

# 3.2.1 TFDE Whistle Blower Policy

## **Reporting of Suspected Irregularities**

#### **Purpose**

As a Christian organization, Tearfund Germany (TFDE) expects that its mission, vision, values and policies will be expressed, practiced and adhered to in all aspects of its programs and operations. TFDE also recognizes that failure to adhere to these can cause harm to our beneficiaries, partners, staff, and the organization. This policy provides a safe and direct channel for anyone in the organization to report suspected irregularities, to raise awareness of the issue and enable TFDE to respond quickly and mitigate harm.

#### **Organizational Scope**

This policy applies to all TFDE staff. Program beneficiaries and partners are encouraged to report irregularities or concerns through the program feedback mechanisms that are established in each field or program location.

This policy relates to suspicion, concerns, or knowledge of irregularities that cause harm or have the potential to cause harm including but not limited to illegal activities, unethical activities, exploitation, threats, harassment, discrimination, substance abuse, falsification of records, fraud, theft, embezzlement, bribery or kickbacks, misuse of funds, misuse of property, sabotage, conflicts of interest, gross mismanagement, waste, or endangering health and safety.

#### **Policy Content and Guidelines**

It is the obligation of all TFDE staff to:

- Report suspected irregularities as soon as they become aware of it.
- Provide truthful information in connection with an investigation of an irregularity.

It is the obligation of TFDE management to:

- Maintain a workplace where employees understand their responsibilities and have safe processes for reporting suspected irregularities,
- Take immediate action to address reported irregularities by initiating an investigation, documenting the process and results, and implementing actions for resolution and prevention,
- Protect anyone who reports an irregularity from reprisals, provided the report is done in good faith,
- Protect the identity of anyone requesting or requiring anonymity.

### Methodology

- 1. A report of irregularity, together with as many facts and details as possible, will be presented in writing to the Country Representative (CR) or in their absence to the Deputy CR. If the case involves the CR or Deputy, the report will be presented in writing to the Chief Executive Officer (CEO) at the International Office (IO). Allegations at the IO level will be presented directly to the CEO, except where he is involved, in which case it will be presented to the Supervisory Board (SB) Chair.
- 2. A preliminary investigation will begin immediately on receipt of an allegation. Any allegations that fall under this policy will be logged using the Incident Report Form.
- 3. If a preliminary investigation proves the allegation to be unfounded, reasons must be given for reaching that decision.



- 4. If, following the preliminary investigation, the issues are of the scope that the only action to be taken is limited to improved management policies or operating procedures, no further investigation will be required.
- 5. If serious problems are discovered and an intensive investigation may be necessary, the CEO and SB Chairs will be informed, and they will be responsible to make sure all affected parties are fully informed of the progress and the findings of the investigation.
- 6. In any case, an initial report must be provided to the CEO and SB Chairs within five working days of the initial allegation.
- 7. If the investigation discloses fraud or other malpractice as described above:
  - a. The persons determined to be directly responsible and involved must immediately be curtailed, suspended, disciplined or terminated as appropriate to the outcome of the investigation. The goal of this action will be the protection and healing of victims, and the restoration and healing of the accused.
  - b. The investigation must determine and document:
    - i. Why and how the problem developed,
    - ii. The systems or policies that failed to achieve intended protection,
    - iii. The scope of losses,
    - iv. The current status of the situation,
    - v. What must be done to resolve with the situation.
  - c. To obtain this information, management may engage an independent investigator.
  - d. Recommendations must be presented as to what actions are to be taken to best assure that this problem does not reoccur. Possible considerations include new or revised policies or procedures, staff training, personnel or organizational structure changes, improved reporting, periodic audits, etc.
- 8. The final Investigation Report, including remedial recommendations, will be presented to the CEO and SB for review, affirmation of action, and revision of policies if needed.
- Where possible and constructive, participating parties (donors, grantors, partners, beneficiaries, authorities) will receive an explanation of what has transpired, and the actions taken to resolve the situation.

#### **Anonymous Reporting**

A staff member who wishes to remain anonymous may report an irregularity via a third-party contracted by Tearfund Germany.

The report will be received first by Tearfund Germany and then forwarded to either the CEO or Supervisory Board Chairperson as appropriate. There is an option for anonymous reporting:

www.safecall.co.uk/report

www.tearfund.org/en/about us/reporting concerns

or email: tearfund@safecall.co.uk



#### **Prohibition of Retaliation**

TFDE expressly prohibits any form of retaliation, including harassment, intimidation, adverse employment actions, or any other form of retaliation, against employees who raise suspected violations of law, cooperate in inquiries or investigations, or identify potential violations of TFDE policies. Any employee who engages in retaliation will be subject to discipline, up to and including termination.

Any employee who believes that he or she has been subjected to any form of retaliation as a result of reporting a suspected violation of law or policy should immediately report the retaliation using the same procedure described above for reporting irregularities, initiating a new incident investigation.

#### **Appendices**

Annex 1: Whistleblower Hotline Access Instructions

#### **Approval Dates**

This policy was updated / approved: March 2022
This policy will be reevaluated on: Q1: 2024

#### **Policy Contact Person**

Human resource officer <a href="mailto:uheimowski@tearfund.de">uheimowski@tearfund.de</a>

Revision Log	
Date	Description
15.3. 2022	Update, policy remains effective with minor changes
22. June 2020	Update including new Hotline Reporting Services
19 May 2020	Update due to name change, policy remains effective without changes
4 Oct 2018	Update policy to include Hotline Reporting Services, approved
March 2018	Updated policy to include anonymous email address and mandatory log of all incidents, Updated terms – CD to CR, revised to ensure compliance with other WRG policies