

Whistleblowing Policy

1. Purpose

Provide employees of GAP with the names of persons to whom they can disclose a serious wrongdoing and a process under which disclosure can be made.

Advise employees disclosing serious wrongdoing of the protections available to them (e.g. identity kept confidential, protection from civil and criminal liability).

Ensure that all serious wrongdoings are investigated appropriately and that specific action is taken to remedy any wrongdoing.

Ensure that employees are aware of alternative persons/organisations that they can disclose serious wrongdoings to when the internal procedure is not appropriate.

2. Applicability

The policy applies to all individuals engaged with GAP, whether in paid or unpaid capacity in both New Zealand and overseas, including:

- Trustees
- Staff
- Volunteers
- Consultants
- Programme partners
- Suppliers

3. Scope

This policy applies to serious wrongdoing, including but not limited to:

- Financial malpractice, fraud, corruption, or misuse of funds
- Failure to comply with legal, regulatory, or contractual obligations
- Risks to health, safety, or the environment
- Criminal offenses or activity
- Sexual exploitation, abuse, or harassment (SEAH)
- Any form of child abuse or child safeguarding breach
- Improper, unethical, or dishonest behaviour, including breaches of the Code of Conduct
- Gross mismanagement
- Attempts to conceal any of the above

This policy is intended for matters that have organisational, legal, ethical, or safeguarding significance, rather than routine operational grievances.

4. Which Process To Use

Use the following guide to route concerns to the correct GAP process. Where a matter involves serious wrongdoing, it may be raised under this whistleblowing policy even if another process also applies.

- **Safeguarding (SEAH / child protection):** Raise immediately under GAP PSEAH Policy (SPS OP 712) and/or GAP Child Protection Policy (SPS OP 713).
- **Complaints from community members, beneficiaries, or partners:** Use the GAP Complaints Response Mechanism (SPS OP 723), unless the issue also involves serious wrongdoing.
- **Fraud, corruption, or systemic operational risk:** Raise under this whistleblowing policy and ensure escalation in line with the Risk Management Policy (SPS OP 722).
- **Routine employment or operational issues (non-wrongdoing):** Use relevant management/HR processes rather than the whistleblowing channel.

5. Guiding Principles

5.1. Protection from retaliation

GAP will use its best endeavours to keep the discloser's identity confidential and ensure there is no retaliation. Protection from retaliation applies to all individuals covered by this policy, including staff, contractors, volunteers, Board members, and external partners. GAP will take all reasonable steps to prevent, identify, and respond to retaliation, including interim protective measures where required.

5.2. Confidentiality

All disclosures will be handled in a confidential and sensitive manner. The identity of the individual raising the concern will be protected to the extent possible, subject to legal requirements and the need to conduct a fair and effective investigation. Information relating to a disclosure will be stored securely and accessed only by authorised individuals directly involved in assessment, investigation, or oversight, in accordance with GAP's information management and privacy obligations.

5.3. Good faith disclosures

Individuals who raise concerns honestly and in good faith (genuine belief) will not be penalised, even if an investigation does not substantiate the allegations. Knowingly false, malicious, or vexatious allegations, or misuse of whistleblowing channels, may result in disciplinary action.

6. Reporting & Disclosure Procedures

Concerns may be raised verbally or in writing and should be reported as soon as practicable. GAP will follow the steps below:

1. Make a disclosure using one of the reporting options below.
2. GAP acknowledges receipt (where the discloser's contact details are available).
3. Initial assessment and triage, including routing to safeguarding, complaints, or risk processes where applicable.
4. Investigation (where required) and determination of appropriate actions.
5. Outcome actions, governance reporting (where required), and closure.
6. Secure recordkeeping in line with GAP's information management and privacy obligations.

6.1. Internal reporting

Disclosures should normally be made to the GAP Director. Where the concern involves senior management, or where the individual believes it is inappropriate to report to the GAP Director, disclosures may be made to the Chair of the Board of Trustees or another designated Trustee.

Where a concern is raised by an external party, the GAP staff member receiving the information must ensure it is escalated in accordance with this policy and must not intentionally conceal or disregard the disclosure.

6.2. External reporting options (New Zealand)

GAP recognises that in some circumstances individuals may prefer or require an external reporting channel. The process is available via the GAP website. Options include:

- **CID (independent reporting channel):** GAP has designated CID as an independent external whistleblowing reporting channel. Individuals may report concerns directly to CID where internal reporting is unsafe, inappropriate, or has not resulted in adequate action.
- **An "appropriate authority":** Depending on the nature of the concern, an individual may report to an appropriate authority (for example, the Ombudsman, Serious Fraud Office, or WorkSafe).
- **Ombudsman advice:** If you are unsure which option to use, or when the internal procedure is not appropriate, you can contact the Ombudsman New Zealand for advice.

7. Investigation

The GAP Director (or a delegated investigating officer) is responsible for ensuring disclosures are assessed promptly and investigated appropriately and without undue delay.

Where a decision-maker or investigator has a conflict of interest (including where they are implicated in the disclosure), they must step aside and an alternative decision-maker or independent investigator will be appointed.

As a guide, GAP will aim to:

- acknowledge receipt within five working days (where contact details are available), and
- complete an initial assessment within ten working days. Timeframes may vary depending on seriousness, complexity, and safeguarding or legal requirements.

Investigations will be conducted in a manner that is fair, proportionate, and sensitive to the nature of the concern. Where there is evidence of criminal activity, the matter will be referred to the appropriate authorities.

8. Response

Where lawful and appropriate, the discloser will be informed that the matter is being addressed and may be provided with general information about the outcome. Feedback may be limited by confidentiality, privacy, employment processes, safeguarding considerations, or legal constraints.

9. Escalation & Governance Oversight

Serious, systemic, or high-risk matters, including safeguarding concerns, fraud, or issues with significant reputational, legal, or financial implications, will be escalated in accordance with GAP's Risk Management Policy (SPS OP 722).

The Board of Trustees will be informed of material whistleblowing matters where required to fulfil its governance and oversight responsibilities.

10. Record Keeping & Information Management

GAP will maintain a secure record of whistleblowing disclosures and actions taken. Access will be restricted on a need-to-know basis to authorised personnel involved in assessment, investigation, oversight, and governance. Records will be retained and disposed of in line with applicable privacy and recordkeeping requirements and GAP's information management practices.

11. Associated documents

This policy operates alongside and complements the following GAP policies and procedures:

- SPS OP 297 Code of Conduct
- SPS OP 722 Risk Management Policy
- SPS OP 712 GAP PSEAH Policy
- SPS OP 713 GAP Child Protection Policy
- SPS OP 723 GAP Complaints Response Mechanism

Where concerns fall within the scope of safeguarding, complaints, or disciplinary processes, they will be managed in accordance with those procedures. Where necessary, GAP may run processes in parallel while managing confidentiality, safety, and procedural fairness.