intentionally files a false report of wrongdoing will be subject to disciplinary action.
- e. Anonymous reports may be submitted. While anonymity will be respected, providing contact information is encouraged to allow for follow-up and clarification, which supports a more thorough investigation.

2) Investigation Timelines and Expectations

a. Acknowledgement and Initial Review

Canton City Public Health is committed to addressing whistleblower reports promptly and responsibly. Upon receiving a report, the Health Commissioner (or designated investigator) will use their best effort to:

- i. Acknowledge receipt of the concern within three business days, if the reporter's identity is known.
- ii. Conduct an initial review within ten (10) business days to determine whether a full investigation is warranted and identify the appropriate investigative process.

b. Investigation Process

i. Referral to Appropriate Authorities

Before initiating any internal investigation into alleged conduct that may involve criminal activity, civil rights implications, or other complex legal matters, CCPH will



consult with the City of Canton Law Department and, where applicable, external authorities such as law enforcement or internal affairs. CCPH acknowledges that it may not have the legal or procedural authority to conduct certain types of investigations and will defer to appropriate entities to ensure due process and legal compliance. Investigations will not proceed internally until appropriate legal consultation has occurred.

ii. Investigations will be initiated promptly following the initial review and will be conducted in an objective, fair, and timely manner. The Health Commissioner or a designated investigator will lead the process and may involve Human Resources, legal counsel, or other appropriate personnel, depending on the nature of the allegation.

iii. The investigation will include steps such as:

1. Collecting and reviewing relevant documentation
2. Interviewing the reporter (unless anonymous), witnesses, and the subject(s) of the report
3. Assessing facts and evidence against applicable laws, policies, and standards
4. Consulting with subject-matter experts or external investigators if needed

iv. The duration of the investigation will vary depending on the complexity and nature of the concern but will typically be completed within thirty (30) business days. In cases where more time is required, updates may be provided to appropriate parties as necessary.

c. Investigation Outcomes and Resolution:

i. At the conclusion of the investigation, the findings will be documented in a final report, which will include a summary of evidence, determinations regarding policy or legal violations, and recommended actions, if applicable.

ii. Depending on the outcome, the organization may implement one or more of the following:

1. No action, if allegations are unsubstantiated
2. Corrective action (e.g., retraining, policy updates)
3. Disciplinary action (e.g., written warning, suspension, termination)
4. Referral to external authorities, if legally required
5. Systemic changes to reduce future risk

iii. Final outcomes may be shared, in summary form, with appropriate leadership or the Board of Health committee when necessary for oversight and governance, without compromising confidentiality. All outcomes will be handled in accordance with relevant CCPH policies, agreements, and applicable employment laws.

d. Reporter Communication

i. If the report was not submitted anonymously, and the reporter's identity is known, CCPH will confirm receipt of the concern and, when appropriate, may provide general updates regarding the status (e.g., "under investigation," "concluded") without revealing confidential personnel or legal details.

ii. CCPH will not disclose investigative outcomes or personnel actions to the reporter unless required by law or deemed appropriate to preserve transparency without compromising confidentiality. Limitations on disclosure may arise due to legal obligations (e.g., privacy laws, mandatory reporting requirements), the need to protect the integrity of an ongoing investigation, the involvement of external investigators, or the legal rights of the individual(s) subject to the report.



3) Protection for Reporter/Whistleblower

a. Scope of Protection

- i. The employee, or a person acting on behalf of the employee, who reports to a public body or is about to report to a public body a matter of public concern; or
- ii. The employee who participates in a court action, an investigation, a hearing, or an inquiry held by a public body on a matter of public concern.

b. Acting in Good Faith

- i. Anyone filing a written complaint concerning a violation or suspected violation must be acting in good faith and have reasonable grounds for believing the information disclosed indicates a violation.
- ii. Any allegations that prove not to be substantiated and which prove to have been made maliciously or knowingly to be false will be viewed as a serious disciplinary offense.

c. No Retaliation

- i. It is contrary to the values of CCPH for anyone to retaliate against any board member, officer, employee or volunteer who, in good faith, reports an ethical violation or a suspected violation of law, such as a complaint of discrimination or suspected fraud or suspected violation of any regulation governing the operations of CCPH. This includes, but is not limited to, protection from retaliation in the form of an adverse employment action such as termination, compensation decreases, or poor work assignments and threats of physical harm. An employee, contractor, intern, volunteer, board member, or other person who retaliates against someone who has reported a violation in good faith is subject to discipline up to and including termination of employment. Any whistleblower who believes he/she is being retaliated against must contact their supervisor, the Health Commissioner or the City of Canton Director of Human Resources immediately. The right of a whistleblower for protection against retaliation does not include immunity for any personal wrongdoing that is alleged and investigated.

d. Confidentiality

- i. The confidentiality of the reporter/whistleblower will be maintained when possible. In some cases, the identity may have to be disclosed to conduct a thorough investigation, comply with the law, and provide accused individuals with their legal rights of defense.

4) Notification to Board of Health

- a. To ensure transparency and accountability, CCPH will provide oversight updates related to whistleblower reports to the appropriate committee of the Canton City Board of Health, as applicable to the nature of the concern (e.g., Personnel, Finance, or Governance Committee), only when a report has been received and the initial review determines that the concern merits further investigation. These are not routine or scheduled updates but are tied to specific incidents that warrant Board-level awareness. These updates will:

- i. Be shared after an initial review has determined that the concern merits further investigation.
- ii. Include only summary-level information to protect the confidentiality of the reporter and any individuals involved, unless disclosure is required by law or necessary for effective governance.
- iii. Focus on patterns, trends, and systemic issues rather than individual personnel matters, unless the concern involves senior leadership or matters requiring direct Board attention.



b. The identity of the reporter will not be disclosed to the Board except in rare circumstances where:

- i. It is essential to conduct a full and fair investigation,
- ii. The individual has given consent, or
- iii. Disclosure is required by law.

5) Employee Attestation

To support a culture of integrity and reinforce the importance of ethical conduct and non-retaliation, all employees, board members, interns, and volunteers of Canton City Public Health (CCPH) are required to review this Whistleblower Protection Policy. Affirming through the Learning Management System that the policy was received, read and understood also provides as an attestation acknowledging the following:

- a. They have received, read, and understand the Whistleblower Protection Policy;
- b. They understand their responsibility to report concerns of suspected misconduct, violations of policy, or unethical behavior in good faith;
- c. They understand that retaliation against anyone who reports a concern in good faith is strictly prohibited;
- d. They agree to uphold CCPH's commitment to transparency, accountability, and ethical behavior.

F. CITATIONS & REFERENCES

- 1) National Center for Education Statistics (NCES). Adapted from a document developed by the Fairbanks, Alaska, North Star Borough (<https://nces.ed.gov/forum/dataethicscourse/additional-materials/sample-whistleblower.pdf>)
- 2) Ohio Revised Code Section 4113.52 Reporting violations by state and local officials and employees
- 3) US Department of Labor (<https://www.dol.gov/general/topics/whistleblower>)

G. CONTRIBUTORS

The following staff contributed to the authorship of this document:

1. Amanda Archer, MPH; Health Commissioner

H. APPENDICES & ATTACHMENTS

N/A

I. REFERENCE FORMS

N/A

J. REVISION & REVIEW HISTORY

Revision Date	Review Date	Author	Notes

K. APPROVAL

This document has been approved in accordance with the "800-001-P Policy Development" procedure as of the effective date listed above.