



A long and healthy life for all communities of the North West Province

WHISTLE BLOWING POLICY

1 APRIL 2025

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| REVIEW DATE | 31 MARCH 2026 |
| DESCRIPTION | This Document provides for handling of protected disclosures in North West Department of Health as required by the relevant legislation. The policy also states the position and commitment by the Department in ensuring the safety of whistle blowers. |
| COVERAGE | This policy is applicable to all the employees of North West Department of Health, its stakeholders including governance structures as well as clients and service providers. |
| POLICY NUMBER | REM25/SOP01/R26 |

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ABBREVIATIONS

| | | |
|--------------|---|---------------------------------|
| EA | : | Executive Authority |
| AO | : | Accounting Officer |
| SG | : | Superintendent General |
| CRC | : | Case Review Committee |
| NWDOH | : | North West Department of Health |

DEFINITION OF TERMS

Accounting Officer: Superintendent General

CRC: Case Review Committee, a committee established to deal with Anti-Fraud and Corruption matters.

Disclosure: the act of giving information regarding any conduct of an employer or another employee, made by an employee who has reason to believe that the information concerned shows that a person has deliberately failed to comply with legal obligations.

Executive Authority: Member of Executive Council (MEC) of the Department.

External Reporting: Any reporting to any structure as defined in the Protected Disclosure Act that is not recognized as an internal organizational structure. External reporting must refer to reporting done through a legal adviser other than the Director Legal Services within the Department of Health as well as reporting made to bodies and/or structures such as the National Anti-Corruption Hotline, Office of the Public Protector and any other such body.

SG: Superintendent General, who is also referred to as the Accounting Officer.

Internal Reporting: Reporting that is done by an employee of the Department or a stakeholder working with the Department within the internal structures

NWDOH: North West Department of Health

Occupational Detriment: Occupational Detriment as defined in the Protected Disclosures Act will include any act that includes but not limited to

- a) Harassment
- b) Dismissal
- c) Transfer against the will of the employee
- d) Non promotion
- e) Denial of appointment
- f) Or any other action that may be deemed prejudicial to the employee or individual

Whistle blowing: raising a genuine concern about malpractice within an organization (Malpractice can be taking place or suspected to be taking place) furthermore this concern is accompanied by some form of evidence which is a base for further probing/investigation.

Department: Mean North West Department of Health

1. POLICY STATEMENT

- 1.1. The North West Department of Health recognizes and acknowledges that fraud, corruption, maladministration as well as irregular expenditures are detrimental to effective service delivery.
- 1.2. The Department is committed to implementing good governance principles to deal with allegations of fraud and corruption.

- 1.3. The Department communicates to its employees, management and other stakeholders that as part of its corporate governance, it is establishing and will maintain a system for the raising of concerns and disclosures by employees and stakeholders.
- 1.4. The development of this policy also illustrates the Department's intention and commitment to the protection of whistle blowers who would have raised concerns in line with the policy prescripts and the provisions of the Protected Disclosures Act.
- 1.5. The Whistle Blowing policy also makes way for the revision or development of a specific code or guideline on addressing grievances. This will include revision of or clear and concise definition of and differentiation between a grievance and a concern.
- 1.6. The policy seeks to protect employees or individuals who raise concerns in line with the prescripts outlined in this document from any form of occupational detriment.
- 1.7. In line with the above, the Department encourages employees and community members and all other stakeholders to raise any issue that will assist in the maintenance of good governance, reduction of risks, combating of fraud and corruption. To that effect the Department will enforce the Protected Disclosures Act 26 of 2000.

2. PRINCIPLES

- 2.1. Criminal and other irregular conduct within the public and private sector are detrimental to good, effective, and transparent governance and can endanger the economic stability of the Department, the Community, the Province and ultimately the Republic.

- 2.2. All employees have a responsibility to disclose criminal, and any other irregularities in the workplace whether it is based on suspicion or actual events.
- 2.3. The employers has a responsibility to take all necessary steps to ensure that employees who disclose such information as mentioned in 2.2 are protected from any reprisals as a result of such disclosure.

3. PURPOSE

- 3.1. The purpose of this policy is to communicate the North West Department of Health's commitment in ensuring protection and guarantee impartiality towards all who would have taken an effort to alert the Department of any actual or suspected fraud, corruption and/or maladministration.
- 3.2. The policy also serves as the guideline on the steps to be taken by anyone who wishes to blow the Whistle.

4. SCOPE AND APPLICATION OF THE POLICY

- 4.1. The policy applies to all employees of North West Department of Health as well as its stakeholders which includes entities and structures that receive funding and donations from the Department.
- 4.2. Internal and external stakeholders include those who will be contracted to do business with or on behalf of the Department, as well as governance and community representative structures.

5. LEGISLATIVE MANDATE

5.1. The Whistle Blowing Policy is developed based on the following legislations and prescripts:

- 5.1.1. Protected Disclosures Act 26 of 2000 as amended,
- 5.1.2. Promotion of Access to Information Act 2 of 2000 as amended,
- 5.1.3. Promotion of Administrative Justice Act 3 of 2000,
- 5.1.4. .Prevention and Combating of Corrupt Activities Act 12 of 2004,
- 5.1.5. Witness Protection Act 112 of 1998,
- 5.1.6. Protection of Personal information Act, 2013,
- 5.1.7. Whistle blowing: A guide for public sector managers; Public Service Commission,
- 5.1.8. Public Service Regulations, 2016,
- 5.1.9. Public Service Code of Conduct 2016,
- 5.1.10. Resolutions from Provincial Anti-Corruption Forum and National Anti-Corruption Forum also inform this Whistle Blowing Policy

6. CONFIDENTIALITY

- 6.1. All individuals who will raise concerns of misconduct or mismanagement in accordance with the prescripts outlined in this policy are assured that issues will be treated with the highest degree of confidentiality.
- 6.2. All concerns raised through the whistle blowing mechanisms will be treated/ investigated covertly until there is prima facie evidence to the case or such a time as determined by the Accounting Officer in consultation with the Chief Risk Officer, Director Legal Services, Director Human Resource Management or Director Security and Records Management (Case Review Committee, (CRC)).

- 6.3. The policy discourages press conferences or any form of publication of details or part of cases still under investigation irrespective of whether it is a high profile case or not, unless otherwise authorized by the Executive Authority. Press conferences and publication of details of cases have a tendency of creating a media hype which in turn jeopardizes the security and safety of whistle blowers as well compromising the investigations on concerns raised.

7. ROLES AND RESPONSIBILITIES OF WHISTLE BLOWERS

- 7.1. Reporting procedures and protocols addresses and avenues available to employees and other stakeholders for raising concerns or disclosure of any irregularities. Reporting procedure are in line with the guidelines in the Protected Disclosures Act.
- 7.2. Whilst the policy is developed in line with the Protected Disclosures Act, it seeks to promote internal disclosures and as such it must be made clear that protection will be given to employees who choose to follow internal procedures over external ones.
- 7.3. The internal reporting procedure include reporting to the employer or any representative assigned by the Accounting Officer or any reports received through the office of the Member of the Executive Council (MEC).
- 7.4. **Internal Reporting Procedure Will Follow These Steps:**
- 7.4.1. **Step 1:** Raising the concern with your immediate supervisor or head of unit verbally or in writing. In the event that the immediate supervisor is implicated, then the manager next in hierarchy must be informed in writing or telephonically or verbally. Matters reported telephonically or verbally must also be followed up with writing to avoid any misunderstandings.

- 7.4.2. **Step 2:** In the event that the concern does not receive attention, then the Chief Risk Officer or any designee in the Risk and Ethics Management Directorate must be informed in writing or telephonically or through email.
- 7.4.3. **Step 3:** If there is no recourse on the matter of concern within 60 calendar days period, then the matter can be referred to the Accounting Officer (Head of Department) for further intervention.
- 7.4.4. **Step 4** Seeking of legal advice from the Director Legal services must in terms of this policy be treated as part of internal reporting.
- 7.4.5. **Step 5** Concerns or disclosures raised through any member of the Case Review Committee will be treated as internal reporting.
- 7.4.6. **Step 6** All reported cases will be reviewed by the Case Review Committee who will recommend further actions to be taken.

7.5. External Reporting Options

- 7.5.1. In the event that the nature and circumstances surrounding the case or disclosure makes an individual feel that they may not raise the matter using the internal procedures, this Policy promotes that the relevant external structures be utilized, and protection will be offered through the mechanisms provided by the Protected Disclosures Act.
- 7.5.2. Employees or individuals can as their first option under external reporting seek advice from their private legal representatives.
- 7.5.3. The Other option can be reporting of the matter through the National Anti-Corruption Hotline: **0800 701 701**, office of the Public Protector or Office of the Auditor General or Law Enforcement Agencies
- 7.6. It is not necessarily the duty of the employee or individual who has raised the concern to prove that there is a case. However in certain instances the disclosing individual may be requested to furnish further details to enable establishment of case.

- 7.7. This Policy also reiterate PSR, 2016 (13)(e) and PSR, 2016 (14)(q) that any employee, irrespective of rank, who has reasonable grounds to suspect that misconduct is happening, will happen or has happened, is expected to report or disclose irrespective of any confidentiality clause in the contract between the employee and the employer.

8. ANONYMITY OF REPORTERS

- 8.1. The policy acknowledges that individuals who raise concerns or make disclosure may choose to remain anonymous but the Department strongly urges that reporters make themselves known to the official who will be handling the case.
- 8.2. In the event that circumstances dictates that the individual who raised the concern has to be known, the assigned official will have to inform the individual concerned beforehand and get his/her consent.
- 8.3. In the event that the individual raising the concern wishes to remain anonymous, such must be stated explicitly to the official to whom the disclosure is made otherwise the case will be treated as on 9.2
- 8.4. Reporting form is attached as annexure A to this policy.

9. PROTECTION OF REPORTERS

- 9.1 Reporters must be protected in terms of this policy from any form of occupational detriment.
- 9.2 Protection will be offered against but not limited to:
- 9.2.1 Being subjected to disciplinary action;
 - 9.2.2 Being dismissed, suspended, demoted, harassed, or intimidated;
 - 9.2.3 Being transferred against own will;
 - 9.2.4 Being refused promotion;
 - 9.2.5 Being denied appointment to any employment, profession or office;
 - 9.2.6 Any other action that may be deemed prejudice to the employee.

9.3 Protection will not be afforded to those individuals:

9.3.1 Who would have made a disclosure on themselves or who later on turn to be implicated but did not disclose that at the time of reporting.

9.3.2 Whose disclosures are discovered to have been malicious. The act by such an individual will constitute a misconduct that will be subject to consequence management measures.

9.4 Recourse in terms of suspected victimization of reporters will include reporting to the Case Review Committee, the SG or any other designated official internally.

10. POLICY IMPLEMENTATION AND REVIEW

10.1 This policy is effective from the date of approval and must be reviewed on a yearly basis after such approval.

11. POLICY APPROVAL

Recommended

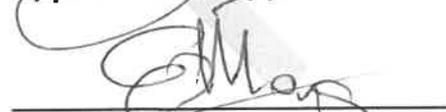


Mr. P Mokatsane

Chairperson: Ethics Management Committee

19/03/2025
Date

Approved/not approved



Mr. O.E. Mongale

Superintendent General: NWDoH

19/08/2025
Date

Annexure A

WHISTLE-BLOWER REPORT FORM

Please provide the following details for any suspected serious misconduct or any breach or suspected breach of law or regulation that may adversely impact the Institution. Please note that you may be called upon to assist in the investigation, if required.

NB: Please follow the guide as provided in the Whistle-blowing Policy

| REPORTERS CONTACT INFORMATION <i>(This Section may be left blank if the reporter wishes to remain anonymous)</i> | |
|---|--|
| NAME | |
| DESIGNATION | |
| DEPARTMENT / AGENCY | |
| CONTACT NUMBER/S | |
| E-MAIL ADDRESS | |
| SUSPECT'S INFORMATION | |
| NAME | |
| DESIGNATION | |
| DEPARTMENT / AGENCY | |
| E-MAIL ADDRESS | |
| WITNESSES' INFORMATION | |

| | |
|---|--|
| NAME | |
| DESIGNATION | |
| DEPARTMENT / AGENCY | |
| E-MAIL ADDRESS | |
| <p><u>COMPLAINT:</u> Briefly describe the misconduct/improper activity and how do you know about it? If there is more than one allegation, number each allegation and use as many pages as necessary. (<i>Separate blank page can be utilised and attached as an Annexure to this Form</i>).</p> | |
| 1. | What misconduct / improper activity occurred? |
| 2. | Who committed the misconduct / improper activity? |
| 3. | When did it transpire or when did you notice it transpiring? |
| 4. | Where did it transpire? |
| 5. | Is there any evidence that you could provide to us to substantiate this? |
| 6. | Are there any other parties involved other than the alleged suspect state above? |
| 7. | Do you have any other details / information / physical evidence that could assist us in the investigation? |
| 8. | Do you have any other comments to add? |
| DATE: _____ | SIGNATURE: _____ |