CARE International Policy on Fraud and Corruption – Awareness, Prevention, Reporting and Response

1. Policy Statement

This policy reflects the fundamental and core concept that all CARE International (CI) Members, Affiliates, Candidates, and the Secretariat, agree to abide by, regarding prevention and response to fraud and corruption.

CARE International has zero tolerance for fraud and corruption

CI recognizes that fraud and corruption is a prevalent issue, and has harmful effects on employees, the organization, partners, and society, and is a threat to our vision.

Fraud and corruption awareness, prevention, reporting, and response are critical parts of the accountability and compliance culture at CI and are of great importance to our impact groups, employees, partners, donors, counterparts, and other CI stakeholders. Our internal and external stakeholders have a right to expect that we conduct all our activities to the highest ethical standards.

This policy sets out the minimum standards and procedures that all CI is obliged to follow.¹

This policy addresses the awareness, prevention, identification, reporting, investigation and close-out of fraud and corruption at CI.

Where the donor regulations are more restrictive, those regulations must be complied with and incorporated in our work.

CARE staff are required to be watchful for fraud, corruption, or any suspicious behavior, and report it to appropriate management or/and the whistleblower hotline. All reported incidents will be appropriately investigated, disclosed to relevant management, governance body and the donor, and remediated and closed out.

2. Scope of Application

This policy and related procedures apply to all CI entities, personnel, persons and entities, board members, and volunteers involved in CARE financed projects, including, but not limited to, those located at country offices, sub-offices, and headquarter offices. This policy also applies to CI related third parties, including any of CI’s agents, consultants, vendors/suppliers, partners, or counterparts.

This policy places the ultimate responsibility for managing fraud and corruption at the CI Member, Affiliate, Candidate, and Secretariat level, and is not intended to replace existing fraud and corruption reporting or management processes if they are consistent with this policy. Any conflict shall be superseded by this policy.

3. Definitions and Examples

Fraud and corruption are the act of intentionally deceiving someone to gain an unfair or illegal advantage of any value, or the abuse of entrusted power for private gain (financial, political, or otherwise). Fraud and

¹ See CI Code Section 3, Chapter 5, 3.J - accountability and compliance.
Corruption could lead to increased prices, decreased quality or performance of the project, and could impact CARE’s performance and reputation. See Attachment A for examples.

4. Policy Details

4.1 Fraud and Corruption Intolerance and Reporting Obligations: It is everyone’s organizational ethical and moral responsibility, consistent with CARE’s values, to raise concern about an alleged wrongdoing including corrupt, illegal, or unethical behaviors in the organisation. Any incidence of fraud or corruption or suspicious behavior must be reported to appropriate senior management and/or “CARE Line”, the whistleblower hotline as set forth in Attachment B.

An employee blowing the whistle must reasonably believe the following:

✓ They are acting in the public interest (i.e. not for personal/private gain).
✓ The allegation shows potential past, present or future wrongdoing.
✓ Their identity will be kept strictly confidential.
✓ Their job and future with the organisation will not be affected.

4.2 Internal Escalation Process: All CI Members, Affiliates, Candidates, and the Secretariat will have in place a transparent internal escalation process (i.e. an internal complaints and investigations handling protocol) to ensure appropriate management awareness and expeditious handling, resolution, and donor notification via the CI Member Partner (CMP) contract holder (as applicable), as set forth in this policy. In consideration of local context and donor requirements, if any, CARE requires to the maximum extent possible, reporting fraudulent and corrupt behavior to authorities in any given country. Any exception must be justified in writing by the respective Chief Executive Officer, Country Director or Representative. Additionally, each CI Member, Affiliate, Candidate, and Secretariat, should pursue civil claims against those who commit fraud and corruption, to the maximum extent practicable (based on for example: cost/benefit analysis, local context, or financial threshold, etc.).

4.3 Safety: The process of investigation will assess potential dangers and risks to all parties and incorporate ways to prevent injury or harm.

4.4 Sufficiency of Investigations: Fraud and corruption and allegations of fraud and corruption will be appropriately investigated after considering severity, credibility, potential for reputational damage, and applicable donor requirements. Investigations will generally be led by an appropriate business function as set forth within each CI Member, Affiliate, Candidate, and Secretariat, with input from relevant management and external resources as necessary, including, but not limited to, legal counsel, external audit firms, etc. Any costs, including investigations, audit, etc. shall be borne consistent with the CI Code.

4.5 Confidentiality of Reports and Investigations, and Non-Retaliation: Any report of alleged or actual fraud and corruption submitted pursuant to this policy must be treated confidentially, to the fullest extent practicable. Reports of fraud and corruption or suspected fraud and corruption may be submitted anonymously (anonymous reports can be submitted via “CARE Line”, for example). All investigation processes, report, and outcomes are to be kept confidential. If the management is suspected, it will not be their duty to receive such reports, or be responsible for managing their investigation, to avoid any conflict of interest. Only personnel with a ‘need to know’ should be advised of a report and any related investigation. It is the responsibility of CARE to ensure that whistleblowers are protected. Staff will not be retaliated against
for good faith reports.

4.6 Independence: Investigators must have no material, personal, or professional interest, in the outcome of the complaint, and no personal connection with any witnesses, especially the complainant and Subject of Complaint. It is preferable for investigators to not have any professional connection with the complainant and Subject of Complaint, however if there is professional connection, and a decision is made to not utilize an external and/or independent investigator, the professional conflict of interest should be declared and documented. Investigations must be conducted in a fair and equitable fashion. Evidence must be gathered and reported in an unbiased and independent manner to determine the validity of an allegation.

5. Procedures

These procedures are designed to ensure appropriate management, reporting, investigation, remediation, and close-out of allegations of fraud and corruption, as specifically set forth below.

5.1 Prevention and Awareness: Stringent financial and logistical controls and effective risk management are important lines of defense against fraud and corruption. Awareness raising and good accountability mechanisms also contribute to prevention. Each CI Member, Affiliate, Candidate, and the Secretariat, should ensure an environment where staff and concerned third parties feel they are able to report alleged or suspected fraud and corruption. This will help better identify and follow up on cases. All CARE staff and concerned third parties must be informed what wrongdoing they can report, and what reporting channels CARE makes available for raising concerns of wrongdoing.

Each CI Member, Affiliate, Candidate, and the Secretariat, is responsible for periodically advising and training its staff, sub-grantees, and partners of the content of this policy, and for monitoring its implementation in activities for which the CI Member, Affiliate, Candidate, or Secretariat, is the responsible party. Each CI Member, Affiliate, and Candidate should also ensure that sub-grantees and partners have appropriate measures to prevent fraud and corruption. Written agreements with external parties should, to the maximum extent possible, include a written reference to CI’s zero tolerance of fraud and corruption, and how it should be managed. See Attachment C for form.

5.2 Obligations to Report Fraud and Corruption Wrongdoing: All CARE employees, vendors, suppliers, agents, and partners share an obligation to report alleged incidents of fraud or corruption. All CARE entities and the offices under their responsibility will make available and known to such groups, the channels through which reports of fraud and corruption wrongdoing can be made, i.e. report to management, report using “CARE Line” (CARE’s whistleblower hotline where reports can be made anonymously as described in Attachment B). Training must be provided in how to report using “CARE Line”. All CARE International Implementing Presences will also raise awareness with program participants and the communities where CARE works, of the expected behaviours of CARE employees and partner staff, and that CARE does not tolerate fraud and corruption. Appropriate and safe feedback and accountability mechanisms (FAMs) will be developed as part of all CARE projects/ programs and made known to program participants and communities for raising concerns or reporting alleged fraud and corruption. Any allegation received via another reporting channel other than “CARE Line”, must be backlogged into CARE Line by the CI Member,

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2 See CI Code, Section 3, Chapter 5, 3.E – fraud training obligations.
3 See CI Code, Section 3, Chapter 5, 3.F – engagement with partners.
5.3 Internal Reporting within and between CARE International Members, Affiliates, Candidates, and the Secretariat: Upon awareness of alleged or suspected fraud and corruption, appropriate management, or their designate, will inform immediately (within three business days unless sooner is specified by a relevant Individual Project Implementation Agreement (“IPIA” between a CARE Member Partner and CARE International Implementing Presence), the appropriate senior management within the CI Member, Affiliate, Candidate, or Secretariat, using a completed Initial Investigation of Suspected Fraudulent and Corrupt Act Report found at Attachment D. Any CI Member Partner, if different from the CI Lead Member, providing funding or support to a project implicated by an alleged fraud shall also be immediately notified and shall be an integral part of determining next steps, provided that the specific timing of any specific report shall be consistent with the CMP contract holder and/or its donor. The report will include, if possible, a determination of the approximate amount of the suspected fraud, and whether the suspected fraud requires donor reporting. Depending on the nature of the allegations, other units may be consulted, including Finance, HR, Security, CI’s Crisis Event Communications Team, etc., as necessary, and applicable. A Reporting Diagram and RACI Chart are attached at Attachment E and Attachment F.

5.4 Appropriate Investigation, Report and Follow-Up: Each CI Member, Affiliate, Candidate, and the Secretariat, will specify steps to receive and investigate reports of fraud and corruption promptly, i.e. internal complaints and investigations handling protocol. All allegations of fraud and corruption must be case managed, with documented investigations, within “CARE Line”. Alleged fraud or corruption will be investigated and documented commensurate with severity, credibility, confidentiality, potential for reputational damage, and applicable donor requirements. The CMP holding the donor contract should be consulted for guidance on conducting and reporting an investigation (see Attachments E and F). The outcomes of an investigation must be reported to the CMP, Donor, and any Whistleblowers shall also be advised in appropriate detail as to the outcome of the investigation. CARE will take action in relation to any employee found to have committed fraud or corruption. This may include administrative or disciplinary action, legal action, and/or referral to the relevant authorities which could result in criminal prosecution in the persons country of original as well as host country. All actions will be informed by an assessment of feasibility and risk to all those involved. A matter will be considered closed by agreement of all concerned parties when outcomes of an investigation and any necessary related remediation activities are satisfactory to each implicated CI Member, Affiliate, Candidate, Secretariat, and relevant donor.

5.5 Donor Reporting: The CI Member, Affiliate, or Candidate, that is the Donor contract holder (the CI Member Partner) is responsible to ensure compliance with donor reporting guidelines on fraud and corruption and overall assessment of donor implications, but may delegate donor engagement to another office or appropriate party. Donor(s) must be notified of alleged fraud or corruption according to their specific regulations (some Donors require 3 business days), or immediately (maximum within one week) if there is no specified donor regulation. Donor reporting should be specified in an Individual Project Implementation Agreement (“IPIA”) between a CI Member Partner (“CMP”) and CARE International Implementing Presence. The implicated CMP(s) will cooperate with any requests from a Donor relating to

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4 Please refer to the relevant CI entity for clarity on cc donor expectations regarding reporting templates and timeframe if any. <e.g. Fraud, corruption and diversion: Any credible suspicion of or actual fraud, bribery, corruption or any other financial irregularity or impropriety should be reported to FCDO within 24 hours of it being identified via email, and then narrative report>.
an ongoing investigation, as applicable.

5.6 Follow up and Learning: Learning from reports of fraud and corruption, and investigations, need to be integrated into adjusting programs, policies, and practices.

6. Responsibilities - Reference the Anti-Fraud and Anti-Corruption RACI Chart:

6.1 All Staff, Partners, Recipients, Agents, Consultants and Vendors/Suppliers
- Act according to the legal and ethical standards and expectations
- Be aware that robust systems of internal controls and processes reduce the risk of fraud
- Be watchful for fraud and corruption at CI or any related third parties, including agents, consultants, vendors/suppliers, and partners
- Report to appropriate senior management or “CARE Line”, the whistleblower hotline
- Cooperate with any investigation into allegations of fraud or misconduct

6.2 CI Management
- Maintain an adequate control environment, perform regular risk assessments, implement appropriate procedures and internal control activities, ensure sufficient information communication and monitoring of the whole control system is in place
- Maintain policies and procedures to detect fraud and corruption
- Develop guidelines to ensure clarity of roles and responsibilities and make sure they are known
- Sensitize staff and partners about the fraud and corruption risk in the local environment regularly, act transparent and encourage open discussion on challenges
- Develop and promote anti-fraud culture across the organization
- Train staff regularly on this policy and donor regulations
- Make the policy and whistleblower channels available for all personnel, persons and entities, board members, partners, volunteers, vendors/suppliers, and impact groups in all places where CARE is operational
- Require staff to report suspicions, allegations, or known fraud and corruption
- Acknowledge receipt of complaints in timely manner
- Ensure transparency of the escalation process
- Maintain confidentiality of reports and investigations of fraud and corruption and protect whistleblowers who raise concerns in good faith from retaliation
- Appropriately investigate or establish an appropriate person or team to investigate allegations of fraud and corruption timeliness
- Ensure designated case managers/ investigators use “CARE Line” for logging and case managing all 5 Management in general in all CARE entities and levels
allegations of fraud and corruption.

- Coordinate with the funding CMP(s), as applicable
- Ensure implementation of any required or recommended remediation activity
- Activate the CI Crisis Event Communications Team\(^6\) if risk to reputation or of external exposure
- Implement non-tolerance sanctions against staff and persons/entities involved with CARE’s financed projects, or any other aspect of CARE’s work, who committed fraud and corruption
- Communicate appropriately on the sanctions taken in case of fraud and corruption
- Put in place appropriate protection measures against cybercrime and/or identity theft
- Put in place appropriate measures to prevent any malicious use of internet and IT documents or messages
- Ensure a clear feedback mechanism in case of consortium

Subject to the confidentiality requirements set forth in Section 5.5, the personnel designated above may delegate their responsibilities to a qualified individual. However, the ultimate accountability for specific responsibilities set forth in this policy remains with the original designee.

7. Governance and Accountability

The CI Secretariat will coordinate oversight of this policy in collaboration with CI Members, Affiliates and Candidates, and review and update according to the timeframe specified in the policy. The CI Secretariat will monitor and report against this policy utilizing standardized data with appropriate levels of confidentiality for global accountability. Each CARE entity must be able to track and report on all allegations that they are responsible for handling. CARE entities must make available information about fraud and corruption to the CI Secretariat if requested and escalate information about fraud and corruption that may cause institutional risks. Any external reporting other than to donors requires the prior agreement of the CI Crisis Event Communications Team (CECT).

8. References

Attachment A: Examples of Fraud and Corruption
Attachment B: Description of Anti-Fraud and Corruption Reporting Hotline (“CARE Line”)
Attachment C: Suggested Language for Contracts with External Parties
Attachment D: Initial Investigation of Suspected Fraudulent Act Report
Attachment E: Anti-Fraud and Corruption Reporting Diagram
Attachment F: Anti-Fraud and Anti-Corruption RACI Chart

\(^6\) Contact the CI Head of Communications for the CECT
Attachment A

Examples of Fraud and Corruption

A corrupt practice is any act of a person who uses their position for dishonest gain. These include offering, giving, receiving directly or indirectly to influence improperly actions of another party for her/his or another person benefits. Examples of Corrupt Practices may include, but are not limited to:

- Inducing another to part with some valuable item or surrender a legal right
- Nepotism
- Bribery, kickbacks and/or gratuities
- Collusive behavior with vendors/suppliers
- Embezzlement, and theft
- Receiving or providing financial and non-financial favors with the intent of facilitating activities that the person may not normally receive
- Accepting or seeking anything from suppliers or persons providing services/materials as provided by applicable policies on gifts. The type and value of acceptable gift depend on each CARE’s office.

A fraudulent practice is any dishonest act that lead to misrepresentation or mislead of material fact to obtain a financial or other benefit or avoid an obligation. Examples of Fraudulent Practices may include, but are not limited to:

- Forgery or alteration of any document or account (including, but not limited to timesheets, payroll, accounts, travel and expense reports, procurement documents or inventory/asset registers)
- Forgery or alteration of a cheque, bank draft, or any other financial documents
- Misappropriation of funds, commodities, securities, supplies, equipment, or other assets
- Impropriety in the handling or reporting of money, financial transactions, or bidding procedures
- Destruction or misappropriation of records, furniture, fixtures, or equipment
- Diversion, alteration, or mismanagement of documents or information, and/or any similar or related irregularity
- Any malicious use of internet and IT documents or messages
- Conflict of interest
- Intentional concealment, omission, falsification or perversion of truth
- Keeping false records,
- False claims (e.g. requesting payment for goods, services or activities not actually performed)
- Cybercrime and/or identity theft
Attachment B

CARE International Whistleblower Hotline or “CARE Line”

CARE is committed to preventing, detecting and correcting fraud, misappropriations, discrimination, sexual harassment, exploitation and abuse, support of terrorism, and other wrongful conduct.

We want to know if you suspect, or have observed or experienced, wrongful conduct. The earlier we find out that something is going wrong in our organisation the sooner we can do something about it. We encourage you to share any concern that you may have.

Reporting Responsibility/Right to complain

Any CARE employee or volunteer, partner, vendor/supplier, programme participant, or other outside party, may use this service to report wrongful conduct or a suspicion of wrongful conduct.

What to include in the reporting:

In the report, if possible, include information on WHAT was the indication of fraud/corruption, WHERE was the location, WHEN it happened, WHO was involved and HOW it happened (method, mode, etc).

Confidentiality, No Harassment or No Retaliation:

All reports of wrongful conduct will be taken seriously. Reports may be submitted anonymously, and will be kept confidential to the greatest extent possible, consistent with the need to conduct an adequate investigation.

Initial investigation will be done promptly to verify the validity of the report to determine whether the investigation will be continued or not.

We will treat disclosures of wrongful conduct seriously and protect those who raise concerns in good faith. No employee will suffer harassment or retaliation.

On this site you may report a concern online or by phone. You may also follow up on a report.

To make a report on the hotline, you may:

● Go to http://www.care.ethicspoint.com, click on “Make a Report”, and follow the instructions.
● Call the hotline using a country-specific telephone access number that may be found at http://www.care.ethicspoint.com. An operator is available for over 100 languages.

If you have any questions, please email legal@care.org
Attachment C
Suggested Language for Agreements with External Parties

Fraud and Corruption. CARE International (CI) does not tolerate fraud and corruption, and we expect the same from everyone with whom we work. [insert outside party defined term] shall maintain and comply with written codes of conduct and policies and procedures that protect against any form of fraud and corruption, bribery, kickbacks, conflicts of interest, and others. Upon request, [insert outside party defined term] shall share with CI its applicable codes of conduct, policies and procedures. [Insert outside party defined term] shall inform CI immediately (within twenty-four hours) and in writing of any instance of actual or suspected fraud or corruption related to its work hereunder and shall respond promptly to and fully cooperate with any investigation CI or any donor, in their discretion, may require. [Insert outside party defined term] shall make all staff aware of and encourage reporting of any suspected or actual fraudulent or corrupt behavior to CI’s global whistleblower hotline located at http://www.care.ethicspoint.com, which enables confidential internet reporting of fraud by clicking on the “Make a Report” tab, and provides country-specific telephone access to report fraud with translations available in over 100 languages. [Insert outside party defined term] shall be financially responsible for any losses due to fraud, and shall promptly refund such amounts to CI.
Attachment D
Initial Investigation of Suspected Fraudulent Report

Pursuant to CI’s Policy on Fraud and Corruption Prevention, Awareness, Reporting and Response, each CI office or entity receiving an allegation of fraud or corruption must complete and submit this report immediately (maximum within one week) or according to donor regulations, whichever is shorter as specified in an IPIA). This form should be submitted in all cases regardless of donor, amount, or materiality, and should be submitted prior to a full investigation. The CARE Manager or their delegate should transmit this document electronically to the appropriate senior management. One or two sentence responses to each item below are sufficient for purposes of this initial report. If the answers are not known at the time of report submission, simply write “Not known yet”.

1. CARE Office or Entity: ________________________________

2. Donor(s) and project(s) compromised: ________________________________

3. Date of discovery: ________________________________

4. Method of discovery: ________________________________

5. Date reported to funding CARE International Member Partner (if applicable): ________________

6. Details: ____________________________________________________________________________

7. Amount or value (estimate if necessary): ________________________________

8. Initial internal control weaknesses or systems failures identified: ____________________________________________________________________________

9. Initial remedial actions taken: ____________________________________________________________________________

10. Potential for additional related fraud or corruption losses: ____________________________________________________________________________

11. Initial determination of fraud/corrupted amount: ____________________________________________________________________________

12. Initial determination if donor reporting is required: ____________________________________________________________________________

[Attach additional pages or attachments if necessary]
Attachment E

CARE Fraud and Corruption Reporting Diagram

- **Incident observed**
  - Email/mail/verbal ad hoc report
  - Complaint documented by Receiver

- **Initial Investigation**
  - CARE entity responsible for handling and investigation receives report of incident
  - Care line used

- **Information Sharing**
  - Country Office (CO)
  - CMP
  - Responsible CARE entity
  - External Investigator
  - System Action

- **External Investigation required?**
  - Yes
    - Resources and contracting processes
    - External party investigation
  - No
    - Country Office and/or responsible CARE entity investigation

- **Next review date:** 1st July 2024
- **Policy commenced:** 1st February 2018
- **Effective from:** 1st July 2022
- **Approved:** 10th June 2022
- **Policy Owner:** Finance Directors’ Working Group
**Attachment F**  
**CARE International Anti-Fraud and Corruption RACI Guideline**

<table>
<thead>
<tr>
<th>Definition</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Responsible</td>
<td>The role or person or entity that is ‘Responsible’ for performing the work. In other words, the ‘doer’ of the task or activity. The ‘Responsible’ need not be accountable for that task, even though in some cases the same person can be ‘Responsible’ and ‘Accountable’.</td>
</tr>
<tr>
<td>Accountable</td>
<td>The entity who has the final authority and accountability to a given task. For any given task, there is only one entity accountable.</td>
</tr>
<tr>
<td>Consulted</td>
<td>Entities/people/roles whom we consult and get advice from before and during performance of the task</td>
</tr>
<tr>
<td>Informed</td>
<td>Informed are the entities/people/roles who we inform after we complete the task.</td>
</tr>
<tr>
<td>Allegation</td>
<td>An assertion that someone has done something wrong.</td>
</tr>
<tr>
<td>Confidentiality</td>
<td>All aspects of a complaint are confidential, namely the fact and nature of the complaint, the identity of the key participants (the complainant, the survivor, the Subject of Complaint, and witnesses) and the investigation.</td>
</tr>
<tr>
<td>Entity</td>
<td>A term representing an independent legal part of CARE</td>
</tr>
<tr>
<td>Office</td>
<td>The part of CARE which is initially notified of a suspicious activity</td>
</tr>
<tr>
<td>Limits of responsibility</td>
<td>Each CARE entity is responsible only for offices that they directly manage/oversee (if any). CMPs are responsible for the relationship, role and regulations related to the specific donors that they have contracts with. No entity is expected to be responsible for activities that are not in its domain of control.</td>
</tr>
<tr>
<td>Whistle-blowing</td>
<td>To report concerns or suspicions of misconduct by colleagues. The reports may concern people at other organisations and people at other levels in the organisation’s hierarchy.</td>
</tr>
</tbody>
</table>

- See CI Code, Section 3, Chapter 5.2 for definitions and roles and responsibilities performed within CI.
<table>
<thead>
<tr>
<th>Function</th>
<th>Activity</th>
<th>Responsible</th>
<th>Accountable</th>
<th>Consulted</th>
<th>Informed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Prevention and awareness (entity’s own offices and overseas offices that they manage)</td>
<td>a. Orientation and training for new staff, partners, refresher trainings.</td>
<td>Office</td>
<td>CI Member, Affiliate, Candidate, Secretariat</td>
<td>CMPs</td>
<td>CMPs</td>
</tr>
<tr>
<td></td>
<td>b. Systems review, spot-checks, internal audits.</td>
<td>Office, CMP</td>
<td>CI Member, Affiliate, Candidate, Secretariat</td>
<td>CMPs</td>
<td>CMPs, Donor</td>
</tr>
<tr>
<td></td>
<td>c. Internal controls in place</td>
<td>Office</td>
<td>CI Member, Affiliate, Candidate, Secretariat</td>
<td>CMPs</td>
<td>CMPs</td>
</tr>
<tr>
<td></td>
<td>d. Donor regulations, policies and reporting procedures,</td>
<td>CMP</td>
<td>CI Member, Affiliate, Candidate</td>
<td></td>
<td>Donor, Donor</td>
</tr>
<tr>
<td></td>
<td>e. Fraud Focal point in place</td>
<td>Office</td>
<td>CI Member, Affiliate, Candidate, Secretariat</td>
<td>CMPs</td>
<td>CMPs</td>
</tr>
<tr>
<td></td>
<td>f. Communication in workplace, in program place</td>
<td>Office</td>
<td>CI Member, Affiliate, Candidate, Secretariat</td>
<td>CMPs</td>
<td>CMPs</td>
</tr>
<tr>
<td></td>
<td>g. People training in fraud investigation are in place</td>
<td>Office</td>
<td>CI Member, Affiliate, Candidate, Secretariat</td>
<td>CMPs</td>
<td>CMPs</td>
</tr>
<tr>
<td>2) Violation alert (tip-off, verbal or written report)</td>
<td>a. Report made through any channel (“CARE Line”, email, verbal, local feedback and accountability mechanism, etc) received and shared to entity responsible for handling and investigation.</td>
<td>Office, or CI Member, Affiliate, Candidate or Secretariat</td>
<td>CI Member, Affiliate, Candidate or Secretariat</td>
<td>CI Member, Affiliate, Candidate, or Secretariat</td>
<td>CI Member, Affiliate, Candidate, or Secretariat</td>
</tr>
<tr>
<td></td>
<td>b. Report made through any channel, received and shared to implicated entities.</td>
<td>Office, or CI Member, Affiliate, Candidate or Secretariat</td>
<td>CI Member, Affiliate, Candidate, or Secretariat</td>
<td>CMP</td>
<td>Implicated CMP</td>
</tr>
<tr>
<td>3) Initial Investigation</td>
<td>a. Allegation received via any channel backlogged and case managed in</td>
<td>Office</td>
<td>CI Member, Affiliate, Candidate or Secretariat</td>
<td>CMP</td>
<td>Implicated CMP</td>
</tr>
<tr>
<td></td>
<td>“CARE Line”</td>
<td>Secretariat</td>
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<tr>
<td>b.</td>
<td>Conduct initial investigation.</td>
<td>Office</td>
<td>CI Member, Affiliate, Candidate or Secretariat</td>
<td>CMP</td>
<td>Implicated CMP</td>
</tr>
<tr>
<td>c.</td>
<td>Results are shared in preliminary report along with recommendation for further /larger investigation.</td>
<td>Office</td>
<td>CI Member, Affiliate, Candidate or Secretariat</td>
<td>CMP</td>
<td>Implicated CMP</td>
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<tr>
<td>d.</td>
<td>Reporting back to complainant if necessary.</td>
<td>Office</td>
<td>CI Member, Affiliate, or Candidate</td>
<td>CMP</td>
<td>Implicated CMP</td>
</tr>
<tr>
<td>e.</td>
<td>Initial donor report.</td>
<td>CMP</td>
<td>CMP &amp; CI Member, Affiliate, or Candidate</td>
<td>CI Member, Affiliate, or Candidate</td>
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<tr>
<td>4) Reporting and corrective actions</td>
<td></td>
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</tr>
<tr>
<td>a.</td>
<td>Action / corrective action plan developed and shared.</td>
<td>Office/ CI Member, Affiliate, Candidate, or Secretariat</td>
<td>CI Member, Affiliate, Candidate or Secretariat</td>
<td>CMP</td>
<td>Implicated CI Member, Affiliate, Candidate or Secretariat</td>
</tr>
<tr>
<td>b.</td>
<td>Donor report.</td>
<td>CMP</td>
<td>CMP</td>
<td>CMP</td>
<td>Office, CI Member, Affiliate, or Candidate</td>
</tr>
<tr>
<td>c.</td>
<td>Implement appropriate sanctions and corrective measures</td>
<td>Office/CI Member, Affiliate, Candidate or Secretariat</td>
<td>CI Member, Affiliate, Candidate or Secretariat</td>
<td>CMP</td>
<td>Implicated CMP</td>
</tr>
<tr>
<td>5) Major Investigation</td>
<td></td>
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<td>a.</td>
<td>Sourcing external assistance if needed (e.g., TOR, cost, etc.)</td>
<td>Office/CI Member, Affiliate, Candidate, or Secretariat</td>
<td>CI Member, Affiliate, Candidate, or Secretariat</td>
<td>CMP</td>
<td>Implicated CMP</td>
</tr>
<tr>
<td>b.</td>
<td>Draft report and recommendation produced and shared.</td>
<td>Office/CI Member, Affiliate, Candidate or Secretariat</td>
<td>CI Member, Affiliate, Candidate, or Secretariat</td>
<td>CMP</td>
<td>Implicated CMP</td>
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<td>c.</td>
<td>Feedback for report finalization.</td>
<td>Office/CI Member, Affiliate, Candidate or Secretariat</td>
<td>CI Member, Affiliate, Candidate, or Secretariat</td>
<td>CMP</td>
<td>Implicated CMP</td>
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