

## Policy Information

Approved by: (sign/date)	<b>Approved – Pending Signature</b> (Board of Trustees)	Policy Number:	2025-1201-05
		Risk Appetite:	Low
		Policy Family:	Human Resources and Organizational Development
Policy Owner: (sign/date)	(Head of HROD)	Version:	2.0
		Effective Date:	December 1, 2025
		Next Review Date:	December 1, 2027

## 1. PURPOSE

The purpose of this policy is to foster a culture of accountability and ethical behavior and to provide the guidance and process for the disclosure of suspected or known wrongdoing that may negatively impact the International Rice Research Institute (IRRI) or put individuals or parties associated with IRRI at risk. In addition, this policy ensures the protection of individuals who report in good faith misconduct or wrongdoing.

## 2. SCOPE

This Policy applies to all IRRI staff, officers, and the Board of Trustees, as well as associated parties including contractors, consultants, suppliers, hosted and seconded staff, trainees, volunteers, interns, scholars, students, visiting scientists, and other visitors working on behalf of IRRI.

This policy governs all IRRI operations and administration, including fieldwork, research, and all other official activities regardless of location. Furthermore, it includes conduct outside of official duties that may negatively impact IRRI’s reputation, interests, or mission, regardless of where the activities occurred.

## 3. POLICY

### 3.1 DUTY TO REPORT

All IRRI staff and associated parties must promptly report suspected misconduct, unethical behavior, or policy violations they reasonably believe have occurred or may occur. Reports should be made in good faith, in writing, and include sufficient detail for proper assessment. Knowingly submitting false or malicious complaints may result in disciplinary action. Reporting of wrongdoing does not provide immunity for any acts or omissions of own wrongdoing.

IRRI is committed to complying with all national and international regulation requirements, international best practices, and standards related to whistleblowing.

### 3.2 ROLES AND RESPONSIBILITIES

#### 3.2.1 IRRI Leadership

IRRI leadership is responsible for promoting a culture of ethical behavior and leading by example. It plays a crucial role in ensuring that systemic issues identified are resolved and that resources and provisions for training on this policy are available.

### **3.2.2 The Office of Ethics and Business Conduct (EBC) in Partnership with Human Resources and Organizational Development (HROD)**

EBC in partnership with HROD is responsible for:

1. Delivering whistleblowing training during onboarding and at regular intervals.
2. Managing IRRI's internal and external reporting hotline and maintaining communication with whistleblowers.
3. Leading internal investigations unless a conflict of interest exists.
4. Acting decisively on breaches of IRRI's Code of Conduct or other policies.
5. Coordinating with the Ethics and Business Conduct (EBC) Director to share complaints, monitor trends, and support policy review and updates.
6. Contributing to quarterly and annual reports submitted to the Director General and the Audit, Finance, and Risk Committee (AFRC).
7. Ensuring confidentiality and protection for whistleblowers throughout the process.
8. Ensuring protection from retaliation and responding to related reports.
9. Responding to reports of retaliation.
10. Determine if an investigation is warranted and assign an investigator.
11. Monitor retaliation claims, track incidents, analyze trends, and assess the effectiveness of protective measures.
12. Monitoring compliance, addressing systemic issues, and evaluating the effectiveness of this policy.

### **3.2.3 Line Supervisors/Managers**

Line supervisors/managers are responsible for recognizing when a complaint or allegation falls within the scope of this policy, even though the staff member might not actually write that they are "whistleblowing" or making a "protected disclosure". All complaints submitted to supervisors/managers must be kept confidential and be referred to the Head of HROD immediately.

### **3.2.4 Staff Members**

Staff members are responsible for:

1. The immediate reporting of suspected or known wrongdoing (see Section 3.4).
2. Staff reporting malpractice are expected to explain as fully as they can and in good faith the information or circumstances giving rise to their concern(s).
3. Report any form of retribution or retaliation experienced or witnessed in a timely fashion.
4. Cooperate fully with investigations while maintaining confidentiality.
5. Participate in ethics training and awareness campaigns.

### **3.2.5 Associated Parties**

Associated parties are expected to report suspected or known instances of wrongdoing/misconduct to their main point of contact at IRRI. In instances where the suspected/known party is the main contact, the associated party shall report to IRRI's Head of HROD as per the internal reporting procedure outlined in the Whistleblowing Procedure.

The information provided by the associated party given in good faith will be kept confidential, and protection from retaliation will be extended to them.

### **3.2.6 Designated Investigator**

The designated investigator is responsible for ensuring the proper implementation of this Policy during the investigation process, which shall be in line with the EBC Office's policy on investigations. They must acknowledge receipt of complaints, maintain strict confidentiality, and provide appropriate safeguards for whistleblowers.

Investigators shall:

1. **Assess Credibility:** Conduct a preliminary review to determine if the allegation warrants further investigation. If not, the case may be formally closed.
2. **Conduct Investigations:** Where warranted, carry out a thorough, fair, and unbiased inquiry to establish facts, assess probabilities, and identify any violations.
3. **Recommend Actions:** Propose internal control improvements.

### **3.2.7 Person(s) Subject to Investigation**

Individuals subject to an investigation are expected to provide full cooperation with the investigation team and maintain strict confidentiality. Where confidentiality permits, they have a right to know what they have been accused of and to provide evidence and shall be treated fairly.

Subjects shall be informed of the outcome of the investigation and are expected to accept or appeal the decision of the Director General / Chair of the Audit Finance, and Risk Committee (AFRC).

### **3.2.8 Director General and The Chair of the Audit, Finance, and Risk Committee**

HROD will brief the Director General (DG) on a quarterly basis and recommend actions as appropriate. For high level/impact cases HROD will seek the DG decision. This decision includes whether and what disciplinary action should be taken, as established in the [Guidelines on IRRI's Disciplinary Procedure](#), in consultation with the Head of HROD and where applicable, the EBC Director.

The decision of the DG shall be final and binding except in cases where the matter was referred to the Board of Trustees' Chair, where the decision of the Chair will be final and binding.

## **3.3 PROTECTION FOR WHISTELBLOWERS**

IRRI strictly prohibits retaliation against individuals who report concerns in good faith or participate in investigations. Whistleblowers and those assisting in inquiries are protected from harm to their career,

reputation, or well-being. Every effort will be made to safeguard their identity, subject to legal and investigative requirements. Protection applies regardless of whether the allegation is substantiated.

Please see the Whistleblowing and Anti-Retaliation Procedures for more information on reporting retaliation.

### **3.3.1 Interim Protection Measures**

Based on a preliminary assessment of the complaint and as required, IRRI may choose to implement interim measures to protect the whistleblower, such as reassignment, offering remote working arrangements, or agree to a Whistleblower's request to take leave.

Interim measures may be requested by the complainant in their written submission and must be agreed to by IRRI before they are implemented.

### **3.3.2 Reporting of Retribution or Retaliation**

Whistleblowers are encouraged to immediately report acts of retribution or retaliation that have occurred resulting from their disclosure to their supervisor/manager and the Head of HROD. Retaliation complaints will be responded to in a timely manner based on the severity and urgency of the complaint.

### **3.3.3 Punitive Actions Against Retaliator(s)**

Harassment or victimization of the whistleblower or other staff assisting in an investigation will not be tolerated by IRRI and could constitute sufficient grounds for [disciplinary action](#), including dismissal of the staff member(s), causing such harassment. Where there is clear evidence that retaliation has occurred, the retaliator may be temporarily reassigned or placed on special leave while the investigation is ongoing.

### **3.3.4 Abuse of Protection**

Genuine whistleblowers are accorded protection from any kind of unfair treatment; however, any abuse or misuse of this protection may warrant disciplinary action. In cases where deliberate unscrupulous behavior or actions by the whistleblower has been determined, the dignity of victim shall be restored in as much as is possible alongside possible disciplinary action against the (misleading) whistleblower.

### **3.3.5 Remedies for Victims of Retaliation**

Victims of retaliation may be entitled to remedies such as reinstatement, compensation, restoration of duties, or other corrective actions. The Head of HROD, in consultation with the Director General, will determine appropriate and proportionate remedies.

## **3.4 REPORTING CHANNELS**

IRRI offers two channels for the reporting of misconduct/wrongdoing:

1. **Internally:** Directly to the staff or associated party's immediate supervisor/supervising main point of contact in IRRI. Please see Table 1 – Complaint Escalation Framework in the "IRRI Whistleblowing Procedures" for more information and additional internal paths to file a

complaint. IRRI encourages internal reporting, as it can facilitate a more direct and timely investigation.

2. **Externally:** By emailing IRRI's independent third-party service provider, [Lighthouse Services](#), when anonymity is required.

### 3.5 ANONYMOUS COMPLAINTS

IRRI encourages internal reporting to facilitate investigations and the ability to rectify the alleged malpractice/wrongdoing. However, anonymous complaints can be reported through our third-party provider [Lighthouse Services](#).

### 3.6 INDEPENDENT THIRD-PARTY INVESTIGATIONS

Reports of misconduct may be referred to qualified independent law firms for investigation in cases where the Director General or a Board of Trustee member is conflicted, or where the required capacity to investigate is not available, with consideration of the seriousness or complexity of the alleged misconduct.

### 3.7 CONFIDENTIALITY AND IMPARTIALITY

All reports will be treated with strict confidentiality, with information shared only on a need-to-know basis to protect due process, comply with applicable laws, and uphold the rights of all parties, subject to IRRI's immunities and privileges. Investigations will be conducted objectively and fairly. Defamation of alleged offenders is strictly prohibited, and all individuals involved must maintain confidentiality and avoid prejudicial statements or actions.

## 4. PROCEDURES

For all associated whistleblowing procedures, please refer to the [IRRI Whistleblowing Procedures](#).

## 5. DEFINITIONS

- **Associated Party:** Anyone working on behalf of IRRI such as hosted staff members, interns, visiting scientists, contractors, volunteers, third-party suppliers, etc.
- **Disciplinary action:** Any action taken against subject(s) of a whistleblowing issue, either including but not limited to warnings, suspension from official duties or any such action as is deemed reasonable, proportionate and fit considering the gravity of the violation.
- **Good faith:** Actions carried out in sincerity and honesty that are not malicious, false or frivolous.
- **Protected Disclosure:** Any communication or reporting made in good faith that discloses or demonstrates any whistleblowing related action.
- **Retaliation:** Any adverse action taken against an individual for reporting misconduct, unethical behavior, or policy violations, or for participating in an investigation or grievance process. This includes termination, demotion, harassment, exclusion, negative performance evaluations, threats, or intimidation. Retaliation may be overt or subtle and can occur through any form of communication (published internally or publicly e.g. via social media) or behavior.

- **Whistleblower:** A staff member, Officer, Board of Trustee member, or Associated Party, who makes a protected disclosure, with the intent of safeguarding IRRI organizational interests.

## 6. RELATED POLICIES AND OTHER GOVERNING DOCUMENTS

Please see IRRI’s main intranet webpage on [Policies, Supplements, Procedures, and Guidelines](#) for more information or [IRRI’s website](#) for openly accessible documents. Also see the [CGIAR Integrated Partnership Policy on Whistleblowing and Protection from Retaliation](#).

## 7. VERSION HISTORY

Version	Effective date	Approved by	Summary of changes
1.0	July 2019	Dr. Matthew Morell, Director General	N/A
2.0	D Month 2025	Dr. Yvonne Pinto, Director General	Major changes to all sections and harmonization and integration of the CGIAR IP Whistleblowing Policy attributes. Inclusion of anti-retaliation language.