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1. Receive a Complaint

The complaint is received in writing (e.g. mail or letter), by phone, social media or in person.

2. Confirm Receipt of Complaint

The receipt of complaint is confirmed within 96 hours by the person who received the complaint. The aim is that the person who submitted the complaint knows that it was received.

3. Register complaint

The complaint is registered in a confidential log book. All activities related to the case are documented in the log file in chronological order.

4. Formation of Complaint Handling Committee

The ad hoc formed Complaint Handling Committee will meet confidentially to discuss next steps. The Committee shall consist of the Ombudsperson (if complaint was lodged via the ombudsperson), the direct supervisor of the complainant, a member of the Board of Directors and a Head of Department. In case the allegation made is towards the direct supervisor, the member of the Board of Directors or the Head of Department, then the Ombudsperson or the person who received the complaint will ensure that this person is not part of the Committee and an alternate suitable person will be identified. Depending on the nature of the complaint, staff with expertise relevant to the case and / or external specialists may be invited to be part of the Complaint Handling Committee (e.g. lawyers, psychologists, etc.).

5. Decide whether to investigate and assess risks

- a. The Complaint Handling Committee will determine:
 - Does this complaint constitute a potential breach of any organisational policy?
 - Is there an identified victim and identified subject of complaint?
 - Is further information required to determine either of the above?
- b. If required, additional information will be collected to provide sufficient basis to take forward the complaint. Collection of information has to be done extremely carefully, not to put at risk the complainant, jeopardize a potential investigation (e.g. by making the Subject of Complaint, witness or other stakeholders aware that a complaint has been made) or to present a protection risk to anyone concerned.
- c. An investigation is usually undertaken if:
 - there is sufficient information to constitute a complaint,
 - evidence is required to determine whether or not the complaint can be upheld

What is an investigation?

Systematic process through which information is gathered that proves or disproves an allegation:

- Determines the circumstances & background of an allegation
 - Establishes the facts behind the allegation
 - Draws conclusion on whether or not based on the available evidence, there was a breach of the Code of Conduct
 - Makes recommendation to management for follow-up
- (Cf. ACT: Complaints Handling & Investigation Guideline (2010: 11))

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- d. At the initial contact with the complainant, the line manager responsible for the staff concerned/the project or programme concerned at Sign of Hope or the Ombudsperson shall assess whether the complainant or anyone else is immediately or potentially at risk. The risks should be prioritised and responded to by the Complaint Handling Committee (e.g. referral to specialists, relocation, given paid leave). Thus, the risks linked to the investigation of complaints shall be assessed even prior to an investigation and addressed in an appropriate way. Thereby the complaint process will take into account the risks for the complainant, the person/s being “accused”, as well as for the investigation team.
- e. If the complaint alleges a criminal offence, the organisation has to decide if the case must be referred to state authorities. In an environment where rule of law has broken down or where authorities cannot be relied upon to protect those involved or may even cause them harm, this may not be done. The primary consideration is the safety of all concerned i.e. the victim, witness/es and the subject of the complaint.
If it is decided to refer the allegation to authorities, SoH has to decide whether to go ahead with an internal investigation or not.

- — **For more information:**
- — Refer to CHS ALLIANCE 2015: 12, Act Alliance 2010: 16
- —

6. If Yes: Develop TOR for the investigation & Appoint investigation team

- a. Determine the allegations to be investigated: rewrite the allegation in terms of the breach of SoH policies and procedures the complaint refers to. List the SoH rules and regulations that are reportedly violated.
- b. The Complaint Handling Committee will develop Terms of Reference (ToR) for the investigation (see Annex 1 for key components of a ToR)
- c. Based on the ToR of the investigation, an investigation team will be formed.
- d. The investigation team generally comprises a manager and at least two investigators (male & female) and in some cases observers, interpreters and outside experts.
- ⇒ The role of the manager is to oversee the investigation and to coordinate the appropriate response. The manager has a supervisory role and will not take part in the actual investigation.
 - ⇒ The role of the investigators is to gather evidence, and to prepare and submit an investigation report.
- (see Annex 2 for roles & responsibilities of the Investigation Team)
- e. For choosing the individuals, the size of the team, required qualifications, ToRs and the budget for the investigation will have to be considered.

- — **For details on roles and responsibilities** of the different team members: refer to CHS
- — Alliance (2015: 13ff); Act Alliance (2010: 13 ff).
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f. The members of the Investigation Team shall sign an Oath of Confidentiality (see Format Annex 3).

7. Plan investigation & undertake risk assessment

Establish an investigation file:

- a. Set up a confidential investigation file for any information compiled and maintained by SoH with respect to the investigation into the complaint.
- b. For confidentiality and protection to the witness, the following measures shall be taken when maintaining the file:
 - Develop codes for the complainant, survivor(s) (if this is not the complainant), subject of complaint and other witnesses (e.g. Witness A, for the Complainant; Subject A for the subject of complaint). On any account shall their names be used on any witness statements or investigation reports.
 - Keep all records related to the investigation in a locked cupboard or filing cabinet or password-protected file if stored electronically.
 - Expressly prohibit the investigation team from taking the files out of the office. If copies must be made, note the number of copies, record the signature of the investigation team member taking out the copies, and destroy copies when these are returned.
 - Documents shall not be shared with any person outside the investigation team.

Identifying and minimising risks:

- a. Identification of risks:
At this stage, it is once more important to identify risks and to respond to immediate safety risks: to think broadly about what has happened, and what could happen to everyone involved in the investigation, including the alleged victim and the complainant (if they are different persons), the witness, any (local) investigation team members and the subject of the complaint.
- b. Prioritisation of risks:
The risks have to be ranked by person, type of danger and likelihood of those risks occurring.
- c. Minimise risks:
A response to all risks has to be formulated and a protection plan developed.



For more information: refer to: CHS Alliance (2015: 17)

Ensuring confidentiality

The issue of confidentiality has to be a primary focus of the investigation team.

All aspects of a complaint are confidential:

- fact and nature of the complaint,
- the identity of key participants (the complainant, the victim, the Subject of Complaint and witnesses),

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Confidentiality:

Information about the complaint and investigation can only be disclosed to specified people in and outside SoH, on a need-to-know basis.

It is important to maintain confidentiality as it protects the privacy and safety of the all the people involved in the complaint. Breach of confidentiality undermines everybody's faith and trust in the complaint mechanism, the investigation, and even the organisation itself.

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- the investigation.

Confidentiality is breached by unauthorised, accidental or intentional disclosure. The investigation team should assess the risks of accidental and intentional disclosure.

Accidental disclosure: e.g. by casual conversation or by documents “falling into the wrong hands”:

⇒ To minimise risks, investigators should develop an action plan which identifies the risks to confidentiality, defines who is responsible for addressing those risks and identifies ways to prevent disclosure (e.g. signing of oath of confidentiality, separate documentation systems, separate printers and servers, password-protection for electronic data).

Intentional disclosure: someone who is trusted with information disregards the rules and tells others:

⇒ To limit the number of people who know about the complaint, to choose team members carefully, to be alert to conflicts of interest and to take strong action against someone who breaches the oath of confidentiality.

Preliminary considerations for investigation: goals, constraints and questions

Goals:

- The main goal of the investigation is to gather information that proves or disproves the allegation.
- The job of the investigation team is to collect all relevant evidence in order to determine objectively whether the breach of SoH policies has occurred.
- The evidence will then be handed over to the Complaint Handling Committee for further decision and action.

Constraints:

- Organisational constraints: Investigators should review their ToRs to ensure their authority to investigate the case (e.g. ability to collect evidence without hindrance, access staff promptly, full cooperation of anyone working for the organisation.)
- Legal constraints: National laws, organisational policies, Subject of Complaint’s employment contract will at the least, influence how the investigation is conducted



For details refer to CHS 2015: 23

- Practical constraints: Available resources will determine the investigation priorities: available time and money to conduct the investigation, persons contributing, their skills, availability of outside experts, facilities to ensure safety of participants.

Substantive Questions for the investigation:

- What substantive policies/rules have allegedly been breached?
- What are the elements of each rule?
- What evidence is relevant to that breach?

8. Investigation

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a. Gathering evidence

Gathering of background information before interviewing witnesses such as:

- Witness testimony (e.g. statement about what someone saw, heard, etc.)
- Documentary evidence (e.g. photographs, videotapes, computer files)
- Physical evidence (e.g. examinations of the site of an alleged incident)
- Expert evidence (e.g. medical experts)

 **For more details** refer to ACT (2010: 18 ff/CHS 2015:26 ff)

Key principles of an Investigation

- Confidentiality
- Transparency
- Thoroughness
- Safety, Health and Welfare
- Respect
- Impartiality
- Accuracy
- Legality
- Cultural Awareness
- Professionalism
- Timeliness
- Independence

(More details see: ACT 2010: 12; CHS 2015:21)

b. Preparing and Conducting interviews

- Develop an interview plan for each witness. It is recommended to call a witness only once (hence preparatory work is important e.g. ensure that gaps in information and inconsistencies are addressed)
- It is good practice to get the witness to sign and date their statement. Two investigators will then attest to the signature of the witness.

 **For more details refer to ACT (2010: 19 ff/CHS 2015:29 ff):** e.g. who to interview & when & where, who should conduct the interview, how to interview the witness, how to record the information?

Supportive Tools:



- ⇒ Investigation Plan - see CHS (2015): Annex C (page 57)
- ⇒ Interview Guide – see ACT (2010: Annex 7/p.34)
- ⇒ Record of Interview – see CHS (2015: Annex G, page 67)
- ⇒ Special considerations for investigations into allegations of fraud & corruption – see ACT (2010: Chapter 6, page 47)

9. Investigation Report

After reviewing and validating the evidence an investigation report has to be written.

The report has to be submitted by the Investigation Manager to the Complaint Handling Committee.

The Investigation Report shall contain one of the following three conclusions:

- “established by reasonable inference” i.e. there is a clear and convincing evidence supporting the complaint
- “not established due to insufficient or unclear evidence” i.e. the complaint is not tenable

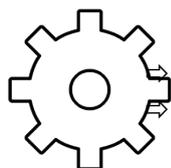
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- “not established based on evidence that clears the Subject of Complaint or that establishes the malicious nature of the complaint”

A separate report will provide recommendations to management regarding need for training (if any), supervision or recommendations for change in organisational policies: Management Implication Report.

Decisions on disciplinary measures shall not be taken by the investigation team but shall be taken by the management of SoH based on organisational policies.



Supportive Tools:

- Format Investigation Report – see ACT (2010: Annex 8/p.367)
- Tips for writing the investigation report – see CHS (2015: Chapter 4, page 39)

10. Receiving Report and taking decisions

Immediate steps based on report outcome

- ⇒ Complaint not upheld: Subject of Complaint receives a letter of clearance and the report is securely filed, or
- ⇒ Complaint upheld, disciplinary hearing will be convened for the Subject of Complaint¹, or
- ⇒ Unable to arrive at a decision based on the report. Further follow-up required.

Other potential disciplinary procedures

It may be the case that other staff members involved in the matter are subject to disciplinary measures e.g. complaint was found to be malicious or staff have been found to be negligent. This will be covered in the management implication report.

Support to Victims and Witnesses

If the complaint is upheld, then SoH is responsible to ensure providing care to the victim(s) and/or complainant (if these are different persons). Witnesses may also require support.

11. Inform participants about outcome of investigation

Informing Subject of Complaint

The complaint receiver (e.g. line manager, board, ombudsperson, focal point) is responsible for advising the Subject of the Complaint of the outcome of the investigation in writing (usually by letter). If the complaint has not been substantiated, the clearance letter must in any case not disclose the name of any witness, informant or complainant.

¹ SoH Senior Management must take disciplinary measures based on organisational policies. It is never the role of the investigation team or the investigation manager.

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The Investigation Manager shall in no circumstances inform/advise the Subject of the Complaint if the allegation has been referred to state authorities for criminal prosecution.

Informing Complainant

The complaint receiver shall advise the complainant in writing that the complaint has been substantiated and referred to management for a decision on discipline; or that the complaint is not substantiated. No further explanation is required.

Other staff and witnesses

Other staff or witnesses who have been aware of or involved in the investigation may be informed that the investigation took place and that a decision was taken. No further information is to be disclosed to them in order to uphold confidentiality.

External people and organisations

Only in the event the investigation has become a matter of public record, the management of SoH may formulate a standard response to media and public inquiries. That standard response should be adhered to strictly and no further information is to be divulged to these parties.

12. Appeal Process

The Complainant or Subject of Complaint may lodge an appeal within 30 days of receipt of outcome of the investigation if they disagree with the findings.

13. Taking Action and Follow up

Following up on points in management implication report

If the management implication report provides recommendations to management for follow up, senior management shall develop and implement an action plan to address the issues. A copy of the action plan should be kept in the investigation file.

Regular monitoring is required to ensure that all measures have been put in place so that a similar offence does not recur.

Damage to Subject of Complaint's reputation

If the complaint against the Subject of Complaint is proven to be false, SoH will work with the Subject of Complaint to ensure that their reputation is not affected.

Managing staff morale

A complaint especially in regards to sexual exploitation and abuse may have a huge impact on staff morale. By the time a complaint is made, there might already have been months of rumours and concerns circulating in the affected office. Hence, SoH may have to invest time in restoring staff morale by listening to their concerns and reassuring them that due process has been undertaken, while explaining why some aspects of the case need to remain confidential.

Organisational Learning and Transparency

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The focal point for the complaints and whistleblowing policy (with input from the ombudsperson) shall prepare an annual complaints report of the types of complaints received, actions taken and lessons learnt. The report will be presented at the Annual Board Meeting of Sign of Hope. An outline of a complaints report can be found in Annex 4.

References:

ACT ALLIANCE (2010): Complaints Handling and Investigation Guidelines

<https://actalliance.org/documents/act-alliance-complaints-and-investigation-guidelines/> (accessed 15 August 2018)

CHS Alliance (2015): Guidelines for Investigations: A guide for humanitarian organisations on receiving and investigating allegations of abuse, exploitation, fraud or corruption by their own staff.

https://www.chsalliance.org/files/files/Investigation-Guidelines-2015_English.pdf (accessed 15 August 2018)

Transparency International (2016): Complaint Mechanisms: Reference Guide for Good Practice.

https://consultations.worldbank.org/Data/hub/files/ti_document_-_guide_complaint_mechanisms_final.pdf (accessed 15 August 2018)

We acknowledge and are grateful for the work done especially by the ACT and CHS Alliances. Their Complaint Handling and Investigation Guidelines have strongly guided and enriched the development of our guideline.

Annexes

Annex 1: Key components of an Investigation Team ToR (Act Alliance 2010: 31)

ToR should include the following:

- Purpose of the investigation (for example -- To gather information that proves or disproves the allegation – noting the specific complaint)
- Background and description of the complaint, without giving names of complainant, Subject of Complaint, or witnesses
- Special considerations
- Suggested Timeframe for milestones
- Roles and responsibilities of each member of investigation team

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- Permission to access staff promptly and to require the full cooperation of anyone working in the organisation
- Suggested reporting Format
- Suggested travel plan (if necessary)
- Annex to the ToR: Authorisation to investigators to collect evidence without hindrance or prior clearance by SoH management. This should be an annex that the Investigation team can use if and when necessary with SoH departments, field offices and partner organisations.

Annex 2: Roles and Responsibilities of the Investigation Team (Act Alliance 2010: 33)

a) Responsibilities of Investigation Manager

The investigation manager’s responsibilities are to oversee the investigation, take strategic decisions and create the conditions for investigators to do their work. This includes:

- making key decisions about the direction of the investigation, such as whether to investigate or whether to suspend or redeploy the Subject of Complaint during the investigation;
- ensuring that safety and confidentiality plans are implemented and that the investigation is conducted according to key principles and procedures;
- liaising with external institutional stakeholders, such as state authorities and other agencies;
- appointing personnel to the investigation team and managing the relationship between the investigation team and the rest of the organization;
- receiving the final investigation report on behalf of the organisation and conveying the same to SoH management / Complaint Handling Committee;
- ensuring that investigators are trained, supervised and referred for emotional and psychological support when necessary;
- ensuring the investigators follow the principles of an investigation and that the investigation report is logical, and conclusions are fair and based on evidence gathered.

b) Responsibilities of investigators

Investigators are responsible for the day--to--day conduct of the investigation, as defined by TORs. Normally, their responsibilities include:

- developing the investigation plan;
- assessing and making recommendations on safety, confidentiality;
- securing evidence;
- making recommendations on the work status of the Subject of Complaint for the duration of the investigation;
- gathering evidence;
- preparing and submitting the report;
- recording findings based on the evidence;
- if necessary making recommendations on the policies and practices of SoH in order to ensure that the exploitation/abuse may not recur in future.

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Annex 3: Oath of Confidentiality (CHS 2015:69)

I, the undersigned, shall exercise the utmost discretion with regard to my involvement in the investigation being conducted by Hoffnungszeichen e.V. / Sign of Hope. I shall hold secret all information known to me by reason of my involvement as part of the investigation team. I shall not use such information for private gain or public exposure, or to favour or prejudice any third party.

I understand that this declaration will remain in force after the completion of my assignment with Hoffnungszeichen e.V. / Sign of Hope as part of the investigation team. I also understand that divulging confidential information to persons who are not authorised to receive it may amount to misconduct, that the signed original of this declaration will be held in the relevant investigation file, and that action may be taken against me SoH for breach of such confidentiality.

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Name: _____
Title: _____
Role: _____
Signature: _____
Date and Place: _____

To be filled out by an Investigator before whom the Oath is taken:

Case number: _____
Name: _____
Title: _____
Signature: _____
Date and Place: _____

Annex 4: Annual Complaints Report Outline

1. Overview of types of complaints

	Year
Total Number of Complaints received at SoH Head Office in Konstanz	
Number of serious complaints	
Number of operational complaints	

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Number of complaints that could not be dealt with	
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2. List of types of cases reported

Contents of Complaint	
What action did SoH take	
Lessons Learnt	

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