

CANADEM Safeguarding: Procedure for Dealing with Reports of Breaches

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Purpose and Scope

The purpose of this document is to provide procedures for dealing with reports of breaches of the CANADEM Safeguarding Policy, where the safeguarding violation is:

- Against staff members, associated personnel or members of the public;
- Perpetrated by staff, partners or associated personnel. Associated personnel include, but is not limited to, consultants, volunteers, contractors, programme visitors including journalists, celebrities and politicians.

Principles

- Survivor Prioritization: the interests of a victim should predominate
- Do No Harm: precipitous or insufficiently informed action may further harm a survivor
- Justice: allegations will be taken seriously yet cannot override procedural fairness or obviate the presumption of innocence
- Sui Generis: every survivor and their situation is sufficiently unique so as to merit unique solutions
- Prevention: action must be taken to prevent serial abusers

Procedures

1. Report is received

1.1 Reports can reach CANADEM through various routes. This may be in a structured format such as a letter, e-mail, text or message on social media. It may also be in the form of informal discussion or rumour. If a staff member hears something in an informal discussion or chat that they think is a safeguarding concern, they should report this to the appropriate staff member.

1.2 If a safeguarding concern is disclosed directly to a member of staff, the person receiving the report should bear the following in mind as per CANADEM's First Response Guide:

- Listen
- Empathise with the person
- Ask who, when, where, what but not why
- Repeat/check understanding of the situation
- Report to the appropriate staff member (see below)

1.3 The person receiving the report should then document the following information:

- Name of person making report
- Name(s) of alleged survivor(s) of safeguarding incident(s) if different from above
- Name(s) of alleged perpetrator(s)
- Description of incident(s)
- Dates(s), times(s) and location(s) of incident(s)

1.4 The person receiving the report should then forward this information to the Safeguarding Focal Point/CANADEM's Director, or appropriate staff member within 24 hours.

1.5 Due to the sensitive nature of safeguarding concerns, confidentiality must be maintained during all stages of the reporting process, and information shared on a limited 'need to know' basis only. This includes senior management who might otherwise be appraised of a serious incident.

1.6 If the reporting staff member or associated personnel is not satisfied that the organisation is appropriately addressing the report, they have a right to escalate the report, either up the management line, to the Board, or to an external statutory body. The staff member or associated personnel will be protected against any negative repercussions as a result of this report. See CANADEM's Complaints Policy.

2. Assess how to proceed with the report

2.1 CANADEM will appoint a Primary for handling this report. In most instances the Primary will be the Safeguarding Focal Point/CANADEM's Director, but may be delegated by her to a senior staff person, or passed up to the Executive Director who in turn may pass the file up to a Board Member to serve as the Primary.

2.2 Determine whether it is possible to take this report forward:

- Does the reported incident(s) represent a breach of CANADEM's Safeguarding Policy?
- Is there sufficient information to follow up on this report?

2.3 If the reported incident does not represent a breach covered by CANADEM's Safeguarding Policy, but represents a safeguarding risk to others, the report should be referred through the appropriate channels (e.g. UN agency, local authorities) if it is safe to do so.

2.4 Ask if there are alternate and possibly better avenues for immediate redress, relief, or remedy. While CANADEM must always take action, it often will not be best placed to assist the survivor or act against the abuser. In fact, at times, precipitous action by CANADEM may worsen the situation or delay relief and redress.

2.5 If there is insufficient information to follow up on the report, and no way to ascertain this information (for example, if the person making the report did not leave contact details), the report should be filed in case it can be of use in the future, and inform any wider lesson learning CANADEM can take forward.

2.6 If the report raises any concerns relating to children under the age of 18, **seek expert advice immediately**. If at any point in the process of responding to the report (for example, during an investigation) it becomes apparent that anyone involved is a child under the age of 18, the relevant decision maker should be immediately informed and should seek expert advice before proceeding.

2.7 If a decision is made to take the report forward, ensure that the relevant expertise and capacity to manage a safeguarding case is available. **If CANADEM does not have this expertise in-house, seek immediate assistance** through external capacity.

2.8 Clarify what, how and with whom information will be shared relating to this case. Confidentiality should be maintained at all times, and information shared on a need-to-know basis only. Decide which information needs to be shared with which stakeholder – information needs may be different.

2.9 Check your obligations on informing relevant bodies when receiving a safeguarding report. These include (but are not limited to):

- Funding organisations
- Umbrella bodies/networks
- Statutory bodies
- Law enforcement

Some of these may require CANADEM to inform them when it receives a report, others may require information on completion of the case, or annual reporting on cases. When submitting information to any of these bodies, think through the confidentiality implications very carefully.

3. Appoint roles and responsibilities for case management

3.1 A Case Primary will be designated for each case. The Primary should be a senior staff member, not implicated or involved in the case in any way, unless it is deemed appropriate to make a Board Member the Primary. By default, the Director will be the Primary but he can delegate that role to another senior staff member, the Executive Director, or a Board member.

3.2 If the report alleges a serious safeguarding violation, we will usually convene a case conference which should include:

- Case Primary
- Person who received the report (such as the focal point, or manager)
- Senior staff with the best awareness of relevant human resources issues, e.g. Director of Finance
- The Duty of Care Manager or one of CANADEM's duty of care advisors

The case conference should decide on next steps, including any protection concerns and support for the survivor and other stakeholders (see below).

4. Provide support to survivor where needed/requested

4.1 Provide appropriate support when possible to survivor(s) of safeguarding incidents. This should be provided as part of duty of care even if the report has not yet been investigated. Support could include, but is not limited to:

- Psychosocial care or counseling
- Medical assistance
- Protection or security assistance (for example, being moved to a safe location)

4.2 All decision making on support should be led by the survivor.

5. Assess any protection or security risks to stakeholders

For reports relating to serious incidents, undertake an immediate risk assessment to determine whether there are any current or potential risks to any stakeholders involved in the case, and develop a mitigation plan if required. Continue to update the risk assessment and plan on a regular basis.

6. Decide on next steps

6.1 The Primary in consultation with the Executive Director decides the next steps. These could be (but are not limited to):

- No further action (for example, if there is insufficient information to follow up, or the report refers to incidents outside CANADEM's remit)
- Investigation if required to gather further information
- Immediate disciplinary action if no further information needed
- Referral to relevant authorities

6.2 If an investigation is required and CANADEM does not have internal capacity, we will identify outsider experts to conduct the investigation.

7. Investigation Protocols

7.1 CANADEM has a generic response protocol that can be adapted to all possible scenarios. This is designed to provide CANADEM staff with sufficient latitude to customize their actions to better achieve the best interests of the survivor in conjunction with other obligations, such as whether and how to inform the relevant donor(s), or a duty to prevent serial abusers.

7.2 Critical decisions/actions include the need to inform others, often as determined/requested by the survivor or the alleged survivor. Do they want others involved? And even if they don't want others involved, should others be involved? So below in cascading order are the CANADEM staff/board members that potentially should be involved. At each level, individuals must use their best judgement based on the principles and factors set out above.

7.3 CANADEM First Responder

This is the individual CANADEM staff member who first becomes aware of the situation/incident. If the incident concerns individuals deployed by CANADEM, at a minimum the first responder will inform CANADEM's Deployment Primary (see below) for that individual. Note that for most CANADEM associated personnel CANADEM has obtained mental health coverage that includes confidential counselling services and those professional counsellors will not inform CANADEM of a situation/incident, but will encourage the survivor to directly contact CANADEM.

7.4 CANADEM Deployment Primary

- This normally refers to the CANADEM staff member who is the Primary for an individual deployed by CANADEM, e.g. they are deploying the individuals or serving as their primary contact when they are deployed, or because they are the immediate supervisor of the individual. The assumption is that the Primary has the best understanding of the individual in question and thus is best placed to take initial action and/or involve other CANADEM colleagues.
- Note also that various CANADEM staff are a Primary for particular functions such as Duty of Care, and so there is an imperative to also involve them at the very earliest stage. In some situations, they may be the first responder in that they will have been the first CANADEM staff contacted by the individual.

7.5 CANADEM Senior Management

If the CANADEM Primary is not a member of senior management, the assumption is that the Primary will actively consider taking the situation/incident to a relevant member of senior management, who may have a better idea as to the best way to respond and whether the situation requires the involvement of the Board and/or outside experts.

7.6 CANADEM Executive Director

As the chief executive officer, the Executive Director has ultimate operational responsibility and while reliant on the senior management team, must ensure that sufficient action is taken by CANADEM staff, or that the Board and possibly outsiders are involved.

7.7 CANADEM Board

Board member Janet Zukowsky, who has professional experience in dealing with abuse survivors, is the designated Board contact for staff survivors who wish to raise issues at the Board level. All CANADEM staff are aware that they can directly contact Janet Zukowsky if they are a survivor of abuse by a CANADEM colleague. CANADEM staff know that if they do not have complete confidence in the Executive Director or other relevant CANADEM colleagues, they should not hesitate to contact Janet Zukowsky.

7.8 Abuse and harassment allegations by their very nature are extremely critical and invariably complex to assess and respond to. Since good intentions are not always sufficient, CANADEM should always consider involving relevant professionals such as mediators, therapists, counsellors, etc. But at times the best interests and request of the survivor may militate in favour of CANADEM staff/board responding and providing assistance at their level. At the same time, CANADEM staff are encouraged to avoid secrecy and unnecessary confidentiality, which can serve to shield abusers. Records should always be kept, in particular to avoid and detect repeat offenders, one of the strengths of the CANADEM roster.

8. Make a decision based on the information from the investigation

8.1 The Primary in consultation with the Executive Director makes a decision based on the information from the investigation.

8.2 If at this or any stage in the process criminal activity is suspected, the case should be referred to the relevant authorities *unless this may pose a risk to anyone involved in the case*. In this case, the Primary

together with other senior staff will decide how to proceed. This decision should be made bearing in mind a risk assessment of potential protection risks to all concerned, including the survivor and the Subject of Concern.

9. Conclude the case

9.1 Document all decisions made resulting from the case clearly and confidentially.

9.2 Store all information relating to the case confidentially, and in accordance with CANADEM policy and local data protection law.

9.3 Record anonymised data relating to the case, e.g. not directly or indirectly identifying survivors, to feed into organisational reporting requirements (e.g. serious incident reporting to Board, safeguarding reporting to donors), and to feed into learning for dealing with future cases.