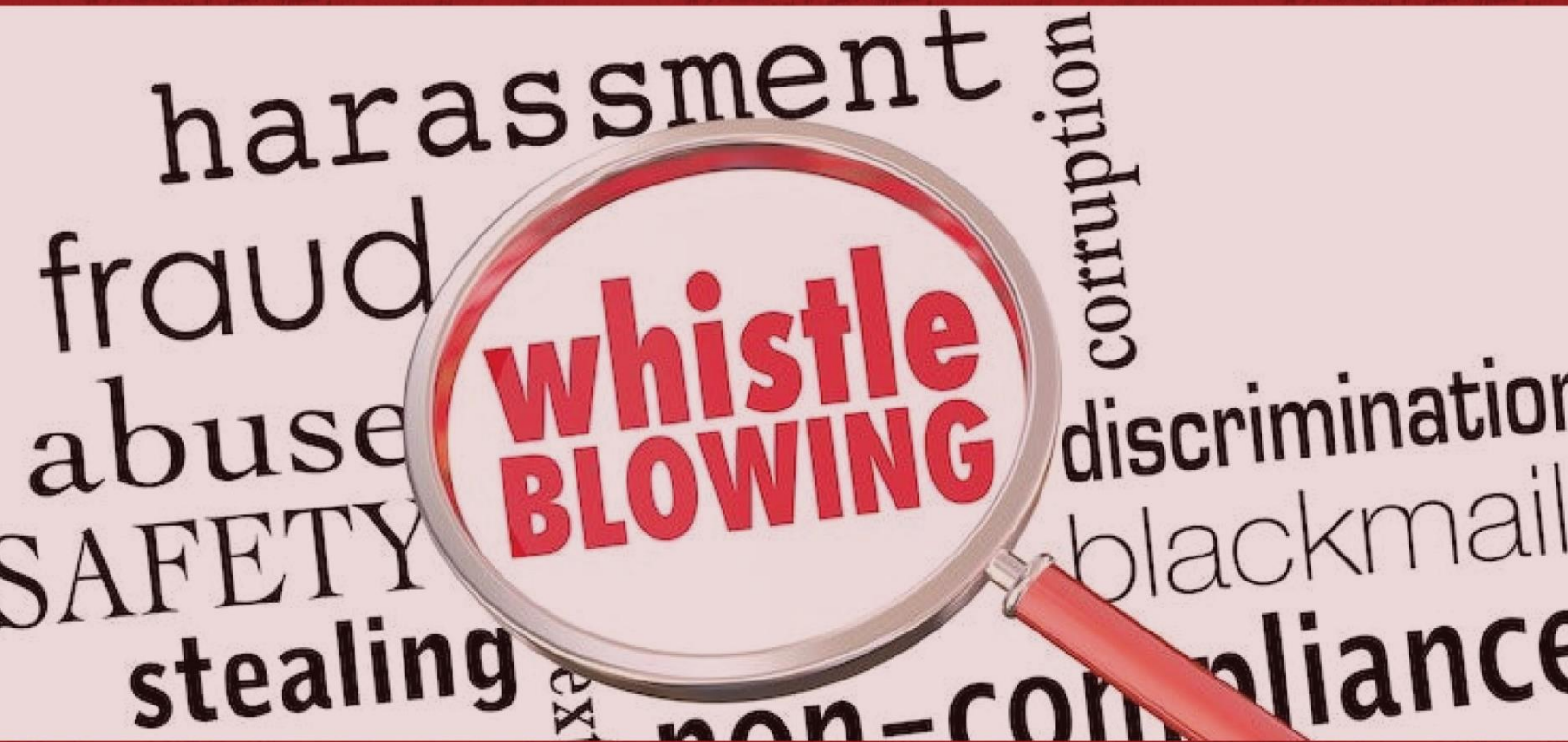




CEHURD
social justice in health

CENTER FOR HEALTH, HUMAN RIGHTS AND DEVELOPMENT



WHISTLE BLOWING POLICY

REVISED JANUARY, 2024



Definitions within the context of this policy

Whistleblowing	The disclosure of information which relates to suspected misconduct, unethical, illegal, dishonest and improper acts or failure to act within the Organization’s rules and procedures, including the code of conduct and respect for organizational values.
Whistleblower	An internal or external person who reports, to one or more of the parties specified in this policy, an activity that they considers to be a misconduct, illegal, dishonest, unethical, or otherwise improper.
Complaint	An issue, concern, problem or claim that an individual or community group wants CEHURD to address and resolve. Synonymous with ‘Grievance’.
Evidence	Any type of proof which tends to establish or disprove a fact material to a case. It includes, but is not limited to, oral testimony of witnesses, photographs, documents, telephone messages, email communication
Grievance	An issue, concern, problem or claim by a CEHURD stakeholder regarding core human resource issues. CEHURD has a grievance handling procedure specified within the Human Resource Manual, which may compliment this policy.
Investigation	The process of planning and conducting appropriate inquiries and examination of evidence to objectively determine the facts following the receipt of an allegation.
People we serve	Synonymous with ‘Beneficiaries.’ Preferred term to describe the community members included in our project activities.
Stakeholders	Persons or groups that are directly or indirectly affected by our work as well as those that may have interests in such work and/or the ability to influence its outcome, either positively or negatively. These are both internal and external.



Core Values and Principles

<p>Inclusion and Non-Discrimination</p> <p>We recognize that our core constituency that we work with - women and girls, children and youth, sexual minorities, persons with disabilities, ethnic minorities, people living with HIV/AIDS and/or TB, elderly and survivors of violence, torture and conflict are often systemically discriminated due to deeply rooted structural power relations. We think about diversity and inclusion as a point of strength. We will ensure that CEHURD Governance and Management is led by a team that espouses justice, non-discrimination and ensures equality of opportunity, externally for our core constituency and internally for our staff within the organization.</p>	<p>Transparency and Accountability</p> <p>We are accountable not only to those that support our work but to those that we represent. We are accountable to our core constituents that we represent, while also holding government, private sector, civil society and other actors to accountable to their obligations. We act consistently with our Mission being honest and transparent in what we do and say, and accept responsibility for our collective and individual actions. We are all champions of our organization. We take personal responsibility for achieving our objectives. We do what we say we shall do. We do what is right, not merely what is expected.</p>
<p>Empowerment</p> <p>We pride ourselves for being part of the journeys of many rights holders and duty bearers as they find their voices and speak out on the right to health.</p>	<p>Teamwork and Oneness</p> <p>We are all CEHURD people. We value working together as a team to achieve our objectives. We treat each other with respect regardless of our status or diversities.</p>
<p>Equity</p> <p>We know that our society is founded on the idea of fairness, equity and equality, encapsulated in the principle of “Ubuntu”. Crucially, a society that is fair and equal also helps improve all other public value outcomes.</p>	<p>Integrity and Professional Ethics</p> <p>We act with openness, integrity and trust. We believe that the highest ethical conduct is central to who we are and what we stand for. We act professionally and together we celebrate our success with understated pride. We walk the talk; we resolve to build and promote a strong culture of integrity in all that we do so that we can all build a better society for the future.</p>
<p>Confidentiality and Privacy</p> <p>We derive our legitimacy by speaking on behalf of many whose right to health is violated and threatened. As legal service providers and advocates on the right to health, our interventions enable us to come into contact with information that we are obliged to keep in the highest level of confidentiality. We treat each and every client of CEHURD with utmost confidentiality and privacy. Confidentiality is also a key tenant of our internal policies and organizational culture.</p>	<p>Learning and Reflection</p> <p>We are a learning organization. We believe in learning that accommodates new experience and results. We ask for help, admit to our mistakes and put things right. Our work is based on open and flexible processes of learning, mutual inquiry and participation. We know it is important than ever to be flexible and agile, with plenty of resourcefulness and creativity to respond effectively to challenges and take advantage of new opportunities in this fast-changing world.</p>
<p>Innovation, Drive and Excellence</p> <p>We are relentless in our pursuit of success. We defy conventional wisdom and approach each day with innovation. Together we approach each day with the energy, passion, fearlessness, innovation and persistence to exceed expectations. We continue to be a professional organization that invests itself in learning and innovation.</p>	<p>Mutuality and Partnership</p> <p>We are one organization across all functions and geographies. We work towards a common goal through cooperation and partnership at local, national, regional and international levels. We will ensure that we work with others and value partnerships with like-minded actors – individuals, organizations, institutions and progressive social movements.</p>



1. Introduction

We are committed to conducting our business with the highest standards of honesty, loyalty, ethics and integrity. As such, we expect all staff and those we conduct business with to maintain high standards in accordance with our policies and procedures. Together with our internal and external stakeholders, we believe that a greater emphasis on accountability and quality management of managing our business will lead to a higher level of quality in our work and demonstrates our respect and compliance with our institutional code of ethics and values.

However, all organisations face the risk of things going wrong from time to time or of unknowingly harboring illegal or unethical conduct. A culture of openness and accountability is essential in order to prevent such situations occurring or to address them when they do occur. A whistle blowing policy is an essential guiding framework in this direction.

Through this policy, we commit ourselves to being accountable to the people we aim to serve and our other stakeholders, and to ensuring that they have means by which they can hold us to account. This entails providing them with safe, accessible and effective channels to call upon their right to raise complaints.

In this policy 'Whistleblowing' means the disclosure of information which relates to suspected misconduct, unethical, illegal, dishonest and improper acts or failure to act within the Organization's rules and procedures, including the code of conduct and respect for organizational values.

3. Purpose

This policy is developed to guide Complaints Response Mechanisms (CRM) at the Center for Health, Human Rights and Development (CEHURD). It outlines the principles and processes by which complaints and feedback are expected to be handled across our range of activities. A CRM offers CEHURD and the people we serve a mutually beneficial way to settle issues and concerns about the organisation, while recognizing the right of complainants to take a grievance to a formal dispute body.

The policy therefore aims to:

- (a) Enable all those served by CEHURD have access to safe and responsive mechanisms to handle complaints and concerns;
- (b) Enable CEHURD nurture an organizational culture in which complaints and concerns are taken seriously and acted upon according to defined policies and processes;
- (c) prevent malpractice, misconduct, unethical and illegal acts by the organization, its employees, agents, partners and other stakeholders including governance bodies;
- (d) encourage staff and all CEHURD's partners and stakeholders to report suspected wrongdoing as soon as possible in the knowledge that their complaints and concerns will be taken seriously and investigated as appropriate and that their confidentiality will be respected;



- (e) provide staff and all other internal and external stakeholders with guidance as to how to raise complaints and concerns; and
- (f) encourage and enable staff and all other internal and external stakeholders to raise serious complaints and concerns within the organization to be addressed in a professional manner.

4. Scope of the Policy

The Whistleblowing policy extends to malpractices, misconduct, unethical and illegal acts described in clause

This grievance procedure is limited to concerns of malpractice and misconduct as defined in clause 2 of this policy and further outlined below.

- i) illegal, improper, or unethical;
- ii) in breach of a professional code;
- iii) fraud or misuse of public and organization funds; or
- iv) acts which are otherwise inconsistent with the Staff Code of conduct;
- v) acts which are inconsistent with organizational values.
- vi) Cover programming, corruption and fraud, sexual exploitation and abuse and other abuses of power.
- vii) This policy will be complimented by other relevant policies, such as safeguarding policy; human resource manual; anti-fraud, anti-bribery and anti-corruption policy and anti-sexual harassment policy, among others.

This Whistle blowing policy applies to everyone who carries out work for and/or with CEHURD including:

- all employees, volunteers and interns;
- Implementing Partners;
- Consultants;
- Other service providers and contractors;
- Board of Trustees and Board of Directors

Complaints that do not fall within the scope of the organisation will be referred to a relevant party in a manner consistent with good practice.

5. Grievances and complaints handling procedure

It should be noted that this policy is different from the normal grievance procedure for staff. If staff have a complaint about their own personal circumstances within the organization, they should use the grievances handling procedure outlined in the Human Resource Manual.



6. Protection of Whistleblowers

- 6.1. The leadership and management of CEHURD is committed to this policy and its implementation and affirms that the organisation will not retaliate against a whistleblower. If the policy is used to raise a complaint or concern in good faith, assurance shall be given that the whistleblower will not suffer any form of retribution, retaliation, victimization or detriment as a result of reporting a complaint or concern. CEHURD will treat all such disclosures from whistleblowers in a confidential and sensitive manner. The identity of the individual making the allegation will be kept confidential so long as it does not hinder or frustrate the relevant investigation. However, identity of the whistleblower may be disclosed to conduct a thorough investigation, to comply with the law, and to provide accused individuals their legal rights of defense. In such circumstances, the whistleblower will be advised beforehand and the likely risks and consequences will be identified, discussed and mitigation measures put in place. Such disclosure will be made with necessary evidence. Communities served by CEHURD will therefore be encouraged to share their complaints and concerns freely throughout all our activities and the Whistleblowing policy will be made accessible through the public domain and accessed on [CEHURD's Website](#)
- 6.2. Complaints and concerns will be treated seriously and actions taken in accordance with this policy, complimented by other relevant policies. If the whistleblower asks to treat the matter in confidence, we will do our utmost to respect such a request. However, it is not possible to guarantee confidentiality in some circumstances described in clause 6.1 above. If the organization is in a position where it cannot maintain confidentiality for professional reasons and so has to make disclosures, it will discuss the matter with the whistleblower first. Feedback on any investigation will be given and the organization will be sensitive to any concerns as a result of any steps taken under this procedure.

7. How to raise and address a complaint or concern

7.1. Raising concerns internally

If someone is concerned about any form of malpractice, they should normally first raise the issue with their immediate supervisor. This may be communicated through written form as preferred. If the staff feels they cannot tell their immediate supervisor, for whatever reason, they should tell any person in senior management position through available channels including email, telephone or face to face meeting; notwithstanding the grievances handling procedure in the Human Resource Manual. The receiving supervisor will promptly submit the report of a complaint or concern to the Head of Human Resources, who is responsible for investigating and coordinating any necessary corrective action. At whatever level someone raises the issue, they should declare whether they have personal interest in the issue at the outset. If the concern falls more properly within the grievance handling procedure in the Human Resource Manual, the supervisor or person in senior management contacted will guide the person concerned accordingly. Any concerns involving the head of human resources should be reported to the head of the organisation.



7.2. Raising concerns externally (exceptional cases)

The main purpose of this policy is to give the opportunity and protection needed to raise complaints and concerns internally within CEHURD. CEHURD would expect that in almost all cases, raising concerns internally would be the most appropriate action to take.

All reports of actual or suspected violations under this policy from outside CEHURD should be directed to the Office of the Deputy Executive Director or other designated office whose contact details shall be published on CEHURD's website. Internal CEHURD personnel may also use this option depending on the gravity or sensitivity of the matter.

However, if for whatever reason, one feels they cannot raise concerns internally and honestly believe the information and allegations are true, they should consider raising the matter with the appropriate governance body (Board of Directors or Board of Trustees) or an appropriate regulator, depending on the nature of concern. The whistleblower in this case needs to tell who they are to make it much easier for management to look into the matter, to protect the person's position or to give feedback feedback. Accordingly, while we will consider anonymous reports, this procedure is not appropriate for concerns raised anonymously.

7.3 What CEHURD will do when a concern is reported – complaints response mechanism

CEHURD will respond to the raised concerns as quickly as possible through the relevant office. The overriding principle for CEHURD will be the public interest. In order to be fair to all employees and others associated with CEHURD outlined in Clause 4, including those who may be wrongly or mistakenly accused, initial enquiries will be made to decide whether an investigation is appropriate and, if so, what form it should take. The investigation may need to be carried out under terms of strict confidentiality, i.e. by not informing the subject of the complaint until (or if) it becomes necessary to do so.

Complaints regarding Fraudulent Behaviour/Corruption will require immediate referral to the Head of the Institution and Head of compliance and internal audit and those regarding Sexual Abuse and/or Exploitation and breach of code of conduct and institutional values will require immediate referral to the head of human resources.

An investigation always ends with a report – even if no action will be taken or the claim has been identified as false. Any investigation revealing adequate evidence to reasonably conclude that misconduct has occurred requires an investigation report. Such a report contains confidential and sensitive information about individuals and CEHURD activities and should be considered strictly confidential.

7.4 Untrue Allegations



No disciplinary or other action will be taken against a whistleblower who makes an allegation in the reasonable belief that it is in the public interest to do so even if the allegation is not substantiated by an investigation. However, disciplinary action may be taken against a whistleblower who makes an allegation without reasonable belief that it is in the public interest to do so (e.g. making an allegation frivolously, maliciously or for personal gain where there is no element of public interest).

8. Details in Whistleblower's communication

The person sharing communication on a suspected case of misconduct, unethical or illegal act would ordinarily be expected to share the following information where available so as to help inform the subsequent procedures:

- describe the what, how, when, where and by who;
- share available relevant documentation/evidence in its different forms;
- share names of other person(s) who may be privy to the matter or the location of further relevant information; and
- share own contact for further follow up and preferred method of communication.

11. The responsible officer

The Deputy Executive Director has overall responsibility for the maintenance and operation of this Policy. For purposes of this policy and its implementation, all email communications will be directed to the Deputy Executive Director, Email: anonymous@cehurd.org Tel: **+2560200956006**

12. Complaints tracking, monitoring and reporting

Complaints need to be tracked and monitored, to document the severity of a complaint, to provide data needed for quality control measures and identification of learning aspects from specific cases. All complaints and concerns reported will therefore be documented in a register.

A Register will record the following details:

- The name and status (e.g. employee) of the whistleblower
- The date on which the allegation was received
- The nature of the allegation
- Details of the person who received the allegation
- Whether the allegation is to be investigated and, if yes, by whom
- The outcome of the investigation
- Any other relevant details

The Register will be confidentially kept by the Deputy Executive Director and only available for inspection by the Board members in consultation with the Executive Director, where they are not the accused person.

The following tools will be developed to aid complaints tracking, monitoring reporting:

- Tracking forms and procedures for gathering information from staff and complainants;



- Dedicated staff in CEHURD who received the complaints as detailed in clause 11;
- processes for keeping stakeholders up-dated about a case as well as procedures to retrieve data for reporting;
- Organisational learning as well as the identification of systemic problems and the need for changes to policies and procedures are vital to be able to prevent recurrent future complaints.

The complaints tracking, monitoring and reporting

The following steps will apply:

- i) Inform and sensitize all staff
- ii) Receive and record complaints
- iii) Investigate
- iv) Track, monitor and report
- v) Evaluate
- vi) Adapt lessons for quality improvement

13. Revision of this Policy shall be done on need basis.

14. Access to the Whistleblowing policy

The leadership and management of CEHURD will ensure that this policy is available and accessible to the general public. It will therefore be available on CEHURD’s website and the link included in communication to CEHURD’s relevant stakeholders, including within internal and external contracts and other relevant documents, interactions and engagements.

Signed by:

Board Chairperson



11/06/2024

Date:

Executive Director

Date: 11/06/2024