



БЛАГОДІЙНА ОРГАНІЗАЦІЯ «БЛАГОДІЙНИЙ ФОНД «СТАБІЛІЗАЦІЙНИЙ СУПОРТ СЕРВІСІЗ»
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Whistleblowing Policy

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1. Introduction

All organisations are naturally exposed to ethical risk, including serious malpractice¹, regardless of their mission, activities or operating footprint. Whistleblowing² and reporting wrongful behaviour plays an important part in this by enabling those who work on our behalf to disclose genuine concerns of serious malpractice without fear of retribution or detriment within their employment / other contract.

This policy sets out the requirements for managing whistleblowing arrangements. It applies to all those who work on our behalf, regardless of their location. It also applies to anyone who has a supervisory or technical support role related to managing ethical risks. This policy will be clearly referenced to all our partners and suppliers prior to entering into any contractual arrangements and in those contractual arrangements.

Any deliberate breach of this policy is considered a disciplinary matter and may result in disciplinary action, up to and including termination of contract, in a manner that follows our disciplinary procedures and the required legal framework.

1.1. Whistleblowing Statement

We encourage all individuals to raise any concerns that they may have about the conduct of others who work on our behalf or the way in which the organisation is run. Additionally, as a supplier to the UK Government we are bound to comply with UK Government standards in terms of whistleblowing.

Reported wrongdoings must be in the public interest. This means it must affect others (e.g. the general public). Personal grievances and safeguarding concerns (e.g. harassment, bullying, sexual exploitation and abuse) do not fall into this category and should be reported through our human resources channels, unless it is honestly believed it is in the public interest to use the whistleblowing process.

Examples of whistleblowing allegations may involve suspecting:

- A criminal offence (e.g. fraud, bribery and corruption)
- Risk to someone's health and safety
- Risk or actual damage to the environment
- Miscarriage of justice
- The organisation, its partners or suppliers breaking the law
- Ineffective implementation of controls, leading to regulatory breach (e.g. Health and Safety, Data Protection)
- Deliberate failure to apply controls
- Behaviour by individual employee(s) that is contrary to our values
- Belief that someone is covering up wrongdoing

¹ "Serious malpractice" is defined as behaviour being committed or likely to be committed, including but not restricted to a criminal offence, bribery and corruption, breach of any legal obligation, endangering health and safety, unethical practice in financial matters and conduct contrary to our ethical principles, including the intentional covering up of any of the above.

² We define a whistleblower as "an individual who alerts us, via the appropriate channels, to serious malpractice or actions that endanger those who work on our behalf, our assets or reputation."



This document outlines a clear policy (that is owned and championed by our Senior Person) and provides internal and external facilities for those who work on our behalf to disclose concerns of serious malpractice anonymously, a fair and comprehensive investigative process, appropriate guidance and appropriate care for disclosers during and after any whistleblowing process.

In some jurisdictions where we operate, whistleblowing arrangements may be required by law and any person making a disclosure in good faith is legally protected from any detriment within our organisation. We recognise that in other jurisdictions, the principles of whistleblowing may not be enshrined in local legislation and that there may be obstacles in both employment law and local culture. Where this is so, we commit to providing the same level of protection to those who work on our behalf, regardless of their location.

1.2. Policy Review

To meet with best practice and ethical developments and any changes in applicable law, we agree to review this policy, and any other relevant documents or practices that govern and regulate whistleblowing, every two years as a minimum.

2. Policy

2.1. Roles and Responsibilities

The following table outlines the roles and responsibilities that relate to this policy:

Role	Responsibility	Allocated to
Governance Person (e.g. Board Member).	Receive disclosures and be involved in the investigation of any disclosures relating to the Senior Person, receive a copy of all investigation reports, act on any complaints where the complainant is not satisfied that their concern is being properly dealt with by the investigating officer.	Programme Director Dermot Hamilton
Senior Person (e.g. CEO / ED).	Respond to questions regarding this policy, receive and appropriately act on reports from disclosers who believe that they have been subject to a detriment, receive a copy of all investigation reports deciding what action to take and act on any complaints where the complainant is not satisfied that their concern is being properly dealt with by the investigating officer.	Operations Director Olga Ivanova
Investigating Officer	Conduct full and fair investigations into reported concerns.	HR Manager Kateryna Morhun

2.2. Other Protection

We encourage and support the disclosure of suspected or alleged serious malpractice and provide access to appropriate mechanisms to facilitate objective and prompt investigations. These



mechanisms will also ensure that the individual making the disclosure is protected from potential detriment or prejudice as a result of actions of any other person.

If anyone tries to discourage a potential discloser from reporting a genuine concern, or criticises or victimises them, or subjects them to a detriment for raising a concern, we will treat this as a disciplinary matter. If the discloser believes that they have been subject to a detriment by anyone within our organisation, they must inform the Senior Person immediately and appropriate action will be taken to protect them from any reprisals.

Anonymity will be preserved throughout the case. Should circumstances dictate that anonymity can no longer be assured, they will be first discussed with the individual.

To be protected in this way, the person making the disclosure must:

- Genuinely believe that the knowledge or concern reported are true and relate to serious malpractice in the past, present or future
- Clearly communicate from the outset that a confidential whistleblowing disclosure is being made.

We will not tolerate deliberately false or malicious disclosures or tolerate the 'cover up' of serious malpractice. False or malicious disclosures will be considered a breach of this policy and may result in disciplinary action, up to and including termination of contract, in a manner that follows our disciplinary procedures and the required legal framework.

2.3. Communication

We provide simple, easy to follow guidance to all those whom this policy applies to. This is designed to ensure that those working on our behalf are aware of how and to whom to report a concern, raising awareness of the existence of the internal and external reporting facility and outlining the investigations procedure. Where a funder has a specific code of conduct, or principles that relate to whistleblowing, we will ensure that these are regularly conveyed to partner and supplier organisations, along with our own policies.

2.4. Internal Reporting

Those who have concerns or knowledge of serious malpractice should speak to their line or contracting manager, unless there are specific reasons why this is not reasonable, (e.g. the person is the subject of the concern, or the discloser wishes to remain anonymous). This may be completed verbally or in writing. If in doubt, support and assistance can be sought from the Senior Person.

A report should only be considered when and if the above reporting lines are not available or not appropriate, or the individual is not satisfied that their suspicions have been properly dealt with.

2.5. External Reporting

Concerns that directly relate to funds received from the UK Foreign & Commonwealth Office (FCO), should also be reported to **FCO's Anti-Fraud and Corruption Unit at afcu@fco.gov.uk; or on +44 (0) 7771 573 944 / +44 (0) 7771 249 938.**

All disclosures are treated in the strictest confidence. We take all reasonable steps to protect the identity of the discloser in all cases where the disclosure is made in good faith and will never



disclose their identity, without their consent. However, there may be circumstances in which, it is impossible to guarantee anonymity. For example, when an investigation must be referred to a funder, higher authority or law enforcement. Should this arise, the situation would always be discussed with the discloser prior to any further disclosure.

Disclosures made to the press are not be considered reasonable. They will constitute misconduct and may result in disciplinary action, up to and including termination of contract, in a manner that follows our disciplinary procedures and the required legal framework.

2.6. Disclosures relating to the Senior Person

All disclosures should be made according to this policy. However, should the disclosure relate to the Senior Person, it will be referred to the Governance Person, who will be engaged in the investigation process.

2.7. Investigation

We will investigate all disclosures thoroughly, promptly and with the utmost integrity. Confidentiality will be respected unless of specific are circumstances (stated above). Everyone is required to co-operate with investigations. Should anyone deliberately reveal that an investigation is under way, or reveal details contrary to this policy, they may be subject to disciplinary action.

When a disclosure is reported in the above manner, we will appoint an investigating officer to conduct a full and fair investigation. The investigating officer will:

- Obtain full details and any clarifications of the reported concern
- Unless anonymous, ask the discloser to provide a written statement describing the precise nature of the concern
- Assess if the disclosure is best dealt with under this, or another policy, (e.g. safeguarding), informing the individual
- Notify FCO or other funders (where required)
- Decide if an investigation is warranted
- If warranted, create an investigation action plan
- If warranted, fully investigate (with the assistance where appropriate, of other individuals / bodies)
- Consider the involvement of others who work on our behalf
- Consult with other Senior Persons, as appropriate (unless they are the subject of the disclosure)
- Decide the validity of the disclosure
- Detail the outcome in a written report including the full findings of the investigation and reasons for the judgement. The report will be passed to Senior Person and Governance Person (unless either are the subject of the disclosure).

2.8. Appropriate Action

The Senior Person will decide what action to take (unless either are the subject of the disclosure when this will be the Governance Person). If the concern is shown to be justified, they will invoke appropriate company procedures. Should serious malpractice be proven, this will result in the termination of the person(s) concerned. The individual who raised the concern will be kept



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informed of the progress of the investigations and, if appropriate, of the outcome, unless they chose to remain anonymous.

Anyone who reports in good faith, that turns out to be unfounded, will not be penalised for being genuinely mistaken. If the complainant is not satisfied that their concern is being properly dealt with by the investigating officer, they have the right to raise it in confidence with the Senior Person or Governance Person.




