

Whistle Blowing and Protection from Retaliation Policy

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INTERNATIONAL CROPS RESEARCH
INSTITUTE FOR THE SEMI-ARID TROPICS

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1. Version Control

Policy Formulation:

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Policy Amendments:

Date	Version	Changes made by	Changes approved by	Description of change

The Institute reserves the right to amend, suspend or rescind this policy at any time. Whilst, the Institute has made best efforts to define detailed procedures for implementation of this policy, there may be occasions when certain matters are not addressed or there may be lack of clarity in the procedures. Such difficulties or lack of clarity will be resolved in line with the broad intent of the policy, by the Director General or Governing Board Chair (on case to case basis). The Institute may also establish further rules and procedures, from time to time, to give effect to the intent of this policy and further the objective of good corporate governance.

2. Introduction

ICRISAT (“Institute”) is committed to promote the highest ethical standards and maintain a workplace that facilitates open, transparent, fair and objective reporting of concerns/ violations with ethical repercussions. Thus, as part of the overarching Ethics Framework, the Institute has formulated this “Whistle Blowing and Protection from Retaliation Policy” (“Policy”).

2.1. Objective

The objectives of this policy statement are:

- a) To provide a mechanism for raising concerns/ violations which related to a malpractice, impropriety, abuse, unethical behavior or suspected fraud within the Institute
- b) To promote a “Speak up” culture at the Institute and encourage members of workforce to report any actual or suspected wrongdoings
- c) To foster a sense of collective responsibility in safeguarding interests of the Institute
- d) To provide protection from retaliatory actions against the whistle blower

2.2. Scope & Applicability

- a) This policy is applicable to members of ICRISAT’s workforce
- b) This policy also extends to all other stakeholders of ICRISAT including suppliers, project partners, donors, engaging directly or indirectly with ICRISAT
- c) This policy applies to the reporting of any of the following:
 - i. Breach of the Institute’s Code of Conduct;
 - ii. Breach of the Institute’s Ethics Policy;
 - iii. Financial irregularities, Financial Statement Fraud;
 - iv. Conflict of interest;
 - v. Bribery and corruption;
 - vi. Negligence causing substantial and specific danger to ICRISAT financial assets, health, safety and environment;
 - vii. Manipulation of the Institute’s data/records;
 - viii. Disclosure of confidential / proprietary information to unauthorized personnel;
 - ix. Misappropriation of the Institute’s funds/assets;
 - x. Abuse of authority;
 - xi. Breach of the Institute polices;
 - xii. Discrimination, harassment complaints (including sexual harassment) and other offensive or disruptive behavior in the workplace;
 - xiii. Any other activities whether unethical or fraudulent in nature and injurious to the interests of the Institute; and
 - xiv. Scientific fraud (e.g. data falsification, plagiarism) or ethical violation (e.g. misuse of data, authorship rights, etc.)
- d) This policy is not intended to cover the following types of reporting:
 - i. Unsubstantiated rumors and hearsay;
 - ii. Personnel issues where members of the workforce have a personal interest in the outcome;
 - iii. Disagreements over policy or management decisions;
 - iv. Disagreements related to the workforce morale, or other workplace matters that do not implicate legal or ethical issues; and

- v. Workforce member's grievances over decisions regarding the workforce member's salary and benefits, employment status or other issues related to employment contract terms and conditions.

2.3. Roles & Responsibilities

- a) **Governing Board:** The Governing Board shall be responsible for providing oversight for implementation of the overarching Ethics Framework of the Institute, of which this Policy forms an integral component.
- b) **Ethics Committee:** This Committee, headed by Director Human Resources, shall be responsible for implementation and monitoring of this Policy, including but not limited to, periodic review of the effectiveness of the whistle blowing mechanism.
- c) **Enquiry Committee:** The Enquiry Committee is an 'as-needed' committee formed by the Ethics Committee for each concern/violation raised under this Policy. The Committee shall be responsible and accountable for the following:
 - i. Conduct the enquiry in a fair and unbiased manner;
 - ii. Ensure complete fact-finding;
 - iii. Maintain strict confidentiality, especially of the whistle blower's identity (if available);
 - iv. Decide on the outcome of the enquiry, whether an improper practice has been committed and if so by whom;
 - v. Recommend an appropriate course of action – including disciplinary action; and
 - vi. Record deliberations and document the final report for presentation to the Ethics Committee and where deemed appropriate by the Ethics Committee, to the Governing Board.
- d) **Subjects** have a responsibility not to interfere with the enquiry process. Evidence shall not be withheld, destroyed or tampered with and witnesses shall not be influenced, coached, threatened or intimidated by the Subject(s).
- e) **The whistle blower** shall be responsible for following:
 - i. Bring to the early attention of the Institute any improper practice on which they become aware and have sufficient cause for concern. They should not delay in reporting as it may lead to the loss of evidence and/or a financial loss for the Institute;
 - ii. Follow the outlined procedures for making a disclosure;
 - iii. Co-operate with the Enquiry Committee as needed, and maintain full confidentiality on the matter;
 - iv. Ensure that only genuine and serious issues are reported without abusing the rights under this Policy to settle personal scores or to give vent to malicious intentions.
- f) All Enquiry Participants (witnesses and persons who are interviewed, asked to provide information, or otherwise required to participate in an enquiry) should fully cooperate with the Enquiry Committee. Participants should refrain from discussing or disclosing the enquiry process or their testimony to anyone not connected to the enquiry. The participants shall ensure that under no circumstances she/he discusses with the subject the nature of the evidence requested or provided or the testimony given to the Enquiry Committee.

2.4. Exception to the policy

Any exception to this Policy shall require an approval from Director General (DG) of the Institute and a post facto ratification shall also be obtained from the Governing Board at the next Board meeting. Any exceptions concerning the DG shall be approved by the Governing Board. The Policy Owner shall be informed of these exceptions and he/ she shall maintain a record of these for monitoring purpose.

2.5. Frequency of Review

This Policy shall be reviewed by the Policy Owner at least once in every 36-month period from the implementation date or from the date of last review or as directed by the Policy Council.

3. Policy Statement

3.1. Obligation of the workforce to report suspected wrongdoing

- a) It is the duty of all members of the workforce to report suspicions of wrongdoing or the failure of one or more members of the workforce to comply with their obligations. An individual who makes such a report (Whistle blower) in good faith has the right to be protected against retaliation.
- b) It is the duty of the member of the workforce to cooperate with enquiries. An individual who cooperates in good faith with the enquiry process has the right to be protected against retaliation.
- c) Retaliation against individuals who have reported misconduct or who have cooperated with the enquiries violates the fundamental obligation of all workforce members to uphold the highest standards of efficiency, competence and integrity and to discharge their functions and regulate their conduct in the best interests of the Institute.
- d) It is the duty of the Institute to address suspected wrongdoing and to take:
 - i. Effective measures in accordance with clause 3.4 to protect the whistle blower from retaliation;
 - ii. Appropriate corrective action to remedy any retaliation against whistle blowers;
 - iii. Adequate disciplinary measures in cases of misconduct, including those making wrongful accusations; and
 - iv. Care to protect under this policy the whistle blower and any enquiry participant, assisting in the said enquiry.
- e) Whistle blowers are not required or expected to act as investigators or fact finders, nor would they determine the appropriate corrective or remedial actions that may be warranted in a given case. Whistle blowers should not act on their own in conducting any enquiry related activities, nor do they have the right to participate in any enquiry related activities other than those requested by the Enquiry Committee.

3.2. Confidentiality

The identity of a whistle blower, who comes forward for advice or to report in good faith about suspected wrongdoing shall be well protected. Confidentiality shall only be waived with the express consent of the whistle blower.

In some instances, identity may have to be disclosed, with the consent of the whistle blower, to conduct a thorough enquiry, to manage a case of clear and imminent danger to the 'Subject' or any other individual or to provide the accused with the appropriate and reasonable rights of defense. In such instances, the approval of the Board will be necessary if the whistle blower does not provide his express consent to waive off confidentiality.

3.3. Anonymous Disclosures

Whistle blowers are encouraged to put their names to their disclosures to aid appropriate enquiry. However, individuals may wish to raise concerns anonymously. Anonymous reports of wrongdoing are accepted either verbally through the Concern Line or in writing through the Case Management Tool (CMT). It is mandatory for anonymous reports of suspected wrongdoing to provide substantiated supportive evidence that allows confirmation of the background and likelihood of confirming the allegation from

attributable sources. It is noted that protective measures cannot be applied if anonymity is maintained.

3.4. Protection to the Whistle Blower

As a result of reporting under this Policy, protection shall be available provided that:

- i. The whistle blower has chosen to identify themselves;
- ii. The communication/ disclosure is made in good faith;
- iii. The whistle blower reasonably believes that information, and any allegations contained in it, are substantially true; and
- iv. The whistle blower is not acting for personal gain.

The Enquiry Committee may exercise judgement to recommend, based on the seriousness, appropriate measures to the Director General to safeguard the interests of, and protect the whistle blower from retaliation at any time from the moment the whistle blower comes forward. Protection measures shall be recommended in consultation with the Ethics Committee and whistle blower and can include, without being limited to, the following on a case-by-case basis with regard to the suspected retaliator:

- i. Temporary re-assignment;
- ii. Transfer to another office or function for which the whistle blower is qualified;
- iii. Placement on special leave with full pay; or
- iv. Any other appropriate action on a case-by-case basis, including security measures.

A workforce member who has participated in misconduct cannot avoid disciplinary action simply by reporting the misconduct and seeking protection under this policy. This policy does not protect the workforce member from an adverse action which occurs independent of her/his disclosure under this Policy, or for alleged wrongful conduct, poor job performance or any other disciplinary action, etc. unrelated to a disclosure made pursuant to this policy. Depending upon the circumstances, a workforce member's reporting and degree of cooperation may be taken into consideration in determining the appropriate disciplinary actions.

3.5. Rights of a Subject

- a) Subjects have the right to be heard and the Enquiry Committee must give adequate time and opportunity for the subject to communicate their say on the matter.
- b) Subjects have the right to be informed on the outcome of the investigation and shall be so informed in writing by the Institute after the completion of the enquiry process.
- c) Subjects have no right to ask for or be given information about the identity of the whistle blower, even if it is available.
- d) Subjects have a responsibility not to interfere with the enquiry. Evidence shall not be withheld, destroyed or tampered with and witnesses shall not be influenced, coached, threatened or intimidated by the Subjects.

3.6. Management action on false disclosures

A member of the workforce who knowingly makes false allegations of unethical practices or alleged wrongful conduct or raises protected disclosure to settle personal grievance, shall be subject to disciplinary action, up to and including termination of employment, in accordance with the Disciplinary Procedures. Further, this Policy may not be used as a

defense by a member of the workforce, against whom an adverse personnel action has been taken, independent of any disclosure made by them and for legitimate reasons or cause under the Institute's policies, procedures and/or guidelines.

3.7. Procedure for reporting and dealing with disclosures

ICRISAT, through its 'Concern Resolution Procedure', provides multiple avenues to whistle blowers to raise protected disclosures. The Concern Resolution Procedure can be used to report multiple concerns such as, Protected Disclosures, Grievances, and Complaints of discrimination, bullying, victimization and harassment.

3.8. Conflict of Interest

If an actual or potential conflict of interest exists, making it prudent for the Enquiry Committee members to recuse themselves from undertaking the preliminary prima facie review of a case, the Enquiry Committee and the Ethics Committee in consultation with the Governing Board shall identify an alternative mechanism acceptable to the whistle blower.

3.9. Feedback

Whistle blowers are entitled to receive information about the status of the enquiry process. The Enquiry Committee in consultation with the Ethics Committee should keep the whistle blower informed, in confidence, of the formal status of their case and of the conclusions of the preliminary review. Whistle blowers should receive feedback as much as is appropriate under the circumstances, and subject to policy constraints, on the final outcome of the enquiry.

3.10. Awareness-raising / Training sessions

The ICRISAT Human Resources Unit should provide periodic sessions for training and raising awareness on whistle blowing in support of the implementation of this Policy.

3.11. Reporting

Upon receipt of the formal concern, the Ethics Committee will provide the relevant details of the case to the DG and to members of the Enquiry Committee as per the Institute's Concern Resolution Procedure, unless the case involves the DG or any member of the Ethics Committee (as defined in the Concern Resolution Procedure).

An annual status report on the total number of concerns/violations received under this Policy during the period, with a summary of the findings and the corrective actions taken, will be provided to the Governing Board by the Ethics Committee.

3.12. Access to records and documents

All reports and records associated with 'Disclosures' are considered confidential information and access will be restricted to the Enquiry Committee and the Ethics Committee, the DG and the Governing Board, as appropriate. 'Disclosures' and any resulting investigations, reports or resulting actions will generally not be disclosed to the public except as may be required by any legal requirements or regulations or by any Institute policy/procedure/guideline in place at that time.

3.13.Retention of documents

All disclosures in writing or documented along with the results of investigation relating thereto shall be retained in the Case Management Tool, by the Institute for a minimum period of seven years.

3.14.Monitoring

- i. The Ethics Committee shall define and implement objective metrics to monitor effectiveness of this Policy and the whistle blowing mechanism of the Institute. These metrics should include (but are not limited to):
 - a. Number of concerns/ violations raised under this Policy
 - b. Number of concerns/ violations found to be ‘genuine’ post completion of the enquiry process
 - c. Number of open enquiries
 - d. Status of ongoing enquiries
- ii. The Ethics Committee shall include a summary of performance against the metrics defined in the annual status report presented to the Board.

4. Appendix

4.1. Key Terms

Term	Definition
Case Management Tool	A secure platform to register formal concerns and complaints as per the Concern Resolution Process.
Disciplinary Action	Any action that can be taken on the completion of/ during the enquiry proceedings including but not limited to a warning, imposition of fine, suspension from official duties or any such action as is deemed to be fit considering the gravity of the matter.
Good Faith	A member of the Institute’s workforce shall be deemed to be communicating in ‘good faith’ if there is a reasonable basis for communication of unethical practices or any other alleged wrongful conduct. Good Faith shall be deemed lacking when the member of workforce does not have personal knowledge on a factual basis for the communication or where s/he knew or reasonably should have known that the communication about the unethical and improper practices or alleged wrongful conduct is malicious, false or frivolous.
Institute	International Crops Research Institute for the Semi-Arid Tropics (ICRISAT)
Policy Council	A council consisting of nominated members from the ICRISAT Executive Team, constituted for ensuring compliance with the policy management framework of ICRISAT.
Protected Disclosure/ Disclosure	A concern raised via the concern line number or on the Case Management Tool made in good faith that discloses or demonstrates information that may evidence illegal, unethical or improper activity. Protected disclosures/ disclosures should be factual and not speculative in nature.

Retaliation	<p>A direct or indirect administrative decision and/or action that adversely affects the employment or working conditions of a whistle blower. Such action is taken for the purpose of punishing, intimidating or injuring the whistle blower because the whistle blower has:</p> <ul style="list-style-type: none"> • Reported suspected wrongdoing that implies a significant risk to the Institute; and/or • Cooperated with a duly authorized audit or an investigation of a report of wrongdoing. <p>Retaliation can include (without being limited) to:</p> <ul style="list-style-type: none"> • Harassment; • Discrimination; • Unsubstantiated negative performance appraisals; • Unjustified contractual changes: termination, demotion, reassignment or transfer; • Unjustified modification of duties; • Unjustified non-authorization of holidays and other leave types; • Unjustified termination or compensation decreases, or poor work assignments or threats of physical harm • Malicious delays in authorizing travel, or the provision of entitlements; • Threat to the whistle blower, their family and/or property including threats that may come from outside ICRISAT. <p>Retaliation will be treated as gross misconduct and is subject to appropriate disciplinary action.</p>
Subject	A person or group of persons against, or in relation to whom, a protected disclosure is made or evidence gathered during the course of an enquiry under this Policy
Whistle Blower	May include any member of the workforce of the Institute or any other stakeholder of ICRISAT who raises a concern/ violation under this Policy
Workforce	Refers to particular individuals who have a contractual relationship with ICRISAT such as members of Regular Staff Cadres, members of the Non-Regular Special Assignments category, members of Short-term contracts, members of Job-contracts, Learner-Participants and Third-party contractors; regardless of their position, type of employment, or location.

4.2. Reference Documents/ links

- A. Ethics Policy
- B. Code of Conduct
- C. Concern Resolution Procedure

D. TOR – Ethics Committee