

# WHISTLEBLOWING POLICY

## 1.1 PURPOSE

**1.1.1** icddr,b recognizes its duty to its stakeholders in ensuring efficient and effective use of the resources entrusted to icddr,b and in ensuring strict compliance with applicable legal and contractual obligations by incorporating an open, transparent and fair system that encourages and promotes the integrity of all its stakeholders.

**1.1.2** icddr,b requires employees, seconded scientists, guest investigators, students, consultants, and vendors at all times to act honestly and with full integrity and comply with the Law, Code of Ethics and Professional Conduct (hereinafter referred to as the 'Code') and any applicable rules, regulations, policy or procedure.

**1.1.3** Each individual has an obligation to report any non-compliance with the Law, Code, and any applicable rule, regulation, policy, or procedure, hereinafter collectively referred to as 'Non-Compliance Event(s)'.

**1.1.4** To enable and encourage this reporting of non-compliance event (s) icddr,b wishes to provide an open and transparent process through the provision of this 'Whistleblowing policy' that protects an individual from risk or any subsequent retaliation.

**1.1.5** The objective of the Whistleblowing Policy is to establish:

- Principles that protect the individual(s) reporting the non-compliance event(s).
- The provision of Definitions.
- The provision of guidelines for reporting and escalating non-compliance event(s),
- The roles and responsibilities of each individual involved in the process.

## 1.2 DEFINITIONS

### 1.2.1 CONFLICT OF INTEREST

Any situation in which a Board or Staff member has the opportunity or appears to have the opportunity to influence icddr,b's decisions or use resources or confidential or proprietary information of icddr,b in ways that could lead to professional, personal or financial gain, or otherwise give improper advantage to the Board or Staff member or institutions in which he or she holds official positions or prohibited or significant financial interests.

### 1.2.2 FRAUD

The use of deception with the intention of obtaining an advantage, avoiding an obligation or causing loss to another party. Fraud can be used to describe such acts as deception, bribery, forgery, extortion, corruption, embezzlement, misappropriation, false representation, concealment of material facts, and collusion. Fraud normally causes the wrongful gain to self and or others and or wrongful loss to others.

### 1.2.3 SCIENTIFIC MISCONDUCT

The fabrication, falsification, plagiarism, or other practices that seriously deviate from those that are commonly accepted within the scientific community for proposing, conducting, or reporting research. It does not include honest errors or honest differences in interpretations of judgment or data.

### 1.2.4 PLAGIARISM

The theft or misappropriation of intellectual property and the substantial unattributed textual copying of another's work. The theft or misappropriation of intellectual property includes unauthorized use of ideas or unique methods obtained by a privileged communication such as a grant or manuscript.

### 1.2.5 NON-COMPLIANCE EVENT

A breach or failure to implement or comply with the law, icddr,b Code of Conduct, policy, procedure, rule, regulation, or established standards of practice. Non-compliance event(s) may be mismanagement or misconduct and may have occurred or be likely to occur.

### 1.2.6 Examples of Non-Compliance Events (this list is non-exhaustive):

Based on the above definitions individual(s) are expected and encouraged to report any of the following:

- a. Failure to implement or comply with icddr,b's Code of Ethics and Professional Conduct, rules, procedures, policies, or established standards of practice
- b. Conflict of interest
- c. Fraudulent activity
- d. Scientific misconduct
- e. Plagiarism
- f. Financial impropriety
- g. Conduct which is potentially unethical, immoral or inconsistent with the standards to which icddr,b subscribes
- h. Conduct which is or will result in a waste of resources or intentional misuse of such resources
- i. Conduct which poses a risk to icddr,b's reputation or integrity
- j. Conduct likely to cause harm or damages to persons or property involved with icddr,b
- k. Discrimination in the course of employment or in the provision of service
- l. Racial, ethnical religious or gender discrimination
- m. Abuse or harassment, including physical or sexual harassment
- n. Aiding, abetting, soliciting, procuring or concealing of any of the above acts or omissions
- o. Disclosure of confidential or proprietary information belonging to icddr,b
- p. Misuse of icddr,b communication systems including telephone, electronic or paper-based
- q. Carrying, trading or consuming illegal drugs or alcoholic beverages whilst on icddr,b premises
- r. Carrying of firearms or other weapons on icddr,b premises
- s. Unauthorized removal of property or equipment from icddr,b premises
- t. Gambling, betting or other lotteries on icddr,b property.

### 1.3 SCOPE/ELIGIBILITY

This policy applies to all icddr,b staff members, employees, seconded scientists, guest investigators, students, consultants, and vendors as well as any other representatives from outside agencies who wish to report non-compliance event(s).

### 1.4 GUIDING PRINCIPLE

#### 1.4.1 PROTECTING THE WHISTLEBLOWER

The Whistleblowing policy provides an open, fair, and transparent process to encourage individuals to raise non-compliance event(s) within icddr,b for investigation and appropriate action where necessary.

#### 1.4.2 NO RETALIATION

**1.4.2.1** With this goal in mind no person, who in good faith, reports a non-compliance event shall be subject to retaliation or in the case of an employee, adverse employment consequences.

**1.4.2.2** In addition, any individual who retaliates against another individual who has reported a non-compliance event in good faith will be subject to Disciplinary action up to and including dismissal.

#### 1.4.3 CONFIDENTIALITY

**1.4.3.1** Reports of non-compliance event(s) and investigations following thereafter shall be kept confidential to the extent possible consistent with the need to conduct an adequate investigation.

**1.4.3.2** Disclosure of reports or details of investigations of non-compliance event(s) to individuals not involved in the investigation will be viewed as a serious offense and will result in disciplinary action up to and including dismissal.

#### 1.4.4 ACTING IN GOOD FAITH

**1.4.4.1** Any individual reporting non-compliance event(s) must act in good faith and have reasonable grounds for believing the information disclosed indicates non-compliance with the Law, Code, and any applicable rule, regulation, policy or procedure.

**1.4.4.2** The act of making an allegation that proves to be unsubstantiated or made maliciously, recklessly or with the knowledge that the allegations are false will be viewed as a serious offense and may result in disciplinary action up to and including dismissal.

### 1.4.5 Co-operation with Investigations

All employees- seconded scientists, guest investigators, students, consultants, and vendors will co-operate with investigations and provide the required information under this policy.

### 1.4.6 ANONYMOUS REPORTS

**1.4.6.1** If any individual wishes to make an anonymous report, they may call the 24-Hour Integrity Hotline +880 (0)2-2222-77001-10 Ext: 5555, or 16340 Ext: 5555 (by dialing 16340 and then dialing the extension 5555 from a mobile phone or landline), or may send an email to: [whistleblowing@icddr.org](mailto:whistleblowing@icddr.org). All anonymous reports will be investigated.

**1.4.6.2** However, in line with icddr,b's commitment to protecting the privacy of its employees, the identified Whistleblower, in communicating the alleged matter to the authorized person, may request for 'anonymity'. icddr,b is committed to using its best effort to the greatest extent possible to protect the privacy of such Whistleblower during the initial assessment stage.

**1.4.6.3** The Whistleblower should however be advised that if the matter results in an investigation and if the matter alleged is of such nature where the investigation may require the testimony of the Whistleblower, then his/her anonymity may no longer be maintained.

**1.4.6.4** If the matter, despite best effort, cannot be resolved without revealing the Whistleblower's identity, icddr,b will first discuss with the Whistleblower whether and how to proceed.

## 1.5 PROCEDURE

### 1.5.1 WHISTLEBLOWER

**1.5.1.1** At any time, an individual may have a confidential discussion regarding a non-compliance event(s) or possible misconduct with the Executive Director or Deputy Executive Director, or Director HR and will be counseled about appropriate procedures for reporting their concern(s).

**1.5.1.2** The Whistleblower will be entitled to the following:

- The ability to provide information to the investigators
- To request icddr,b for attendance of any witness with supporting knowledge
- To review portions of the investigation pertaining to his/her allegations or testimony

- To be informed of the results of the investigation
- To be protected from retaliation
- To be provided with confidentiality to the extent possible with the need to conduct an adequate investigation.

### 1.5.2 REPORTING AN EVENT

An individual who wishes to report a non-compliance event(s) should use any of the following channels to report or may call the 24 -Hour Integrity Hotline +880 (0)2-2222-77001 – 10 Ext: 5555, or 16340 Ext: 5555 (by dialing 16340 and then dialing the extension 5555 from a mobile phone or landline), or may send an email to: [whistleblowing@icddr.org](mailto:whistleblowing@icddr.org).The hotline will be accessed daily by Director HR/designee.

- Gender Focal Point
- Immediate Supervisor/Reviewer
- Any Division Director/Department Heads
- Any HR Manager
- Head, HRM
- Director, HR
- Deputy Executive Director
- Executive Director

**1.5.2.1** The report may be provided verbally or in writing. It is to note that further information might be required in writing.

**1.5.2.2** Assistance will be provided in documenting the non-compliance if this is required.

### 1.5.3 RECIPIENTS OF A NON COMPLIANCE EVENT

Any individual either listed above or other who has been provided with a Non-Compliance Event by an individual must report the details of that event to the Deputy Executive Director (DED) within 24 hours of receipt.

### 1.5.4 HEAD, HUMAN RESOURCE MANAGEMENT

**1.5.4.1** The Head, HRM is responsible for ensuring that all reports of Non-compliance Event(s) are investigated and resolved within 60 calendar days. All measures must therefore be taken for ensuring strict adherence to the 60-day timeline so that compliance can be achieved with the existing and conventional labor laws of Bangladesh. If the Head, HRM, however, apprehends that may not be possible to complete the investigation and resolution of the reports of Non-Compliance Event (s), then the Head HRM shall report such matter to the Executive Director and request for necessary legal consultation.

**1.5.4.2** The Head, HRM is responsible for ensuring a comprehensive, fair, and objective investigation is completed. This includes-

- a. Appointment of the appropriate investigation and remediation resources. These may include internal and/or external expertise.
- b. Providing a governance process to complete a comprehensive investigation and provision of any required follow-up actions.
- c. Appraising the Whistleblower of the outcome of the investigation and providing due recognition or sanction, as the case may be, to the said Whistleblower. (If the investigation team finds the allegation(s), in its Final Investigation Report, to be proven against the accused staff member, the Whistleblower will be met by the Head, HRM and due recognition would then be offered to the Whistleblower with regard to his/her proactivity. However, if the allegation(s) is/are found to be unsubstantiated or made maliciously, recklessly or with the knowledge that the allegation(s) is/are false, the Whistleblower may be perceived as having committed a serious offense and as such, he or she may face disciplinary actions which may result in his or her dismissal.

#### **1.5.5 DEPUTY EXECUTIVE DIRECTOR**

The Deputy Executive Director or designee is responsible for ensuring that all Non-Compliance Event(s) raised under this policy are investigated within 60 days whilst ensuring a comprehensive, fair, and objective investigation is completed. This includes:

- a. Informing the Executive Director within 24 hours of receipt of any report and the process to be followed.
- b. Appointment of the appropriate investigation and remediation resources. These may include internal and and/or external expertise.
- c. Providing a governance process to complete a comprehensive investigation and provision of any required follow up actions.
- d. Providing the Executive Director and Board of Trustees of all Concern(s) and their status on a bi-annual basis.