Table of Contents

1. About the Policy.................................................................3
2. Scope of the policy.............................................................4
3. Duty to report in good faith..................................................5
4. How to report........................................................................6
5. What information should be provided.................................7
6. How the whistle blowing reports shall be handled.............8
7. When not to use the whistle blowing avenues...................9
8. Governance of the policy......................................................10
1. About the Policy

a) This policy has been approved by the Senior Management Team (SMT) and is intended to provide guidance on how employees of Rakai Health Sciences Program (RHSP) and other relevant stakeholders can be in good faith raise concerns about illegal, unethical, inappropriate or unaccepted practices in a confidential manner without fear of reprisal, intimidation or retaliation. Acknowledge that at times staff may not always be comfortable to report suspicious incident through normal reporting channels. Therefore, we are committed whistle blowing avenue that we ensure that the information provided will be treated confidentially.

b) The policy does not replace other policies and procedures and be considered in tandem with the provision of relevant policy and procedures such as the code of conduct and other complaints procedures.

c) RHSP is committed to highest possible standards of openness, probity and accountability. In line with that commitment, we expect our employees, partners, contractors and other third parties that we deal with, who have concerns about any aspect of RHSP’s work to come forward and voice those concerns.

d) RHSP defines whistle blowing as informing relevant persons in the Organization of suspicious violations of RHSP’s code of conduct, internal policies, applicable legal, accounting or regulatory requirements or any questionable conduct or practice that has been committed, is being committed or is likely to be committed by RHSP employees or its partners.

e) The aim of the policy is:
   I. Encourage all the employees to speak up in confidence and report any matters that they suspect involves illegal, unethical, inappropriate or unacceptable practices.
   II. Ensure timely reporting of such allegations and provide assurance that all disclosures will be taken seriously and treated confidentially.
   III. Protect of interests of RHSP and its employees.
   IV. Reassure whistle blowers that they will be protected from possible reprisals or victimization if they disclose the reports in good faith.
   V. Provide guidelines for reporting that they ensure professional, timely and consistent response to reported allegations; and
   VI. Serve as a means of detecting illegal, unethical, inappropriate or unacceptable practices at all levels of the Organization in addition to deterring any incidents that may have not yet taken place.

f) For the purposes of this policy, the indicated items are defined as follows:
   I. Good Faith: Disclosures will be made in good faith if the allegation is made without malice or consideration of personal benefit and the person(s) has a reasonable basis to believe that the complaint is true. However, an allegation does not have to be proven to be true to be made in good faith. Good faith is absent when the disclosure is known to malicious or false.
   II. Illegal, unethical, inappropriate or unacceptable practices: Examples Include, but are not limited to financial and accounting fraud, violation of applicable laws including RHSP’s code of conduct and internal policies.
2. Scope of the policy

This policy applies all RHSP’s employees including our partners, consultants and contractors, irrespective of their location, function, grade, or standing. Any third parties that partners with RHSP are encouraged to apply this policy.
3. Duty to report in good faith

a) Each employ has the duty to report any thing that they may believe in good faith is.
   i. Illegal.
   ii. Unethical; and
   iii. Inappropriate or unacceptable

b) Employees will face disciplinary action if it is later discovered that a fraud occurred in the area of responsibility and they failed to report about it despite noting some red flags.

c) Incidents that should be reported include but not limited to.
   i. Actions that constitute a serious breach of any applicable law, governing regulation including RHSP’s code of conduct and internal policies.
   ii. Illegal/unlawful conduct that has been committed/ is being committed/is likely to be committed or any other actions which otherwise might constitute criminal behavior (including behavior that might constitute fraud with respect to questionable accounting practices/financial or regulatory reporting, any other financial impropriety by employees, theft, bribery, corruptions or miscarriage of justice). Examples include but not limited to:
      • Providing fake accountability.
      • Claiming/accounting for activities that have not taken place.
      • False accounting of contingency money.
      • Colluding to defraud RHSP’s out of its resources and participating in bribery.
      • Wasteful conduct which includes gross waste or misappropriation form resources.
      • Dangers to any employee’s health and safety.
      • Detrimental to RHSP or any of its employees; and
      • A deliberate concealment of information showing the above.

d) Any disclosure made in good faith will be protected by this policy if the whistleblower has a reasonable suspicion that anything illegal, unethical, inappropriate or unacceptable has occurred, is occurring or is lightly to occur.

e) Equally, if it is subsequently found that the employee has knowingly submitted a false report with the intention to accuse another employee or for other malicious reason/s, the matter will follow under appropriate disciplinary procedures under the human resource policy.
4. How to report

Whistleblowers have different avenues of reporting their suspicions such as the line managers or any member of Senior Management Team. This may depend, however, on the seriousness and sensitivity of the issues involved and who is suspected of the malpractice. If you feel that you cannot raise your concerns with anyone in RHSP you should either:

- Send a confidential SMS/ text to the dedicated whistle blowing number: 0702605555.
- Send an email to the confidential whistle blowing email address: whistleblow@rhsp.org

4.1 Confidential whistle blowing

a) Employees may consider revealing their identity when making the disclosures as this adds credibility to their report.

b) We undertake to respect and protect the confidentiality of any individual that will reveal their identity.

c) We will not disclose the identity to third parties except with regards to overriding legal obligations such as being required to do so by s court of law. In such cases the identity will not be revealed without prior dialogue with the whistleblower.

4.2 Anonymous whistle blowing

a) We understand that some of the disclosures made may be highly confidential and sensitive in nature.

b) A whistleblower may not want to reveal their identity because of fear of reprisal, intimidation or retaliation by those they are reporting. And they should indicate that they desire to be anonymous.
5. What information should be provided

a) In order to facilitate the investigation process, you are encouraged as much as possible to please provide the following:

i. An outline of the suspicious illegal, unethical, inappropriate or unacceptable practices.

ii. Details to the best of your knowledge of what, where, when, how it occurred.

iii. A list of names of those who you suspect are involved or a list of names of any other person that may provide relevant information or names of any other persons you have discussed with or reported the matter.

iv. Details of how you came to know the suspicious illegal, unethical, inappropriate or unacceptable practices.

v. If possible, estimate of the value of the loss.

vi. What breaches, if any, of RHSP’s code of conduct, internal policies, applicable legal, accounting or regulatory requirements you believe has occurred.

vii. Your name and details if you wish to make a confidential report. If you wish to remain anonymous then you can request not to disclose your name, and

viii. If you had previously reported the suspicion, please provide details of who you reported to, the date, time when you made the report.
6. How the whistle blowing reports shall be handled

a) Any allegations of illegal, unethical, inappropriate or unacceptable practices that is made to the line manager/ any member of SMT or through the whistle blowing avenues provided, whether openly, confidentially or anonymously, will be reported to the SMT on a quarterly basis by the Director Finance and Administration.

b) Each allegation will be forwarded to the Executive Director by the Director Finance and Administration for review within 1 week. At their discretion, the Executive Director and Director Finance and Administration may consult with any member of management or employee whom they believe would have appropriate expertise or information to assist the investigation. The Executive Director in consultation with Director Finance and Administration will determine who should investigate the allegation, taking into account the identity of the alleged offender, the significance of the alleged offence and the credibility of the allegation report of the offence.

c) If the Executive Director and Director Finance and Administration decide that any member of management or employee can perform the investigation then the appointed persons will investigate the allegations and based on the significance of the allegation give a report to the SMT within 2 days of completion of the investigation. The rest of the cases the SMT will be given quarterly updates on the action taken and the status of each whistle blowing report received. The Executive Director and Director Finance and Administration will be free at their discretion to engage outside auditors, counsel or other experts to assist in the investigation and in the analysis of results.

d) If the Executive Director and Director Finance and Administration decide that the decision whether to investigate the allegation should be made by the SMT, then they will make that request known to the SMT in writing within 1 day of receiving the allegation. The SMT will promptly determine what professional assistance, if any, it needs in order to conduct the investigation. They will be free at their discretion to engage outside auditors, counsel or experts to assist in the investigation and in the analysis of results.

e) All allegations made against the Executive Director or any member of SMT will be referred directly to the SMT for them to provide guidance on the way forward.
7. When not to use the whistle blowing avenues

We expect employees to act sensitively and sensibly with the highest standards of integrity, respect, accountability and transparency. The use of the whistle blowing avenues provided should be consistent with these standards and should not be used to express personal grievances. Employees are therefore encouraged to report any other grievances or unacceptable practices to their line manager, HR office or relevant support function.
8. Governance of the policy

Policy owner: Executive Director

Approved by: Senior Management Team

Approval Date:

Next review: