ELOHIM FOUNDATION

Creating Alternatives, Promoting Sustainable Development.

CHILD AND ADULT RISK PROTECTION

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Approved by: Board of Trustees**.**

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ACKGROUND

Elohim Foundation was formerly known as The Carpenter's Foundation International, a non-for-profit development and humanitarian organisation founded on the 13th September, 2001 in Abuja –Nigeria. The foundation is the brainchild of Dr. Ibecheole, Julius a physically challenged Nigerian, set out to tackle the challenges of human family preservation through socio-economic intervention.

The Foundation was registered with Cooperate Affairs Commission as a non-for-profit organisation on the 29th April 2002 five years after it started operation in Egbu Owerri, Imo State on 27th of August, 1997. Following its registration, the foundation officially got inaugurated in Abuja on the 13th of September, 2001. And in 2006 its operational office in Niger state was established.

In 2005, 2010 and currently in 2024 Elohim Foundation has gone through strategic structural and program reviews by external consultant development firms with intent to strengthen its operational capacity, efficiency, productivity and impact in line with its broad goals and objectives while keeping in tune to emerging trends.

Elohim Foundation therefore is a system-based organisation with a history of best practices rooted through its dynamic operational policies and regulations, providing evidenced based services to a wide range of clients across Nigeria using dynamic strategic approaches such as partnerships, social movements, advocacy, right based approach, inclusivity, evidence based, research and conferencing.

GOAL

To contribute to the sustainability of the human community through eradication and impact mitigation of conflict and socio-economic challenges while promoting human capacity development.

VISION

Intact family for Sustainable human society.

MISSION

To provide intervention services that addresses the challenges of conflict and sustainable human society, through people centred approaches in both development and humanitarian setting.

Document Control

The Head of Human Development will be responsible for the periodic review of this document**.**

Document Responsibility

Title	Child and Adults at Risk Protection Procedure
Directorate	Chief Operating Officer
Unit	Human Development
Manager	Head of Human Development
Applicable to	All staff, board members, interns, students, consultants, Partners and other stakeholders

Document Revision History

Version	Approved By	Meeting Reference	Date Approved	Effective Date	Sections Modified
1	Senior Leadership Team	Online	27-Nov-25	1-aug-26	New Procedure

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1. Purpose

This procedure deals with anyone who has not yet reached the age of 18 years (child or minor) or an 'Adults at Risk', who is anyone who is 18 years or older and who is vulnerable (any person aged 18 years and over who is or may be in need of community care services by reason of mental health issues, learning or physical disability, sensory impairment, or unable to protect themselves due to age or illness and who may be unable to take care of themselves or unable to protect themselves against significant harm or serious exploitation). Safeguarding is the responsibility of the Centres to ensure that their people, programs and practices respect the rights and dignity of the people with whom the Elohim Foundation come in contact - especially children and adults at risk - so they can live free from abuse and harm.

In all Elohim Foundation locations and their engagements, this procedure aims to protect all persons, particularly children and adults at risk, as well as program participants, partners, service providers, and staff, from harm or abuse, which includes harm arising from the development, design and implementation of projects and the conduct of staff or individuals associated with Elohim Foundation

Elohim Foundation.

The Centres believe it is important that everyone understands this procedure, especially those who are visiting or working with communities. The purpose of this procedure is to ensure that the Centres' activities are implemented in a safe and protective environment where harm, exploitation and abuse are effectively prevented as far as reasonably possible and responded to effectively.

The procedure has the following specific objectives:

a) Supporting us to safeguard children, young people and Adults at Risk in practice, by defining abuse and informing us what to do.
b) Ensuring we all work with the same policy and procedures.
c) Making sure we are accountable for what we do.
d) Being clear about what roles and responsibilities we all have in safeguarding.
e) Setting out what staff can expect from the organisation to help them work effectively.

The Centres are committed to doing whatever they can to keep everyone safe, including those with special needs and disabilities.

2. Scope

The procedure applies to all staff, board members, interns, students, consultants, Partners and other stakeholders, including program participants, service providers and members of the communities in which Elohim Foundation work. These persons shall all adhere to this procedure.

3. Parent Policy

3.1. Safeguarding Policy.

4. Definitions

For the purposes of this procedure:

a) Children are defined as being someone under the age of 18 years.

b) Adults at risk are defined as those aged over 18 years and who are identified as unable to take care of themselves or protect themselves from harm or exploitation, or who, due to their gender, mental or physical health, disability, or as a result of disasters and conflicts, are deemed to be at risk.

5. Procedure

5.1. The Centres are committed to the six key principles that underpin all safeguarding functions, actions and decisions. These principles are relevant for safeguarding both children and adults at risk.

a) Empowerment - People being supported shall be encouraged to make their own decisions and give informed consent.
b) Prevention - It is better to take action before harm occurs; Elohim Foundation look for ways to reduce the risks of safeguarding violations and harm to Children, adults at risk, program participants, members of the communities in which we work, partners, our staff, service providers and Board members.
c) Proportionality - The least intrusive response appropriate to the risk presented, ensuring that any decision taken prioritizes the safety and well-being of children and adults at risk of harm and abuse.
d) Protection - Support and representation for those in greatest need, including how to detect and report abuse.
e) Partnership - Local solutions by working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
f) Accountability - Accountability and transparency in delivering safeguarding. All Elohim Foundation staff and their stakeholders are accountable as individuals, as project staff, as communities we work in and as teams.

5.2. All external stakeholders - including partners, contractors, suppliers, and collaborating organizations - must provide written acknowledgement of this procedure and agree to abide by its provisions. Non-compliance with safeguarding standards shall constitute grounds for termination of agreements, withdrawal of partnerships, or suspension of collaboration. The Centres shall maintain procedures to ensure safeguarding clauses are systematically incorporated into all contractual and partnership arrangements, and compliance will be subject to monitoring and review.

5.3. Types of Abuse

a) Physical Abuse - Purposefully injuring or threatening to injure a child or adult at risk. This may take the form of slapping, punching, shaking, kicking, burning, shoving or grabbing. The injury may take the form of invisible soft tissue, bruises, cuts, burns or fractures.

b) Emotional Abuse - Chronic attack on the adult at risk or the child's self-esteem. It can take the form of name-calling, threatening, ridiculing, intimidating or isolating.

c) Neglect - The failure to provide or ignore the need for basic necessities of life (where such necessities are available), such as food, clothing, shelter, medication and supervision.
d) Sexual Abuse - Rape, sexual assault or sexual acts to which an adult at risk has not consented to or has been coerced into consenting to through abuse and even through exchange for money or reward, or engaging a child sexually, forced marriage, female genital mutilation (FGM) and child trafficking. The activities constituting sexual abuse may involve physical contact, including penetrative contact (e.g. rape and buggery) or non-penetrative acts. They may include non-contact activities, such as involving children in seeing or receiving or sending sexually suggestive emails or text messages, or inappropriate behaviour in Internet chat rooms, involving children looking at, or in the production of, pornographic material or watching sexual activities, or encouraging children to behave in sexually inappropriate ways.
e) Financial or Material Abuse - Theft, fraud, exploitation, misuse or misappropriation of property, possessions or benefits.
f) Discriminatory Abuse - Ageism, bullying, racism, sexism, based on disability or other harassment.

5.4. Consequences of Abuse

Any behaviour towards children or adults at risk which results in harm, exploitation or abuse, or the failure to follow the general requirements and the Centre's code of conduct is grounds for the following measures:

a) The Centre's Representatives - If a staff, board member, intern or student has been under investigation by the Centres or by official law enforcement authorities for any area of harm, exploitation or abuse as defined under this procedure, they will be subject to staff disciplinary procedures. Under these procedures they shall be temporarily suspended during the investigation, and appropriate action taken at the end.
b) Consultants and other stakeholders - Appropriate action will be taken up to and including immediate termination of a relationship or contract. In this case, the short or long-term impact on beneficiaries of the termination of relationship shall be considered.

5.5. Reporting and Responding to Incidences

The Centres will ensure that reporting and incident management procedures to handle safeguarding concerns are in place and effectively used to enable an appropriate and swift investigation of any given case. The Centre's staff, board members, interns, students and consultants will regularly and properly be informed of the reporting and incident management procedures (whistleblowing and/or grievance in the Human Development Unit Policy and Procedure Manuals). Any of the Centre's representative who has a concern or suspicion regarding harm, exploitation or abuse by someone representing a third party must report such concerns to the Safeguarding Manager (Head of Human Development) or designated Safeguarding Focal Point (SFP). SFPs are staff in all the Centre's country offices that are charged with the task of implementing the safeguarding policy and procedure.

5.6. Investigation of Reports

The Centres shall ensure immediate action is taken to support and protect children and adults at risk where concerns arise regarding possible abuse. The Centres shall work closely with the Country Offices to follow the procedure below:

a) Receipt of Information
   Staff, board members, students, interns, consultants and other stakeholders shall report their concerns to the Centres' contact persons, i.e. Safeguarding Manager (SM) or SFPs. The SM and SFPs will then initiate investigations.

b) Initiating Investigation
   Investigations by the SM and/or SFP will commence in not more than 24 hours after reporting.

c) Distance the Alleged Perpetrator
   The best interests of the child or adult at risk may warrant suspension of the staff involved. This will be done in accordance with the Centres' current disciplinary procedure that aims to investigate and make a fair and formal decision in a timely manner.

d) Confidentiality
   Confidentiality is crucial to a fair and effective reporting procedure. It is unacceptable and potentially defamatory for concerns of abuse (and abusers) to be spread throughout the organisation rather than being directed through a formal complaints process. All participants must understand the importance of following the set reporting lines when concerns arise. Elohim Foundation commit to restricting access to and dissemination of information to only those with a need to know. Confidentiality helps create an environment in which witnesses are willing to share their versions of events and builds trust in the system and the organization. All reports and information received will be handled with the strictest confidentiality to protect the identity of the individuals concerned, the informer and the accused, both appropriately and in accordance with relevant local country laws.

e) Reprisal
   The Centres shall not tolerate any form of coercion, intimidation, reprisal or retaliation against any staff who reports any form of abuse or exploitation or provides any information or other assistance in an investigation.

f) Investigation of Complaints
   Physical and/or sexual abuse is a crime. The Centres are required to notify authorities (police, CID etc) when there are reasonable grounds for reporting abuse, on allegations made. Regions within which the Centres operate shall consider local country legislation and internal procedures to investigate and address the allegations. The Centres shall follow their current disciplinary procedure to investigate and take action.

g) Support for Survivors
   The Centres shall support victims by providing professional counselling.

h) Training of Staff
   The Centres will provide necessary training and support to staff, board members, interns, students, consultants and other stakeholders to ensure effective implementation of this procedure. In addition, the Centres will ensure that the Safeguarding Committee has the capacity and capability to fulfil their roles and will do this through training, support and the revision and updating of roles and responsibilities.

5.7. Complying with Local Laws, including reporting to the police

The following measures shall be taken by the Centres:

a) Each country shall have a Safeguarding Focal Person (SFP) in place with clear responsibilities for coordinating the implementation of the procedure as well as mapping the local and external context (including legislation) for safeguarding.
b) Each country shall refer to the safeguarding committee as the reference group which develops and reviews the country safeguarding plan annually based on this procedure, outlines the members of the reference group, contact details for the SFP, undertakes any specific contextual adaptations to the procedure (agreed with the Safeguarding Manager) and any advocacy, training and awareness plans.
c) The plan will specifically include a communications plan incorporating how it will be rolled out with donors, children, parents, and communities.
d) Each SFP will work with the Safeguarding Manager (SM) and Safeguarding Committee to assess any contextual issues with the procedure and develop country-specific procedures if relevant. These will include guidance for the Centres' staff, board members, interns, students and consultants about appropriate official reporting procedures in the case of an incident.
e) Country procedures will be reviewed each time the global safeguarding policy is reviewed, instigated by the SM, or the occurrence of a specific incident or if the national legislative environment changes, instigated by the SFPs.

If a staff is dismissed for proven harm, exploitation or abuse, the Centres shall inform the relevant authorities, disclose this to prospective future employers and/or refuse a reference, depending on details of the harm, exploitation or abuse.

5.8. Agreements with Partners

A partner due diligence is conducted by the PMU prior to engaging them through a contract or agreement. The due diligence procedure includes checks on partners' policies related to safeguards. Where partners do not have appropriate policies, but it is deemed essential that the Centres work with them, the partners will sign a compliance statement to confirm their commitment to comply with the Elohim Foundation policy. Additionally, Centres' policies are included in the contracts or agreements that are signed with the partner. Should the Centres be unable to enforce this procedure with stakeholders, the Centres may choose not to work with them, put specific conditions into contract agreements, or end relationships based on the Centres' policies and their implementation of safeguarding.

It is recognised that, for government partners in particular, national policy and legal frameworks take precedence. However, where the national legal framework is considered weaker than the Centres' policy, it may be a specific national advocacy activity to strengthen that framework, particularly with regard to provision for children and adults with disabilities.

5.9. Procedures for Preventing Safeguarding Incidents with Children and Adults at Risk

Our capacity to ensure the protection of children and adults at risk that we work with depends on the ability of staff to uphold and promote the highest standards of ethical and professional conduct. It is recognised that our work often puts us in positions of power in relation to children and adults at risk in the communities that we work with. The Centres have an obligation not to abuse this power.

The staff, board members, interns, students, consultants and representatives of the Centres are personally and collectively responsible for maintaining these standards. The Centres'

managers have a particular responsibility to uphold these standards, to set a good example, and to create a working environment that supports and empowers staff. These Standards are intended to serve as an illustrative guide for staff to make ethical decisions in their professional lives, and at times in their private lives.

While acknowledging that local country laws and customs may differ from one country to another, the Standards are based on international legal standards. The Standards apply to all staff members; any failure to uphold these standards will be a serious concern and may result in disciplinary action or dismissal, in accordance with the Centres' disciplinary procedures. Consultants, students and interns shall also receive the Standards and are expected to follow them.

It is expected that all staff, board members, interns, students, consultants, and stakeholders will:

a) Treat all children and adults at risk (and indeed all our beneficiaries) fairly and with respect and integrity, and be aware of the power that they can have over beneficiaries by virtue of their employment with the Centres.
b) Act in a way that seeks to care for and protect the rights of children and adults at risk and ensure that their best interests are of paramount consideration.
c) Safeguard and make responsible use of information and resources. This includes the exercise of due care in all matters of official business and not divulging confidential information about beneficiaries.
d) Uphold the integrity of the Centres, by ensuring that personal and professional conduct is, and is seen to be, of the highest standard.
e) Report any abuse by the Centres' staff, board member, consultant, intern, student or third party to the Director General or the COO and other appropriate authorities.
f) Ensure that another adult is present when working in the proximity of children or adults at risk. This will usually be a staff member from the Country Office.
g) Never request any service or favour from a beneficiary (including children or adults at risk) in return for protection or assistance.
h) Never engage in any exploitative relationships (sexual, emotional, financial or employment-related) with a beneficiary. This is regardless of the local age of consent, i.e., the local or national laws of the country. Failure to report such a relationship may lead to disciplinary action pursuant to the Centres' disciplinary policies and procedures.
i) Refrain from any involvement in criminal or unethical activities that contravene human rights.

The Centres will endeavour to follow these guidelines when photographing or filming a child or adult at risk for work-related purposes:

a) Assess and endeavour to comply with local traditions or restrictions for reproducing personal images.
b) Gain consent from the appropriate person. As part of this, the Centres' representative must explain how the photograph or film will be used.
c) Ensure images used to present beneficiaries (including children and adults at risk) in a respectful manner. Beneficiaries should not be presented in images that could be seen as sexually suggestive.
d) Ensure images are honest representations of the context and the facts.

5.10 Guidelines on Communicating with Children

a) The Centres will comply with the EU General Data Protection Regulation (GDPR) and all applicable national data protection laws when obtaining any personal data from children, as it is regarded as Sensitive Personal Data.
b) Do not harm any child - Avoid questions, attitudes or comments that are judgmental or insensitive to cultural values, that place a child in danger, or expose a child to humiliation, or that reactivate a child's pain and grief from traumatic events.
c) Ensure that the child and guardian know they are talking with an interviewer or reporter. Explain the purpose of the interview and its intended use.
d) Assess any potential risks to the child or children, including:
   i. Reprisals.
   ii. Stigmatization, rejection or attacks by family or communities. iii. Legal prosecution. iv. Misguided or malicious attempts by outsiders to "rescue" the child from a difficult situation.
e) No staging - Do not ask children to tell a story or take an action that is not part of their own history. Do not ask children to promote products or services contributed by corporate supporters.

f) Obtain permission from the child and their guardian for all interviews, videotaping and, when possible, documentary photographs. When possible and appropriate, this permission should be in writing (Consent form is available in Annex 1). Permission must be obtained in circumstances that ensure the child and guardian are not coerced in any way and understand they are part of a story that might be disseminated locally and globally. This is usually ensured only if permission is obtained in the child's language and if the decision is made in consultation with an adult the child trusts.

g) Pay attention to where and how the child is interviewed. Limit the number of interviewers and photographers. Try to make certain that children are comfortable and able to tell their story without outside pressure, including pressure from the interviewer. In film, video and radio interviews, consider what the choice of visual or audio background might imply about the child and their life and story. Ensure that the child will not be endangered or adversely affected by showing their home, community or general whereabouts.
h) Pictures of adults and children should be decent and respectful and should not stigmatize the community, family or the individual. All children, both girls and boys, should wear decent clothing appropriate to the local customs.
i) If a child discloses bad practice during an interview (such as abuse, criminal activity or a violation of the Centres' policy), the person carrying out the interview should know the local procedures for reporting this. Staff should also be familiar with the Centres Child and Adults at Risk Safeguarding Policy and procedure.
j) No payments or any other form of compensation is to be provided to children or parents in exchange for their interview, photo or consent.
k) Pictures, materials and personal information regarding individuals will be held in a secure database and according to the appropriate Centres' data security protocols. Access to these materials will be only through a password-protected system. The misuse of images accessed will be treated in the same way as other breaches of this procedure. Applicable data protection laws for all stored images will be followed.

6. Reporting

6.1. Mandatory Reporting of Prohibited Conduct

All staff, board members, students, interns, consultants and stakeholders shall report in good faith Child and adults at risk allegations, concerns or suspicions or retaliation related to Child and Adults at Risk protection that they have witnessed, or know of, by other Centre's representatives, or by people employed by or working for hosted institutions or the community within which the Centres operate.

6.3. Confidentiality

Confidentiality must be maintained throughout the complaints process by all representatives, stakeholders and witnesses. Staff members, students, interns and consultants who breach confidentiality will be subject to disciplinary action up to and including termination of employment or relationship.

6.4. Support for Survivors

The Centres shall offer support to survivors and victims, whether or not a formal internal response is carried out (such as an internal investigation). Support can include specialist psychological counselling, access to other specialists and other appropriate support as needed. Survivors and victims can choose if and when they would like to take up the support options available to them.

The Centres shall also hold those responsible for sexual exploitation and abuse to account through the disciplinary process. In addition, a survivor-centric approach shall be adopted that respects the confidentiality and decision-making rights of survivors where possible and appropriate to do so.

6.5. Investigating Reports on Prohibited Conduct

The Centres' safeguarding team shall carry out independent and discrete investigations, recognising the rights and duty of care to everyone involved, including the complainant or survivor, witnesses and the person(s) accused.

6.6. No Retaliation for Reporting

The Centres shall take action against any staff, board members, interns, students, consultants or stakeholders, whether they are the subject of a complaint or not, who seek or carry out retaliatory action against complainants, victims or other witnesses. Representatives and stakeholders found to do this will be subject to disciplinary action, up to and including termination of employment or contract.

6.7. Consequence of False Reporting

It is rare that staff, interns, students, consultants, or other stakeholders are found to have raised allegations that they knew to be false. However, should a member of the above from the Centres or a third party are found to have made an allegation that they knew or had reason to believe to be false, they will be subject to disciplinary action, up to and including termination of employment or contract.

6.8. Disciplinary Consequence for Prohibited Conduct

Staff who contravene the Centres clearly stated expectations of their sexual conduct will be subject to disciplinary action that may result in summary dismissal. Board members, interns, students, consultants and stakeholders will have their relationship with the Centres terminated.

6.9. Reporting Prohibited Conduct to Donors, Law Enforcement and other Regulators

The Centres' safeguarding policies will be promoted throughout the engagement work with communities within which they work. Feedback from communities on the Centres' role, representative behaviours and complaints shall be actively sought. Designated, and ideally senior, Centres' staff, i.e. Principal Investigators, Project Managers, etc, shall present feedback to communities, stakeholders on changes made resulting from any complaints lodged. The Centres shall also work closely with law enforcement agencies (police, Investigative agencies, etc) as child and adults at risk protection allegations are criminal. Staff working directly with beneficiaries must complete training on how to receive complaints, how to work with law enforcement agencies and the disclosures they are allowed to make to donors, law enforcement agencies and other regulators.

6.10. Processes and Procedures to Ensure Compliance

The four practices of the current Child and Adults at Risk Protection Procedure provide the framework for the mechanism. These are:

a) Management and Coordination: Effective policy and procedure formulation and rollout; supportive arrangements; committed Themes/Units and a safeguarding committee committed to Child and Adults at Risk Protection.
b) Engagement with and support of local communities in which the Centres operate: Effective and comprehensive communication from the Centres' HQs to the field on
   i. What to do regarding raising beneficiary awareness on Child and Adults at Risk Protection Procedure.
   ii. How to establish effective community-based complaint mechanisms.
c) Prevention: Effective and comprehensive mechanisms to ensure awareness-raising on Child and Adults at Risk Protection Procedure amongst staff, board members, interns, students, consultants and stakeholders and ensuring safe recruitment and performance management.
d) Response: Internal complaints and investigation procedures are in place.

No.	Child and Adults at Risk Protection Minimum Operating Standards	Key Indicators
1.	Effective Policy and procedure Formulation and Roll Out.	• A policy and procedure stating standards of conduct, including acts of Child and Adults at Risk Protection, exists and a work plan to implement the policy and procedure are in place. • The policy and procedure or standards of conduct have been conveyed to the Centres and senior management on a continuous basis (i.e. during induction and refresher training).

2.	Collaborative Agreement.	• Respective clauses and codes of conduct are included in staff, board members, interns, students, consultants and stakeholders' contracts and other general contract conditions. • Procedures are in place to receive written agreements from stakeholders entering into collaborative arrangements with the Centres, and they are aware of and will abide by the standards of the Child and Adults at Risk Protection procedure or face attendant sanctions.
3	Safeguarding Committee and a dedicated Focal Point Committed to Child and Adults at Risk Protection.	• The Safeguarding Committee composition is available in Annex I. The committee will organize training on Child and Adults at Risk Protection and the time committed to Child and Adults at Risk Protection is commensurate with the impact of implementation required under the current situation of the Centres. • The focal point will be the Principal Investigator (PI) in the Project Level or Country Director/Theme Leader. • The Chief Operating Officer has the overall responsibility for the development and implementation of Child and Adults at Risk Protection and activities and provide guidance to the PI. The COO to regularly report to senior management on its progress on Child and Adults at Risk Protection. • The Safeguarding Manager is the Head of Human Development. • Staff dealing with Child and Adults at Risk Protection responsibility in their job descriptions and performance contracts.

No.	**Child and Adults at Risk Protection Minimum Operating Standards**	**Key Indicators**
4	Effective and Comprehensive Communication from the HQs to field on the regarding expectations beneficiary raising Child and awareness on . Adults at Risk Protection	• The HQs have communicated in detail the expectations regarding beneficiary awareness-raising efforts on Child and Adults at Risk Protection (including information on the Centres' standards of conduct and reporting mechanisms). • The HQ has distributed examples of awareness-raising tools and materials to be used for beneficiary awareness-raising activities.
5	Effective community-based complaints mechanisms, including victim assistance.	• The HQs urge their field offices to participate in community-based complaint mechanisms that are jointly developed and implemented by the iNGO community and are to be adapted to the specific locations. • There is guidance provided to the field on how to design the community based complaints mechanisms to ensure it is adapted to the cultural context, with a focus on community participation. • There is a mechanism for monitoring and review of the complaint mechanism. • The Centres have written guidance on the provision of victim assistance.

6	Effective recruitment and performance management.	• The Centres make sure that all candidates are required to sign the code of conduct before being offered a contract and every subsequent year. • Each organisation commits to improving its system of reference checking and vetting for former misconduct(s). • Supervision and performance appraisals include adherence to participation in Code of Conduct trainings (or similar) that include Child and Adults at Risk Protection. • Performance appraisals for Senior Management include the adherence to create and maintain an environment and culture which prevents sexual exploitation and abuse and promotes the implementation of the Centres' code of conduct.
7	Effective and comprehensive mechanisms are established to ensure awareness-raising on child and adults at risk protection amongst the Centres' staff, board members, interns, students, consultants and other stakeholders.	• The Centres' staff, board members, interns, students, consultants and other stakeholders receive annual refresher training on the standards of conduct, learn about the mechanism of filing complaints and reports of misconduct and the implications of breaching these standards. • Training on misconduct on Child and Adults at Risk Protection is part of the induction process. • Staff members are aware of their obligation to report child and adults at risk or misconduct and are aware that there is a policy for protection from retaliation in place. And act promptly and non-defensively when things go wrong as well as using four key steps: identify, escalate, fix and learn. • Learning from things that go wrong, which is just as important as learning from things that are done well.
No.	**Child and Adults at Risk Protection Minimum Operating Standards**	**Key Indicators**
8	Internal complaints and investigation procedures in place.	• Written procedures on complaints and reports handling from staff, board members, interns, students and consultants or beneficiaries are in place. • The Centres' staff, board members, interns, students, consultants and other stakeholders are informed on a regular basis of how to file a complaint or report and the procedures for handling these. • Standard investigation operating procedures or equivalent issued and used to guide investigation processes. • Investigations are undertaken by experienced and qualified professionals who are also trained on sensitive investigations, such as allegations of child and adults at risk. • Investigations commenced within 3 months, and information about outcomes is shared with the complainant. • Substantiated complaints have resulted in either disciplinary action or contractual consequences, and if not, there is justification for why this is not the case.

7. Roles and Responsibilities

7.1. Board of Trustees

a) Review and approve policies and procedures for safeguarding and promoting the safeguarding of children and adults at risk.
b) Prompt action to be taken where there are concerns about a child's or vulnerable adult's safety or welfare, including thresholds for intervention.

7.2. Management

a) Ensuring training of staff, interns/students, consultants and other stakeholders takes place for those working with children or adults at risk.
b) Be involved in the safe recruitment of persons who work with children and adults at risk.
c) Providing guidance in the investigation of allegations concerning persons working with children and adults at risk.

7.3. Continental Directors, Theme/Team Leads, Country Leaders, Principal Invesigators (PI) and Heads of Units

a) PI will be the focal point for project level.
b) Ensuring the safety and welfare of children and adults at risk is guaranteed in all programme and project activities.
c) In coordination with SFPs, ensure training for personnel involved with Elohim Foundation projects is completed annually.
d) Liaising with SFPs when safeguarding concerns are reported and ensuring investigations are carried out not later than 24 hours of receipt of an allegation.
e) Guide SFPs and be involved as the SFPs work with local authorities during investigations.
f) Supervise all field activities and have meetings regularly with the field staff on safeguarding matters.
g) Reporting all safeguarding concerns to management.

7.4. HD and Legal Units

a) Receiving information or allegations on safeguarding matters and initiating investigations.
b) Training of staff including PIs, board members and stakeholders on safeguarding matters for the Centres; The standard awareness-raising materials (such as posters, leaflets, translated guidance, and community information sessions) shall be developed to support country offices in raising beneficiary awareness on Child and Adults at Risk Protection, which will be adapted to local cultural contexts.
c) Guiding management and staff on the implications of breach of safeguarding policy.
d) Undertaking appropriate reviews of serious cases and ensuring lessons are understood and acted upon.
e) In coordination with the Safeguarding Committee, we shall ensure that the Centres' safeguarding expectations and reporting mechanisms are communicated consistently to country offices.

7.5. Internal Audit Units

a) Collect and analyze both risk and incident information on safeguarding issues.
b) Monitor and report on the effectiveness of what is done to safeguard and promote the safeguarding of children and adults at risk.

7.6. PMU and Operations Unit

a) Ensure compliance requirements with Child and Adults at Risk Protection and Safeguards are incorporated in contracts with partners, service providers and vendors.
b) Monitor compliance by partners, service providers and vendors.
c) Implementation of Child and Adults at Risk Protection and activities at Elohim Foundation ·

7.7. Staff Members dealing with Child and Adults at Risk Protection have the Child and Adults at Risk Protection responsibility in their job descriptions and performance contracts.

7.8. The Safeguarding Committee will organize training on Child and Adults at Risk Protection and the time committed to Child and Adults at Risk Protection is commensurate with the impact of implementation required under the current situation of the Centres. The safeguarding committee is available in Annex I.

8. Retaliation to Local Country Laws

This Policy comprises the Internationally - accepted safeguarding principles without replacing existing national laws where the center operates. It supplements the national laws on Child and Adult at Risk Protection. Relevant national laws will take precedence if there is a conflict with this policy, or if it has stricter requirements than this policy. The content of this Policy must also be observed in the absence of corresponding national legislation. The reporting requirements for Child and Adults at Risk protection under national laws must be observed.

9. Related Documentation

1. Elohim Foundation Anonymous Reporting Hotline
2. Modern Slavery and Human Trafficking Policy
3. Anti-Bribery, Anti-Corruption Practices, Anti-Money Laundering and Anti-Terrorist Financing Policy
4. Elohim Foundation Anti-Fraud Policy
5. Integrity Policy
6. Procedure for Whistleblowing
7. Staff Policy Compliance, Conflict of Interest Declaration and Code of Conduct Form

Annexes:

Annex I: Safeguarding Committee

1. Chief Operating Officer as Safeguarding Lead.
2. Principal Investigator as Focal Point in the Project Level.
3. Continental Director or Country or Thematic or Team Leaders.
4. Internal Audit.
5. Project Management Unit (PMU).
6. Legal.
7. Head of Human Development as Safeguarding Manager.

Annex II: Child Guardian Consent Letter Form

(For Interviews, Video, and/or Photographic Material)

Purpose

Elohim Foundation is committed to protecting the safety, dignity, and rights of every child. Before collecting, recording, or using any information, image, or recording involving a child, informed consent must be obtained from both the child and their parent or legal guardian. This form ensures that consent is freely given, fully informed, and documented in accordance with Elohim Foundation 's Safeguarding Policy. **1. Details of the Child**

Full Name:

_____

Age: _____ Gender: _____

Language Spoken:

_____

Country / Location:

_____

2. Details of Parent / Legal Guardian

Full Name:

_____

Relationship to Child:

_____

Contact Information (Phone/Email):

_____

Address:

_____

3. Purpose of Interview / Recording / Photograph

a) Type of activity (*tick as appropriate*):

☐ Interview ☐ Video Recording ☐ Photograph ☐ Other: _____

b) Intended use (*tick as appropriate*):

☐ Internal Elohim Foundation use (reports, training, documentation)

☐ External publication (website, social media, press release, or donor report)

☐ Research or academic dissemination

☐ Other (please specify): _____

c) Description of the project / purpose:

_____

_____

4. Explanation of Rights (read aloud and ensure understanding)

a) Participation is voluntary, and they may refuse or withdraw consent at any time.
b) There will be no negative consequence for refusing or withdrawing consent.
c) The materials may be distributed locally and globally, depending on project purpose.
d) Elohim Foundation will use the materials responsibly, without exposing the child to harm, stigma, or misrepresentation.
e) Personal data will be handled in accordance with data protection laws and Elohim Foundation Safeguarding Policy.

5. Consent Statements

A. Parent / Guardian Consent

I have read (or had explained to me) the information above and understand the purpose and use of the materials collected. I give my consent for Elohim Foundation to collect, record, and use the child's interview, image, or recording for the purposes described.

☐ I give consent ☐ I do not give consent

Signature of Parent / Guardian:

_____

Full Name (print):

_____

Date: _____

B. Child Assent (for children aged 7 and above, where appropriate)

I understand why Elohim Foundation wants to talk to me or take my picture/video. I can say "no" or change my mind later.

☐ I agree ☐ I do not agree

Signature of Child:

_____

Full Name (print):

_____

Date:

_____

6. Witness / Translator (if applicable)

Name:

_____

Role / Relationship:

_____

Signature: _____ Date: _____

7. Elohim Foundation **Representative**

I confirm that the information above was clearly explained to the child and guardian in a language they understand, and that consent was obtained freely and voluntarily.

Name:

_____

Position / Unit:

_____

Signature: _____ Date: _____

8. Data Storage and Use

All materials will be securely stored and used in accordance with Elohim Foundation 's Safeguarding Policy, Data Protection Policy, and applicable local laws. Consent forms will be kept confidential and retained only as long as necessary.

For internal use only:

HR File Reference No.:

_____

Safeguarding Officer (reviewed by):

_____

Date Reviewed:

_____

Annex III: Grievance, Disciplinary and Corrective Action Procedure

7.1. Introduction

Elohim Foundation believe that staff members have a right to express their dissatisfaction with situations pertaining to them and should receive fair treatment in all such matters. The organisation shall provide an enabling environment for staff to put forward issues and expect resolutions. The aim of this policy is to set and maintain high standards of behaviour within Elohim Foundation

This policy addresses situations where staff are aggrieved or discontented with work-related issues, disciplinary measures or issues that may adversely affect their performance. The policy shall ensure that appropriate corrective action is taken where standards are not met and ensure that all staff are treated fairly and consistently during the disciplinary process.

7.2. Grievance, Disciplinary and Corrective Definitions

For the purpose of this policy, the following definitions shall apply:

a) Grievance – A request by a staff member for an injury, injustice or wrong that gives ground for a complaint. The aim of the policy and procedures is to settle the grievance at its point of origin and to apply the principles of natural justice (procedural fairness).

b) Offence constituting misconduct – An offence happens when a staff member is in breach of Elohim Foundation 's laid down rules, guidelines, standards, policies and procedures. Offences shall normally be regarded differently depending on how minor, serious or gross including one that might result in dismissal for a first offence on the grounds of gross misconduct. A minor offence may be regarded as a serious offence if it is repeated, for example lateness.

c) Alleged Offender/Responding Staff Member – This is a staff member who is accused of breaking a rule or does not meet set standards and requires a particular reprimand.

d) Due process – Means having valid ground and giving Elohim Foundation staff the right to defend themselves before recommending a sanction. It balances the power of the employer and protects the individual staff from it.

e) Rules of Natural Justice – The principle of natural justice by implication or explicitly means that Elohim Foundation shall apply fair procedures and act reasonably at all times, particularly with regard to a disciplinary investigation concerning the staff.

f) Disciplinary Action – An approach used to deal with a staff member who commits an offence and may range from a verbal or written reprimand to summary dismissal. The purpose of disciplinary action is to rectify behaviour and document the process.

g) Corrective Action – Is the process of communicating with the responding staff in order to address undesirable behaviour or performance. Where the staff does not improve or if their behaviour continues to be unsatisfactory, appropriate disciplinary action shall be taken.

h) Sanction – Penalties or other means of enforcement used to provide incentives for obedience with the law, or with rules and regulations Is a reaction from others to the behaviour of an individual or group of individuals. This chapter outlines the negative sanctions against a staff member who shows non- conformity with set standards.

i) 'Days' – Means any working hours or working days for the specific country in which staff member works or day that a staff member is carrying out work on behalf of Elohim Foundation .

j) Supervisor – Means the immediate supervisor of the staff member. In this policy it may be appropriate for an alternative manager to act on their behalf in their absence.

k) Line Manager – Means the staff member's next higher supervisor to whom matters are escalated should immediate supervisor be unsuccessful in resolving them.

l) Senior Staff – Means all positions on Management including Team/Theme Leader, Unit Head/Hub Leaders/Regional Coordinator.

m) Protection – Covers matters pertaining to the staff member's terms and conditions of employment and staff member's rights including the right to a safe work environment and the right to be given advance notice of termination. Elohim Foundation 's duty of care also includes protecting its staff from psycho- social risks such as bullying, violence and hostility.

n) Mediation – A structured and interactive process where disputing staff discuss and achieve a voluntary mutual agreement that finally and definitively resolves all their disputes, without resorting to adversarial procedures such as disciplinary hearings. It can be assisted by a neutral third-party assist.

o) Termination – The discontinuation of service either voluntarily by the staff or involuntarily following termination of contract by the employer.

p) Appellant staff – A responding staff member or alleged offender seeking further hearing of the Board Chair with the aim of reversing the decision of the disciplinary panel and/or the Director General.

q) Standard Dress Code – A grooming code that espouses neatness, tidiness, general hygiene and modesty, sensitivity and appropriateness in style taking into consideration local customs.

r) Lateness – A staff member shall be considered to be late when they fail to report for work at the scheduled work time, leaves work before the end of assigned work time without their supervisor's permission or takes an extended meal or break period without approval.

s) Harassment & Discrimination – Made by one or more persons, either on a one time or continuous basis that demeans, belittles or causes personal humiliation either through physical or verbal behaviour. Harassment creates a hostile, offensive and/or intimidating work environment.

7.3. Objectives

The main objectives of this policy are:

a) To contribute to and maintain high standards of performance of staff.

b) To nurture and maintain a culture that results in effective work and high productivity.

c) To promote Elohim Foundation image and core values.

7.4. Scope and Terms

The scope and terms of this policy are as follows:

a) This policy and related procedures apply to all Elohim Foundation staff who have completed their probationary period. For staff on probation, all disciplinary issues shall be covered in the standard probationary conduct and performance reviews referenced in their contract.

b) This policy shall cover, inter alia, matters related to sexual harassment, discrimination and work performance concerns.

c) Complaints resulting from illness and absence related to sickness, should be dealt with under the policy on Work Environment.

d) Where matters relate to drug or alcohol abuse as it affects staff performance or the reputation of the Institution, but not abusive behaviours resulting from such abuse, are to be handled under the policy related to Work Environment. Abusive behaviours affecting other staff are to be handled under this policy.

e) All the above are subject to consideration of the local labour law requirements in relation to disciplinary proceedings, in line with the host country agreement where such grievances have taken place.

7.5. Principles

The following basic principles, due process, rules of natural justice, documentation and protection shall guide the implementation of the grievance, disciplinary and corrective action policy and procedures.

7.5.1. Basic Principles

a) Staff are encouraged to discuss problems with their supervisors first, because supervisors can often resolve these problems. Staff who have differences with their supervisors or colleagues may seek support from their line manager or staff association or Head/Team Leader of Human Resources. Only then should they consider opening a formal grievance process.

b) All matters pertaining to grievances shall be handled with utmost confidentiality.

c) Without prejudice, any unfounded allegations or malicious reporting based on lies shall result in disciplinary action.

d) Staff shall have the right to appeal against any formal disciplinary sanction taken against them. A staff member who is not satisfied with the DG's decision may file for an appeal. Any appeals against the DG's decision shall be referred to the Board Chair.

e) Staff shall only be suspended, if necessary, especially where the allegations are so serious as to warrant suspension or for the protection of other staff. Suspension may be without pay.

7.5.2. Due Process

a) Subject to Elohim Foundation 's respective HR manual on due process of disciplinary procedure, no disciplinary proceedings may be instituted against a staff member unless he or she has been formally notified of the allegations against him or her, as well as the right to seek assistance in their defense of another staff member or the representation of Staff Association (SA) and has been given reasonable opportunity to respond to those allegations.

b) No staff member shall be subject to disciplinary measures unless these are the recommendations of a duly constituted Disciplinary Panel, as appointed by the Director General, which has followed due process and whose recommendations are accepted by the requisite authority, typically the Director General.

c) If referral to the Disciplinary Panel is waived by mutual agreement between the staff member concerned and the Director General.

d) Due process should have taken place in respect of summary dismissal imposed by the Director General in cases where the seriousness of the misconduct warrants immediate separation from service.

e) The staff member shall be entitled to receive relevant reports, documents and recommendations, pertaining to any investigation and the deliberations of the panel.

7.5.3. Rules of Natural Justice

Where a case has potential disciplinary consequences, including and up to dismissal, the Head/Team Leader Human Resources shall do the following:

a) Present all allegations in full whether oral or written against the staff to the staff concerned.

b) Inform the staff of their right to staff association representation if they so wish.

c) Inform the staff of their right to a reasonable hearing to state their case in an enquiry which shall be held in good faith and without bias or arbitrariness.

d) Hear the case being made by the complaining staff.

e) A judgement shall only be deemed right and final after all the facts disclosed have been considered to the satisfaction of the concerned parties.

f) No one shall be judge in their own case.

7.5.4. Documentation

All complaints made shall be fully documented by the Head/Team Leader Human Resources and retained on a confidential basis. Documentation of any informal meetings shall also be kept by the Head/Team Leader Human Resources for reference and a copy given to the staff. The key information concerning the offensive acts to be included in the documentation includes:

a) Description of the specific offensive act.

b) The time and date of the offensive act.

c) The circumstances surrounding the offensive act.

d) The manner and location of the incident.

e) Whether and under what circumstances the complainant made it clear to the alleged offender that the disputed behaviour was unwelcome.

f) Witnesses to the offence or persons to whom the offence was mentioned.

g) Other information relevant to the case.

h) If the alleged offender is the immediate supervisor, the written complaint should be presented to the next level supervisor, with a copy to the Head/Team Leader Human Resources. Any complaint against any senior staff shall be presented to the DG.

7.5.5. Protection

Staff who violate a policy shall face the prospect of summary dismissal. However, in most cases and situations, a sense of proportion should prevail and minor sanction, coaching,

mentoring or counselling should be considered if they can be expected to resolve the matter.

If a staff member continues to break rules or ignore work policies or continuously has performance problems, they typically should expect summary dismissal. However, before any such termination takes place, Elohim Foundation shall try to ensure that the staff has been given a chance to resolve their issues and reclaim their employment relationship. b Summary dismissal is to be viewed therefore as a last resort after following due process that is verbal warning, written warning and suspension.

7.6. Disciplinary Process

7.6.1. Informal Action

Where parties agree that an offence does not require a full disciplinary process including disciplinary panel, such offences shall be deemed to be 'minor'. In such cases, the matter may be addressed quickly and informally through, for example, a discussion about expectations and standards of behaviour or through advice, training, coaching or mentoring. Those leading these conversations are duty bound to advise offending staff that further misconduct may lead to formal action being taken in future.

It is expected that even such informal actions are documented and related documentation should be sent to the Head/Team Leader Human Resources who shall keep them securely either electronically or in hard copy. The Head/Team Leader Human Resources shall respond to the offended staff with a view of achieving closure, with or without a note to the relevant staff member's personnel file.

7.6.2. Formal Action

In all cases of alleged serious or gross misconduct, the formal action procedure must be followed.

a) Initial Assessment

Formal action commences when the Head/Team Leader Human Resources receives a complaint from a complainant and is charged with the duty of handling it with care and without prejudice towards the responding staff. The Head/Team Leader Human Resources shall assess the complaint if minor, serious or gross and document everything that is presented.

b) Mediation

Where it is determined that the offence can be resolved through mediation, a mediator shall be nominated by the Head/Team Leader Human Resources. Mediation resolves conflict using communication and negotiation techniques. An agreement to mediate shall not constitute an obligation to reach a binding conclusion. All the documentation on the mediation process shall be maintained by the Head/Team Leader Human Resources.

c) Investigation

The Head/Team Leader Human Resources may determine that the matter reported requires investigation in order to obtain more details of the case. This may happen especially if the matter cannot be concluded through mediation.

If differences of opinion on the seriousness of the grievance remain and supporting evidence in unavailable or remains inconclusive, the Head/Team Leader Human Resources shall nominate an investigation panel with the Director General's approval, that shall be charged with the task of obtaining additional information related to the matter. This panel shall include staff members with relevant and competent professional qualifications and experience. The investigation panel shall be constituted depending on the nature of the investigation and the competence or expertise required for the investigation.

Where the offence is serious or gross, the offending staff member may be suspended or sent on compulsory leave in order to allow for investigation to be conducted.

d) Recommend Grievance Process (Mediation or Disciplinary Action)

On completion of the initial investigation, the Head/Team Leader Human Resources shall determine whether the claim is malicious and may dismiss it or may determine that it is a legitimate complaint. If the complaint is legitimate and constitutes minor, serious or gross misconduct, the Head/Team Leader Human Resources shall recommend the appropriate grievance action depending on the findings and conclusion of the investigation panel's report as follows:

i. The Head/Team Leader Human Resources shall determine whether to recommend mediation for minor offences or institute further investigation for gross or serious misconduct.

ii. Should the investigation come up with nothing substantial, mediation shall be recommended.

iii. If the investigation panel shows that there is reason to have a disciplinary hearing, then the Head/Team Leader Human Resources shall again nominate staff members to constitute the disciplinary panel. The investigation panel

may transition to become the disciplinary panel or a disciplinary panel may be constituted, to consists of an odd number of staff members with relevant and competent professional qualifications and experience i.e.; one representative appointed by the Director General; one representative nominated by the Staff Association, other members proposed by HR and approved by the Director General.

iv. Who should advise the disciplinary panel but should not participate in the disciplinary process. The list of nominees to constitute the disciplinary panel shall come from the Head/Team Leader Human Resources and approved by the Director General.

v. The Head/Team Leader Human Resources shall present the disciplinary panel with findings from the investigation.

vi. The Head/Team Leader Human Resources may also determine that a disciplinary hearing can proceed without any investigation and use the prima facie evidence where it is difficult to carry out an investigation before the disciplinary hearing where the offense is serious or gross.

e) Determine next steps to be taken including timelines, duration

Any complaints that are considered legitimate shall be dealt with within 3 working days after reporting takes place. If it is determined that mediation shall resolve the

concern, a Mediator shall be nominated by the Head/Team Leader Human Resources and the process shall begin in not less than 3 days of reporting the concern. Where an investigation is deemed necessary for further action to be taken, the investigation shall commence in not less than 3 working days after reporting is done and should be completed in not more than 1 week. Where the offence is serious or gross and it is determined by the Head/Team Leader Human Resources that it does not require any investigation and shall therefore rely on prima facie evidence, the disciplinary panel shall be nominated, approved and have its initial hearing in not less than 3 working days of reporting. The duration of the disciplinary process from reporting to conclusion shall be not more than six (6) weeks.

Any resignation tendered during ongoing investigations or disciplinary of a staff member shall be subject to the following conditions:

i. The resignation shall not take effect unless accepted by Elohim Foundation subject to the provisions of local labour laws applicable to staff and the Human Resource Policy Manual.

ii. The resignation notice issued must be for such period as to allow for the investigation and/or disciplinary process to come to a logical end subject to the provisions of the local labour laws, Human Resource Policy Manual and the staff member's Letter of Appointment.

iii. Any staff member who resigns to circumvent investigations and/or disciplinary action shall not be entitled to any terminal benefits which would be payable on regular termination.

iv. The circumstances of the staff member's resignation shall be duly noted in the staff member's file.

f) Further Investigation

Where the Head/Team Leader Human Resources determines that the matter is complex, an external investigator (Auditor, Private Investigator, Lawyer) may be nominated by the Head/Team Leader Human Resources for approval by the Director General to conduct further investigation. Further investigation may be conducted after an initial investigation or after a disciplinary hearing. The aim of this is to ensure that there is adequate information to make a final assessment on the matter in a just and fair way. During the investigation process, all concerned staff shall be treated in a fair and equitable manner in accordance with the rules of natural justice. Further investigation should be concluded within 1 week.

7.7. List of Actions that Constitute Minor, Serious and Gross Misconduct

7.7.1. Offences constituting minor misconduct

Minor misconduct may include, but not be limited to the offences below:

a) Occasional absence from work.

b) Repeated lateness.

c) Repeated extended rest breaks without prior notice.

d) Inappropriate standards of dress.

e) Offences constituting serious misconduct.

7.7.2. Serious misconduct may constitute repeated minor offences or misconduct of a more serious nature which includes but is not limited to:

a) Frequent absence from the workplace.

b) Serious neglect or poor work standards.

c) Neglect of safety and security precautions.

d) Insulting behaviour towards colleagues or stakeholders.

e) Inappropriate or unauthorized use of Elohim Foundation 's property and position.

f) Rowdiness at work that is disobedient to those placed in authority.

g) Misuse of Elohim Foundation's staff or vendors' staff for activities not directly connected with their official duties unless authorized by the person in charge of administration.

7.7.3. Offences constituting gross misconduct

Gross misconduct inconsistent with the fulfilment of the expressed or implied conditions of a staff member's contract of employment such that it would be unreasonable to continue the employment relationship. Gross misconduct may include but is not limited to the following offences:

a) Financial or scientific dishonesty or fraud.

b) Release of confidential information.

c) Habitual or substantial neglect of duties.

d) Assault on any other staff and fighting.

e) Reporting to work under the influence of alcohol or drugs or using illicit drugs in Elohim Foundation premises.

f) Willful disobedience and insubordination.

g) Lack of the skills that the staff expressly or by implication made the employer believe he or she possessed before being hired.

h) Absence from work at least three times without permission of the employer and without reasonable excuse.

i) Gambling on Elohim Foundation property or elsewhere using its assets.

j) Theft or embezzlement of Elohim Foundation property or attempts to do so to the prejudice of Elohim Foundation or their stakeholders even in the absence of legal proceedings.

k) Manipulation or falsification of information and official records to facilitate employment, theft or embezzlement of Elohim Foundation property or aimed at hiding or delaying discovery of theft and embezzlement.

l) Contravention of instructions or necessary work for the security of operations.

m) Leaking of professional secrets in cases where an important, material or moral prejudice may ensue for Elohim Foundation or their stakeholders.

n) Discrimination and harassment of all types including sexual harassment, physical violence or bullying etc.

Any serious misconduct and gross misconduct above shall be brought to the attention of the staff in writing and the disciplinary procedure to be undertaken stated. The Supervisor, Line Manager or Team Leader shall initiate recording of the serious misconduct and/or gross misconduct.

7.8. Disciplinary Action

Before the disciplinary hearings take place, the Head/Team Leader of Human Resources shall ensure the disciplinary panel members sign Non-Disclosure Forms and then explain to the members the details of the complaint or concern and give the responding staff member's names. Staff from Human Resources, Legal, Protocol, Audit or an officer from Human Resources as the Chairperson; one representative appointed by the Director General; one representative nominated by the Staff Association and approved by the Director General (where applicable) teams shall not be part of the panel by may provide guidance with the Director General's approval. The external investigators may also be called upon to give evidence. The disciplinary panel shall then proceed to have formal hearings and thereafter recommend appropriate action to the Head/Team Leader of Human Resources. The Head/Team Leader Human Resources shall review the recommendations, approve and submit the recommendation to the Director General for final approval. In the DG's absence, the Director General's designate and one other director shall make the final decision. All disciplinary matters shall be approved by the Director General or two (2) designated signatories from Elohim Foundation.

7.9. Corrective Action

Once communication with the responding staff commences, corrective action shall be deemed to have started. The corrective actions and sanctions are as follows:

Type of Culpability	**Sanctions as Guided by HR Policy**	**Possible Options within the Sanctions (To be used as a guide by the Panel for Final Recommendations)**
Minor Offences a) Occasional absence from work. b) Repeated lateness. c) Repeated extended rest breaks without prior notice. d) Inappropriate standards of dress.	Minor offense Verbal warning.	Written warning.

Serious Misconduct a) Frequent absence from the workplace. b) Serious neglect of duties or poor work standards. c) Neglect of safety precautions. d) Insulting behaviour towards colleagues or stakeholders. e) Inappropriate or unauthorized use of Elohim Foundation property. f) Rowdiness at work that is disobedient to those placed in authority. g) Misuse of Elohim Foundation's staff or vendors'	Serious misconduct inconsistent with fulfilment of the expressed or implied conditions of employment contract. Summary Dismissal Serious neglect or poor work standards. Serious offense a) Written warning. b) Failure to perform as expected. Repeated minor offense a) Unacceptable conduct. b) TBD by panel guided by policy.	General guideline is below but decisions to be made based upon severity of Failure to Perform: a) First Written Warning with the following sanctions: i. Ineligible for Merit Bonus, Promotion, In-Grade Progression, Reclassification, Training Opportunities or Education Loans for 2 years (including suspended ineligibility).

Type of Culpability	**Sanctions as Guided by HR Policy**	**Possible Options within the Sanctions (To be used as a guide by the Panel for Final Recommendations)**

staff for activities not directly connected with their official duties unless authorized by the person in charge of administration. Gross Misconduct a) Financial or scientific dishonesty or fraud. b) Gambling on Elohim Foundation property or elsewhere using its assets. c) Theft or embezzlement of Elohim Foundation property or attempts to do so to the prejudice of Elohim Foundation or their stakeholders even in the absence of legal proceedings. d) Manipulation or falsification of information and official records to facilitate employment, theft or embezzlement of Elohim Foundation property or aimed at hiding or delaying discovery of theft and embezzlement. e) Gambling on Elohim Foundation property or elsewhere using its assets. f) Release of confidential information. g) Contravention of instructions or necessary work for the security of operations.	Summary Dismissal a) The offender may be required to provide a private or a written public apology. b) The offender may receive a verbal warning and professional counselling. c) The Director General may give a written warning to the offender with a copy for his or her personal file. i. The offender's contract may be terminated on ii. The offender may be dismissed summarily.	b) Second Written Warning with the following possible sanctions: i. Suspension without pay for xx months. ii. No salary increases for xx years. iii. Demotion to lower grade (no change in salary). c) Other suitable actions i. Suspension without pay for xx months. ii. No salary increases for xx years. iii. Ineligible for Merit Bonus, Promotion, In-Grade Progression, Reclassification, Training Opportunities or Education Loans for xx years. iv. Demotion to lower grade (no change in salary). v. Dismissal with terminal benefits. vi. Dismissal without terminal benefits. vii. Legal action can be taken where determined necessary. viii. Dismissal with terminal benefits. ix. Dismissal without terminal benefits. x. First Written Warning with the following sanctions: xi. Ineligible for Merit Bonus, Promotion, In-Grade

Type of Culpability	Sanctions as Guided by HR Policy	Possible Options within the Sanctions (To be used as a guide by the Panel for Final Recommendations)
h) Leaking of professional secrets in cases where an important, material or moral prejudice may ensue for Elohim Foundation or their stakeholders. i) Habitual or substantial neglect of duties. j) Reporting to work under the influence of alcohol or drugs or using illicit drugs in Elohim Foundation premises. k) Willful disobedience and insubordination. l) Lack of the skills that the staff member expressly or by implication made the employer believe he or she possessed before being hired. m) Absence from work at least three times without permission of the employer and without reasonable excuse (Intentional or Unintentional). Harassment and Discrimination a) Harassment is, made by one or more persons, either on a one time or continuous basis that demeans, belittles or causes personal humiliation. Harassment creates a hostile, offensive and/or intimidating work	n	Progression, Reclassification, Training Opportunities or Education Loans for xx years. xii. Second Written Warning with the following possible sanctions: xiii. Suspension without pay for xx months. xiv. No salary increases for xx years. xv. Demotion to lower grade (no change in salary). Other suitable actions.

Type of Culpability	Sanctions as Guided by HR Policy	Possible Options within the Sanctions (To be used as a guide by the Panel for Final Recommendations)
environment. Harassment encompasses a range of physical or verbal behaviour including communication (e-mail, voice or text messages) and may include but is not limited to sexual or ethnic comments or jokes, inappropriate written or graphic material, discriminatory remarks, religious and/or racial insults, stalking, bullying including cyber bullying) and sexual advances. b) Treatment of, or making a distinction in favour of or derogatory remarks against a staff member or colleague based on gender, sexual orientation, race, nationality, ethnic group, political or other opinion, social origin, disability, pregnancy, mental status or HIV/AIDS or health status shall constitute discrimination.		

7.10. Objective of Corrective Action

The objective of taking corrective action is to turn around undesired behaviour or performance by identifying causes of problems and solutions.

7.11. Responsibility of Various Persons

Every staff member is responsible for creating and maintaining a work environment that is free of harassment, intimidation and discrimination and in which dignity is fully respected.

7.11.1. Responsibility of Every Staff Member

a) Taking assertive action if they feel they are being subjected to harassment, regardless of who the alleged offender is or the nature of the harassment, by making the offensiveness of the unwelcome conduct immediately known to the offender and by reporting it to the supervisor or any other party as per the reporting procedures.

b) Adhering to policy guidelines.

c) Maintaining a professional working attitude towards all other staff and external stakeholders.

d) Treating other staff and external stakeholders with respect and adopting a non-judgmental outlook.

7.11.2. Role of Supervisors and Line Managers and Team Leaders

Supervisors, Line Managers and Team Leaders have a key role in this effort by ensuring that any reported incident of unacceptable behaviour, including sexual harassment or intimidation, is promptly dealt with and that corrective action is taken. Managers and supervisors bear added responsibilities of:

a) Serving as role models and making it clear that no form of harassment shall be tolerated.

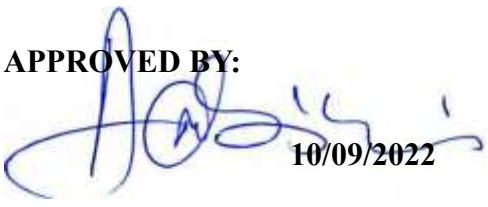
b) Promoting and enhancing a positive working environment in which harassment does not occur.

c) Treating every complaint seriously and ensuring prompt attention and complete adherence to the policy.

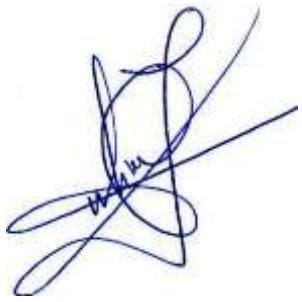
d) Listening carefully to both sides and assisting in the resolution of any complaint.

Corrective Action – The table of sanction definitions is outlined as Annex IV.

APPROVED BY:



10/09/2022



10/09/2022

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Mrs. Ngozi Obilor
President Board of Trustees.

Dr. Ibecheole, Julius PMD. NES.
Chief Executive Officer/Founder