



WHISTLEBLOWER POLICY

IGSSS is committed to complying with the highest standards of professionalism, honesty, integrity, and ethical behavior, in line with the Organization's Code of Conduct. IGSSS' seeks to create an environment where employees can report matters without any fear for upholding the credibility of IGSSS and its work. IGSSS' recognizes that this mechanism as an important enabling factor in administering good governance practices.

A. Purpose

IGSSS has established its Whistle Blower Policy to supplement the Code of Conduct and Anti-Fraud Policy.

The purpose of the Whistle Blower Policy ("the Policy") is to provide a secured environment and to encourage members of staff/stakeholders to report unethical, unlawful, or improper practices, acts or activities in IGSSS without the risk of subsequent victimization, discrimination, or disadvantage.

The Policy aims to provide a mechanism to ensure that concerns are properly raised, appropriately investigated, and addressed.

B. Scope

The Policy applies to all the staff/stakeholders working for IGSSS and external stakeholders. This policy also provides a platform for our key external stakeholders like donors, Vendors and Communities to raise concerns freely.

Nothing in this Policy is intended to limit any protections provided to Whistle-Blowers by any applicable laws or regulations or to place any limits on a Whistle Blower's ability to communicate with government, administrative, or law enforcement authorities, as provided for by law

C. Defining the Terms

1. Staff: A Staff is every Bonafede member who is currently in the employment of the Organization.
2. External Stakeholders: An external stakeholder is any (but not limited to this): Vendor; donor; service provider; volunteer, a member of the Community
3. Retaliation/Victimization Retaliation: Any act, direct or indirect, recommended, threatened, or taken against a Whistle-Blower by any person because the Whistle-Blower has made a disclosure according to the Policy. Retaliation includes overt/covert acts of – discrimination; reprisal; harassment; vengeance.
4. Whistle Blower: A Whistle-Blower means any Staff, Associate or external stakeholder who raises a concern following this Policy.

5. Whistle Blowing 'Concern' or 'Complaint' can be described as attracting management's attention to information about potentially illegal and/or unacceptable practices in the organization by either a fellow staff or external stakeholders.
6. The unlawful or unethical or improper practice or act or activity (hereinafter referred to as an "alleged wrongful conduct") may include, but is not limited to : a violation of any law; misuse or misappropriation of the Organization's assets, project funds; incorrect financial reporting; a substantial and specific danger to health and safety; abuse of power for sexual, physical, mental harassment; not following code of conduct and other policies of IGSSS, acts resulting in threat to IGSSS' credibility; leak of sensitive information / data.
7. Compliance Officer: For all complaints excluding those against the Executive Director, complaints should be sent /addressed directly to the ED. For complaints against the ED, the complaint must addressed/sent to President of the Board.

D. Reporting of Whistle Blower Concern or Complaint

1. Responsibility:
 - a. The Policy encourage and enable employees and others to raise serious concerns internally so that IGSSS can address and correct inappropriate conduct and actions.
 - b. It is the responsibility of all board members, officers, employees, and volunteers to report concerns about violations of IGSSS's code of ethics or suspected violations of law or regulations that govern IGSSS's operations.
2. Registration of Complaint:
 - a. To be considered under the Policy, the complainant is encouraged to provide the following information in his/her complaint: Name, Contact details, Location / department.
 - b. IGSSS shall not entertain any complaint where all such information is not provided, including anonymous/pseudonymous complaints. No further action will be required to be taken and the case will be closed, without intimation to the complainant.
 - c. Whistle Blower policy will be applied while registering complaints falling under the purview of Child Safeguarding, Prevention of Sexual Harassment, Anti- Bribery, Anti-Terrorist and Anti Money Laundering, Code of Ethics and Conduct and Conflict of Interest Policy in cases complainant wants to keep their identity protected and/or incident is sensitive in nature. .
3. Process
 - a. An employee / external stakeholder can send mail to wecare@igss.net and/or submit a letter with all the details to Compliance Officer. Even concerns raised through WhatsApp, will also be considered.
 - b. However such complaints received through email and WhatsApp, will have to be submit the complaint with signature by post.
 - c. Additional modes of communication or access would be made available to Staff/ stakeholders in appropriate or exceptional situations.
 - d. If a mail / letter with complaint is received by any other staff, s/he should immediately share with compliance officer. S/he should not disclose this with anyone else.
 - e. Within 2 working days of receipt of the concern by the Compliance Officer, an acknowledgement shall be sent to the sender of the concern (where a return address or email is available). The acknowledgement shall confirm receipt of the concern and inform the sender that the concern would be inquired into and appropriately addressed.

- f. If any employee has a reason to believe that the Compliance Officer or any function under his control and administration is involved in the violation or has any interest involved which might shadow his judgment, the employee may report his concern (even anonymously) to the Executive Director.
- g. In case the concern does not fall within the ambit of the Whistle Blower Policy, the sender shall be informed that the concern is being forwarded to the appropriate department/authority for further action, as deemed necessary.

E. Administration of Policy:

1. The Executive Director upon receipt of the concern or complaint shall immediately set in motion appropriate action to inquire into the matter.
2. Executive Director will constitute inquiry into the concerns received depending on the nature of the complaint. For matters of financial fraud or embezzlement, specialists will be brought in to do the inquiry.
3. The Executive Director will bring it to the notice of the Board of Governors if the complaint is of fraud, embezzlement or sexual abuse / harassment and the Board's suggestions will be taken while appointing external members as part of inquiry Committee.
4. The inquiry shall normally be completed within 60 days of receipt of the concern by authorized recipients.
5. Concerns requiring additional time for inquiry shall be intimated to the Executive
6. Once the inquiry is completed, the report will be discussed with the Executive Director and appropriate action will be decided.
7. The concern shall be deemed as closed upon conclusion of the inquiry and disciplinary action or reporting as required by HR policy, after which the concern shall be reported as closed to the Board of Governors.
8. The status of all concerns which are open/closed shall be reported to the Board of Governors quarterly. Concerns that were closed during the preceding quarter shall also be informed along with relevant details.
9. 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. 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.
10. Records of the complaint shall be maintained by the office of the Executive Director or HR dept. Records shall be maintained as per the existing policy for 10 years.

F. Protection to Whistle-Blower

1. Violations or suspected violations may be submitted on a confidential basis by the complainant. Reports of violations or suspected violations will be kept confidential to the extent possible, consistent with the need to conduct an adequate investigation.
2. Strict confidentiality shall be maintained about the identity of the complainant, both during and post-investigation. The identity of the complainant shall not be released unless required by law.
3. IGSSS will not tolerate any attempt on the part of anyone to retaliate, apply any sanction or disadvantage or to discriminate against any person who has reported to the Organization serious and genuine concern regarding apparent wrongdoing by any other fellow Staff or external stakeholder.

4. Upon disclosure of identity, protection, will be provided to the Staff/ stakeholder. Disclosure of identity would not have any impact on the Staff's performance appraisal, assignment of work or other matters related to employment with IGSS if the whistleblower is from within the IGSSS.
5. This Policy does not preclude the IGSSS from taking appropriate action against a Staff or external stakeholder who improperly and/or in violation of the Code of Conduct, or who discloses fact that he or she has lodged the complaint or the complaint (in whole or in part) to any member of the public in any form or manner including over social media platform/s. Any proceedings undertaken in such circumstances, and any ensuing action taken by IGSSS against a co-worker or stakeholder, are intended to be separate and distinct from the provisions of this Policy. The foregoing is not intended to undermine protections afforded by this Policy in cases where the Authorized recipients are satisfied that the co-worker or external stakeholder has blown the whistle in good faith.
6. A whistle-blower's right to protection from retaliation does not grant him immunity for any complicity in the matters that are the subject of the allegations or an ensuing investigation or any other misconduct or wrongdoing.
7. This policy may not be used as a defence by an employee against whom an adverse personnel action has been taken for legitimate reasons or cause under Organization rules and policies. It shall not be a violation of this policy to take adverse personnel action against an employee, whose conduct or performance warrants that action, separate and apart from that employee making a disclosure.

G. Dissemination of Policy

Whistle-blower Policy will be disseminated to all concerned stakeholders, inside and outside the organization on all relevant platforms including but not limited to handouts, display on public notice boards, by way of inclusion in organizational policies and other virtual platforms like organizational websites, social media handles.