

CGIAR Integrated Partnership Ethics & Business Conduct Escalation Framework

Introduction

1. The CGIAR Integrated Partnership is dedicated to upholding the highest standards of ethics and business conduct for both personnel and governance officials. CGIAR Centers and the System Organization (SO) are bound together by an Integrated Partnership, including common funding, common science programs, and a common brand and reputation. As such, the strength of the partnership is dependent on the ability of its members to handle ethical and business conduct issues consistently and properly.
2. This document establishes a consistent framework for escalation of ethics and business conduct cases across the CGIAR Integrated Partnership, ensuring that reports of concerns about unethical conduct and other ethical breaches are consistently managed, reported, and addressed responsibly and effectively at appropriate levels across the Integrated Partnership.
3. The CGIAR Integrated Partnership Ethics & Business Conduct Escalation Framework has been developed in alignment with the CGIAR Integrated Partnership Risk and Oversight Plan. The Escalation Framework is intended to provide a framework structure that outlines how different parts of the CGIAR System work together to escalate cases based on severity. The Framework is not intended to be exhaustive or prescribe operational implementation elements which are described in relevant policies, procedures, or guidelines of the CGIAR Integrated Partnership, or individual Centers.

Approach

4. Each Center and the SO within the CGIAR Integrated Partnership retains authority as employers of record in managing case-specific procedures under the oversight of its Governing Body. Integrated Partnership-level visibility is enabled through aggregate summary reporting in a manner that ensures the protection of confidentiality, providing appropriate legal remedies within the pertinent legal entity, and ensuring due process.
5. The CGIAR Integrated Partnership recognizes that individual Centers and the SO, as employers of record, have primary responsibility for addressing ethical breaches within their own operations and governing bodies.

6. The Integrated Partnership Ethics & Business Conduct Function (EBC Function) has specific responsibilities with respect to this Escalation Framework, which are set out in its Terms of Reference.

Principles

- I. **Entity-Level Responsibility:** Each Center and the SO are accountable for managing their ethics and business conduct allegations and cases, including investigations and any resulting disciplinary actions as the employing entity.
- II. **Mutual and Shared Responsibility:** CGIAR Centers and the SO have responsibilities to each other and to the CGIAR as a whole to manage cases in accordance with this Escalation Framework and related ethics and business conduct (EBC) policies, recognizing the interconnected nature of their activities and reputation of CGIAR as a whole. Centers and the SO shall assess all allegations and/or cases to consider the potential risks to other centers and the Integrated Partnership as a whole, in consultation with the Integrated Partnership Board Audit, Finance and Risk Committee (IPB-AFRC) members that sit on Center Audit, Finance and Risk Committees (AFRCs) and Boards and consult or share information with relevant bodies of the Integrated Partnership appropriately to mitigate and address these risks.
- III. **Structured Information Sharing:** While maintaining confidentiality and legal compliance, partnership-level governing bodies will receive through the Integrated Partnership Ethics and Business Conduct Executive (IP-EBC Executive), summarized, anonymized data aimed at monitoring of trends, and identification of systemic issues.
- IV. **Independent Investigation:** Serious misconduct cases, particularly those involving senior leadership or governance officials or posing significant risks, may be escalated through predefined channels described in this Escalation Framework and may be investigated by independent, pre-approved providers.
- V. **Protection of information sharing and decision-making authority:** Ethical cases may result in costly litigation for a Center, the SO, the CGIAR System, and individual members of its Governing Bodies. Information sharing and decision-making authority must be protected to prevent the unintentional transfer of legal or financial liabilities to other entities, including the Integrated Partnership Board (IPB), System Council (SC), IPB-AFRC and the SC's Assurance Oversight Committee (AOC), or their individual members and respective institutions or governments they represent.

- VI. **Due Process and Confidentiality:** The rights of all individuals involved must be protected throughout the escalation process through a natural justice philosophy¹.
- VII. **Whistleblowing and Protection from Retaliation:** All individuals reporting suspected misconduct, whether internally or through independent hotlines, are entitled to protection from retaliation, anonymity where applicable, and interim protection measures, in accordance with the CGIAR Integrated Partnership Policy on Whistleblowing and Protection from Retaliation. These protections apply throughout the life cycle of a case - from initial intake, through investigation and any escalated oversight - and are guaranteed regardless of the seniority of the individuals involved or reporting channel.

Escalation pathways

- 7. The following describe indications/thresholds for escalation:
 - a. A matter involves systemic ethical risks that could impact multiple Centers and/or the SO, as determined by the Center AFRC (IPB-AFRC for the SO). Centers are required to assess all allegations and cases not only with regard to the potential ethical and reputational risks for the Center but also the potential risks to other Centers and the Integrated Partnership as a whole. Where an allegation or case is considered to carry such risks, these should be reported to the appropriate other Center AFRC's and the IPB-AFRC. The IP-EBC Executive may also advise the IPB-AFRC on potential systemic ethical risks or on potential legal, financial, or reputational consequences at the CGIAR System level, noting that each Center's AFRC may not be aware if a matter impacts multiple Centers and/or the SO. In such an event, the IPB-AFRC will ensure appropriate escalation together with the Center AFRC.
 - b. The Center Board determines it can no longer objectively oversee a case as the majority of its members are conflicted and/or recused from oversight, or there is a failure of internal resolution mechanisms at the Center level.
 - c. An issue has legal, financial, or reputational consequences at the CGIAR System level.

¹ This philosophy is based on basic principles of fairness and equity and is deeply rooted in the idea that every person has the right to be treated fairly and should not be subjected to arbitrary or unjust treatment. The two main core concepts associated with natural justice are 1) the right to a fair hearing and 2) the rule against bias. The law and the employment contract serve as the primary safeguards for due process and confidentiality rights, while the philosophy of natural justice provides additional, secondary protection. For instance, employees in certain jurisdictions have rights to due process and confidentiality protected by the laws of those nations. In this context, the law is the fundamental basis for these rights.

- d. Situations where ethical challenges or risks cannot be adequately addressed by existing Center/SO capacities or policies.
8. If any of the above are indicated, the IPB-AFRC, or AOC, and IP-EBC Executive may be requested by the Center AFRC to assume oversight, ensuring timely review, appropriate level of oversight and mitigation of potential system-wide risks.

Escalation Process

9. Reporting Pathways

- a. Ethical Misconduct allegations/cases may be reported through several channels in accordance with the CGIAR Integrated Partnership Policy on Whistleblowing and Protection from Retaliation, and specific Center/SO Policy, including:
 - Examples of Internal Reporting pathways: Direct Supervisors or Senior Managers, Human Resources/People and Culture, Legal Office/ Counsel, Ethics and Business Conduct Representative / Focal Point.
 - Whistleblowing hotlines (currently Lighthouse Services): a reporting pathway for both anonymous and identifiable complaints.
- b. In accordance with the CGIAR Integrated Partnership Policy on Whistleblowing and Protection from Retaliation, reports may also be received by the IP-EBC Executive if:
 - The individual reported their suspicions to their employing CGIAR Integrated Partnership member organization using the established internal or anonymous channels, and the member organization failed to acknowledge the report within 5 working days, or subsequently, failed to respond to the individual's request for a status update within 60 calendar days.
 - Reporting to the IP-EBC Executive is necessary to avoid imminent danger to public interest, substantial damage to CGIAR Integrated Partnership operations or reputation², or violations of law.

² Examples of wrongdoing that present imminent danger to public interest and/or substantial damage to CGIAR's reputation include suspected illegal conduct, corruption, scientific research deception, unreasonable danger to health or safety, and danger to the environment that could affect the entire Integrated Partnership.

- c. Each Center/SO concerned will be responsible for the initial handling, triage, and intake, once receiving a complaint either directly or through the whistleblowing hotline.
- d. Recognizing that reports may be made directly to the IP-EBC Executive, it is the responsibility of the IP-EBC Executive to appropriately route it to the relevant Center/SO's intake process in accordance with this Escalation Framework, and to liaise with the appropriate Center/SO (at the appropriate level in line with the Escalation Matrix set out below) to ensure that it remains under the oversight of the respective Center/SO's governing body.

10. Initial Handling, Triage, and Intake

- a. Each Center concerned will be responsible for the initial intake, once receiving a complaint either directly or through anonymous whistleblowing hotlines. The Center/SO EBC lead initiates action per internal policy and manages the allegation internally.
- b. Intake will, as appropriate, follow the process of the Uniform Principles Intake Guidelines: [CII-General-Principles-for-Intake-and-Evaluation-21stCII.pdf](#)
- c. Triage, or case prioritization based on severity level, which may be a continuous process, is conducted independently by each Center/SO EBC lead, based on standardized severity criteria and in accordance with relevant CGIAR and Center/SO policy or procedures.
- d. All allegations shall be registered in the case management system and reviewed to determine whether they fall within the jurisdiction or authority of EBC. If it is determined that it does not fall within the investigative mandate of EBC, the allegation is either referred to the competent office and a response is provided to the complainant regarding such referral or non-pursuit.
- e. When allegations are assessed/evaluated as credible and within the jurisdiction of EBC, the Center/SO EBC lead will authorize the opening of an investigation. The decision whether to open an investigation or to close it will be documented in the case management system.
- f. Allegations received by other members of the CGIAR Integrated Partnership are routed to the relevant Center/SO EBC lead for further action via the common case management system. The IP-EBC Executive, in coordination with Center-level EBC focal points, shall be responsible for managing anonymous allegations involving multiple Centers.

- g. Allegations of serious ethical misconduct involving a Chief Executive Officer (CEO) e.g., Director General (DG), or an Executive Managing Director (EMD), and/or Members of Governing Bodies (Center Board, IPB, or their committees), or the System Council or its committees will be immediately referred to the relevant Center/SO AFRC, or AOC Chair, who is responsible for evaluating the allegation which may be investigated by pre-approved external investigators, and oversight may be escalated. Allegations or reports involving members of the System Council or its committees, who represent institutions or organizations, will be referred to the relevant institution or organization employing the involved member, with the expectation that the AOC be informed of the outcome.

11. Case Management

- a. All ethical misconduct cases, regardless of the channel through which they are received, will be entered into the common case management system (currently Lighthouse Services) used by each member organization of the CGIAR Integrated Partnership, enabling a consistent consolidated view of all cases, as well as effective and continuous triage, or prioritization of cases by the Center/SO EBC lead or those authorized within each Center/SO, and under the oversight of the relevant Center/SO AFRC or AOC.
- b. The common Case Management System provides:
 - Confidential portal access: Only authorized personnel (e.g., Center/SO EBC leads, the IP-EBC Executive and authorized investigators) have access to detailed case files.
 - Evidence storage: Documents, interview notes, testimonial recordings, preliminary review and investigation findings are uploaded and securely stored.
 - Communication: Two-way communication with anonymous whistleblowers is possible through secure messaging.
 - Documentation: The system allows for logging all steps of the preliminary review and/or the investigation.
 - Audit trail: A tamper-proof log is maintained for accountability.
 - Task tracking: Built-in alerts ensure cases progress in line with procedural timelines.

- Complies with major data protection laws like the General Data Protection Regulation (GDPR).
- End-to-end encryption ensures confidentiality and data integrity.
- Regular audits of the platform enhance trust and credibility.

12. Preliminary Reviews and Investigation

- a. Preliminary reviews/investigations will be conducted in accordance with the policy and procedures of the investigating Center/SO, in alignment with the Uniform Principles and Guidelines for Investigations of the Conference of International Investigators, which may be updated from time to time. (<https://www.ciinvestigators.org/cii-guidelines/>)

13. Oversight of Preliminary Reviews and Investigations

- a. Oversight of preliminary reviews and investigations will be determined based on severity level. Oversight for cases of serious misconduct is the responsibility of the relevant Center/SO AFRC unless escalated. For serious misconduct cases, the preliminary review/investigation may be conducted by independent providers vetted by the EBC Function and approved by the IPB-AFRC and Center AFRCs (or AOC if the case is escalated to it). Centers/SO shall maintain control of decisions regarding consequences of preliminary reviews/investigations, including disciplinary action.
- b. All individuals involved in an ethics misconduct preliminary review/investigation - whether as complainants, witnesses, or subjects of the complaint - shall be informed of their rights at the outset of the process. This includes the right to be informed of the allegations, the right to respond, and access to any applicable appeal or review mechanisms, in accordance with the policies of the employing entity.

14. Information Sharing

- a. Aggregated, anonymized data is exported from the case management system and reported quarterly³ by the Center EBC Lead to the Center AFRC, and through the EBC Function by the IP-EBC Executive to the IPB-AFRC and SC-AOC. This

³ Additionally, in line with the minimum standards set out in the Standard Provisions of CGIAR's Trust Fund Agreement, a monthly aggregated report on credible concerns of serious financial irregularities and interpersonal misconduct (i.e. where an investigation has been opened following preliminary assessment) will be provided to the System Council through the AOC. The report will contain summarized and non-identifiable data on such cases and their status, and on corrective actions taken

reporting is the mechanism through which trends and patterns in allegations and cases are identified and analyzed.

b. Aggregated Summary Reporting will include:

- **Case Volume and Typology:** Summarized data on the number and nature of ethics cases, categorized by issue type (e.g., harassment, conflicts of interest, financial impropriety).
- **Severity and Escalation Levels:** Analysis of cases by severity level and escalation frequency to understand the gravity and reach of recurring issues.
- **Summary information on reports submission:** providing information on how reports are submitted including, pathway, grades, genders, and regions.
- **Resolution Timelines:** Average response times and resolution periods, helping assess the effectiveness of the escalation process and identify areas needing efficiency improvement.
- **Outcomes and Trends:** Summarized outcomes of cases, such as resolutions, disciplinary actions, or policy changes, along with any emerging trends that may indicate systemic issues.
- **High-Risk Areas or Functions:** Identification of any recurring patterns in specific functions, regions, or partnerships that may pose increased risk, allowing CGIAR to proactively address root causes.
- **Disaggregated data on cases by gender and seniority of subjects.**
- **Overall reflections based on analysis of aggregated summary case reporting for the reporting period, and recommendations on potential actions or course corrections for IPB-AFRC and Center AFRC consideration.**

c. The IP-EBC Executive has no restriction on their access to any additional information from the case management system in relation to preliminary reviews and/or cases, to discharge their Integrated Partnership-wide responsibilities including facilitating better understanding of cross-Partnership risks and issues by stakeholders. Requests for access to Center-specific case information shall

be routed through the Center AFRC Chair, in line with the Data Sharing Agreement in force⁴.

- d. All members of the EBC Function shall have reciprocal and equal access to case information from the case management system, and such requests relating to Center/SO-specific information other than for their Center shall also be routed through the Center/SO AFRC Chair, in line with the Data Sharing Agreement in force.
- e. When accessing specific case information, the IP-EBC Executive (or any member of the EBC Function) will liaise with the Center EBC lead and/or the Center's AFRC (as appropriate) with regards to Integrated Partnership-wide considerations to support that Center's handling and oversight of a preliminary review/case⁵. The contractual arrangements of the IP-EBC Executive and all EBC leads shall include non-disclosure agreements with each Center/the SO relating to their reciprocal access to confidential information pertaining to the Center/SO.
- f. In all instances, neither the IP-EBC Executive nor any member of the EBC Function may share any detail with any other person beyond that contained in the aggregated, anonymized reporting, unless the IP-EBC Executive has a professional obligation to report such information: (a) to IPB-AFRC or AOC (in cases where systemic risks to CGIAR exist) or (b) to relevant law-enforcement authorities (should there be any evidence of criminal activities or behavior). In such cases the IP-EBC Executive will ensure that the Center's AFRC and Board are informed.
- g. Where management and oversight of any case is escalated, the relevant governing body or committee will have access to information requested to discharge this role, subject to appropriate non-disclosure agreements being put in place.
- h. Unauthorized disclosure of information by the IP-EBC Executive or any CGIAR staff member beyond the provisions set out above constitutes a breach of the CGIAR Integrated Partnership Code of Ethics & Business Conduct for Personnel.

⁴ **Data transfer agreement:** As data will be transferred between separate legal entities across different jurisdictions to permit the EBC Function to operate in line with this Escalation Framework, a data transfer agreement must be in place. This agreement should clearly define each party's role and responsibilities, and establish the purpose and scope of the data sharing.

⁵ Members of the Center Board and its AFRC, as part of the governance structure, have the authority to access sensitive data if they are involved in the investigation process, in accordance with internal policies. As the highest governing body of a Center, it is essential that the Center Board members and members of the Center AFRC are directly involved in any investigation concerning the Center's staff including the Director General.

In line with that policy, misuse or unauthorized disclosure of information may be considered as misconduct and may result in disciplinary action in accordance with applicable policies. In the event of such a breach, a complaint may be raised with the Chair of the AFRC of the respective Center (the IPB-AFRC Chair for the IP-EBC Executive) who shall follow the respective organization's procedures for cases of misconduct.

- i. Unauthorized disclosure of information by a member of a Board or its Committees constitutes a breach of the CGIAR Code of Conduct for Governance Officials.
- j. Similarly, failure by a Center EBC Lead or any other CGIAR official to fully cooperate with the IP-EBC Executive, the IPB-AFRC or the AOC in the discharge of their functions and to share information requested on ethics & business conduct cases constitutes a breach of the CGIAR Integrated Partnership Code of Ethics & Business Conduct for Personnel. In line with that policy, failure to share information with duly mandated investigative or oversight bodies may result in disciplinary action in accordance with applicable policies. In the event of such a breach, a complaint may be raised with the Chair of the AFRC of the respective Center who shall follow the respective organization's procedures for cases of misconduct.
- k. Failure to cooperate with the IP-EBC Executive, the AOC or the IPB-AFRC in the conduct of their investigatory or oversight functions by any member(s) of a Center Board or its Committees constitutes a breach of the CGIAR Code of Conduct for Governance Officials.

15. **Investigation Reporting & Follow up Action**

- a. Upon conclusion of an investigation, the oversight body with jurisdiction over the case based on severity — whether the EBC lead and Center/SO Management, Center AFRC, the IPB-AFRC, or AOC, as applicable — shall formally determine whether the investigation has been completed to satisfaction. This includes review of the final investigative report, assessment of the adequacy of evidence and process, and confirmation that due process was upheld.
- b. Following this determination, the oversight body shall:
 - Document its findings in the formal case record;
 - Ensure that any recommended actions by the investigator, including disciplinary measures or policy changes, are referred to the relevant DG/EMD of the employing entity for consideration and action based on

relevant Center/SO policy; with oversight from the Center/SO AFRC, in cases of serious misconduct.

- Communicate the conclusion to relevant parties within the limits of confidentiality and data protection laws;
- Report the conclusion, in summary form, through the IP-EBC Executive for inclusion in quarterly aggregated reporting.

Case Escalation Matrix

16. The Case Escalation Matrix below is dependent upon severity and shall be used when credible cases require escalation to maintain natural justice.

Severity	Types of Cases	Escalated To
Highest (Serious Misconduct of CEO or Governing/ Oversight Body)	<ol style="list-style-type: none"> 1. Credible allegations/cases of any serious prohibited conduct / misconduct involving a DG, EMD, or Governing Body members (Boards, and their committees), or the System Council⁶, and their Committees 2. Serious prohibited conduct / misconduct or breaches (e.g., corruption, bribery, fraud, sexual exploitation and abuse, sexual or other forms of harassment or discrimination, abuse of power, and criminal violations of the law, fraud) where individual(s) life or personal safety are at risk, that may have legal, reputational, or operational consequences and require immediate urgent handling. 	<ol style="list-style-type: none"> 1. IP-EBC Executive is informed of the allegation and the course of action proposed by the Center/SO AFRC. IP-EBC Executive has an opportunity to recommend escalation to IPB-AFRC or AOC at the outset and/or at any point during the procedure. 2. Center/SO AFRC who commissions and oversees third party independent investigation firm and receives report. 3. IPB-AFRC if Center Board determines that the majority of the Board and/or AFRC members are conflicted.

⁶ Allegations or reports involving members of the System Council or its committees, who represent institutions or organizations, will be referred to the relevant institution or organization employing the involved member, with the expectation that the AOC be informed of the conclusion.

Severity	Types of Cases	Escalated To
		<p>4. AOC if IPB determines that the majority of the Board and/or IPB-AFRC members are conflicted.</p> <p><i>Report is issued to the governing body that oversaw the case, based on the description above. In all cases, detailed report is shared with IP-EBC Executive.</i></p> <p><i>Aggregated summary reporting to IP-EBC Executive, for consolidation and reporting to the IPB-AFRC and AOC.</i></p>
High (Serious Misconduct)	Complaints involving serious misconduct/prohibited conduct, or breaches (e.g., corruption, bribery, fraud, sexual exploitation and abuse, sexual or other forms of harassment or discrimination, abuse of power, and criminal violations of the law fraud) where individual(s) life or personal safety are at risk, that may have legal, reputational, or operational consequences and require immediate urgent handling.	<p>Center/SO AFRC who commissions and oversees investigations which may be carried out by internal investigators such as internal audit, or independent third-party investigators as appropriate.</p> <p><i>Report is issued to the Center AFRC of IPB-AFRC.</i></p> <p><i>Detailed reporting to IP-EBC Executive.</i></p>
Medium (Misconduct)	Issues related to workplace behaviour, conflicts of interest, or breaches of internal policies, although significant, these issues typically do not pose an immediate critical impact.	<p>Center EBC lead who will determine how to investigate. <i>Report is issued to Center EBC lead.</i></p> <p><i>Aggregated reporting to Center AFRC and IP-EBC Executive</i></p>
Base	Minor policy infractions or issues that can be addressed through mediation or informal resolution may be categorized as low priority.	<p>1. Resolved internally through Center/SO resolution mechanisms, and/or</p>

Severity	Types of Cases	Escalated To
		2. Ombuds support as needed.

Investigations involving Senior Leaders & Members of Governing Bodies

17. To avoid actual, or the perception of conflicts of interest, and ensure objectivity, cases of serious ethical misconduct involving CEO's (DGs & EMD), and/or Members of Governing Bodies (Center Board, IPB, or their committees), or members of the System Council or their Committees, where relevant leaders, or governance officials, or oversight bodies may be conflicted will be:
 - a. managed through third party independent investigators, and oversight may be escalated from Center Board/AFRC to the IPB-AFRC, or
 - b. the IPB-AFRC to the AOC, if the entity where case originated determines its oversight body is conflicted and is unable to provide appropriate oversight.

18. Members of the relevant Governing Bodies that have a conflict of interest shall be recused from their involvement in these matters. In cases where a conflict of interest exists within an oversight body (e.g., Center AFRC, IPB-AFRC), and 50% or more of its members are recused from participation due to real or perceived conflicts, as defined by the Center Board, the matter shall be escalated to the next level of oversight, as follows. This escalation ensures objectivity and must be documented as part of the formal case record.
 - a. Center AFRCs escalates to the IPB-AFRC
 - b. IPB-AFRC escalates to the AOC

19. By accepting the escalation, the respective body and the governing body holding the fiduciary responsibility (IPB for the IPB-AFRC and SC for the AOC), its individual members and the respective institutions and governments they may represent, tacitly accept the potential liabilities derived from and through the escalation. At all points the respective and relevant regulatory and legal frameworks must be respected by all individual members involved.

20. Independent investigation reports regarding Senior Leaders or Governance Officials will be shared with the relevant Center's AFRC (for Centers), or the IPB-AFRC (for the SO), or the AOC (for the System Council) for consideration and to make recommendations to the relevant Governing Body for action. Aggregated summaries of compliance reports and investigation results related to the DGs/EMD or members

of Governing Bodies will be reported by the IP-EBC Executive through the IPB-AFRC to the AOC.

Independent Preliminary Review and Investigations

21. EBC preliminary reviews and investigations are conducted independently of the compliance functions. To ensure consistently high standards that are aligned with relevant policies, the IP-EBC Executive will maintain a set of IPB-AFRC pre-approved providers that comply with the highest requirements of any given Center/SO in the Integrated Partnership for independent investigations, in each jurisdiction in which the Integrated Partnership operates ensuring that these providers possess local capacity, legal capabilities, and cultural sensitivity. This roster will be used by all Centers and the SO.
22. Selection of providers shall be guided by structured criteria that ensure both impartiality and investigative integrity. This includes rotation of providers across cases where feasible, conflict-of-interest screening, and regional representation. In addition, investigative providers must demonstrate expertise in applying human rights-based approaches and, where appropriate, trauma-informed and victim-centric practices to ensure safe, respectful, and contextually appropriate handling of sensitive cases.

Sharing of Information

23. Guardrails must be incorporated to ensure the protection of confidentiality of the whistleblower, the affected party(s), interviewees, and those the complaints are made against, ensuring human right protection, providing of appropriate legal remedies within the relevant legal entity and ensuring that due process is upheld.
24. The IPB-AFRC, AOC and IPB may request additional information on any case, supplementing the regular aggregate EBC summary reporting on specific matters, through Center AFRCs. The information will be shared with measures in place to protect confidentiality (such as signature of non-disclosure agreements and redaction), ensuring that privileged information is not shared, the protection of the involved individuals' human rights, ensuring due process, and avoiding unwanted legal consequences and liabilities to the individuals receiving the information,⁷. At all point the respective and relevant regulatory and legal frameworks must be respected by all individuals involved.

⁷ Seeking advice from legal counsel and/or investigative independent third-party firm where required.

25. All personal and case-related data processed as part of the Ethics and Business Conduct escalation process shall be handled in accordance with applicable data protection laws, including the GDPR or equivalent national legislation, where relevant.
26. Appropriate safeguards, such as anonymization, redaction, and restricted access, shall be applied to ensure the confidentiality, privacy, and security of all individuals involved in reported cases.
27. Any breach of confidentiality that may result from the sharing of information beyond what is required for the proper discharge of the governing and oversight body's responsibility is considered serious misconduct and will be reported and investigated by third party independent investigative providers. Sanctions or other disciplinary measures may be applied for unauthorized information disclosure.

Prioritization of cases

28. Cases will be managed in order of priority, determined using the following criteria to assess the level of risk associated with each case to either low, medium, or high:
 - a. Seniority of the subject(s).
 - b. Number of Centers/ Offices involved and/or Number of subjects.
 - c. Seriousness of offense.
 - d. Availability of evidence supporting the allegation.
 - e. Potential monetary loss to the Center/SO & CGIAR.
 - f. Need for general deterrence / protect the reputation of the Center/SO & CGIAR.
 - g. Trends / patterns based on previous allegations or investigations in the Center/SO & CGIAR.

Disclosure to Donors

29. In accordance with contractual agreements relevant to the ethical misconduct case(s) and applicable policies, findings of serious ethical misconduct will be reported to relevant donor as required. Such disclosures will be made ensuring compliance with legal obligations, confidentiality protections, and due process rights. The decision to notify funders will be made in coordination with the relevant Center AFRC or IPB-AFRC, and with the advice of legal counsel, to ensure transparency consistent with international best practices.

Approval and Implementation

30. The Escalation Framework requires approval by Center Boards and concurrence from the IPB (on the recommendation of their respective AFRCs), and approval by the System Council on the advice of the AOC. Amendments to the Escalation Framework following its initial approval will be made in accordance with the CGIAR Internal Rules Framework.
31. The Escalation Framework is supported by harmonized policies on code of conduct, discrimination & harassment, safeguarding, whistleblowing and retaliation across the Integrated Partnership. Training and awareness sessions will be conducted for all staff, coordinated by the EBC Function, to ensure effective implementation.
32. By adopting this Escalation Framework, the CGIAR Integrated Partnership demonstrates its commitment to ethical excellence, fostering a culture of integrity and accountability in alignment with global standards and best practices.

Annex A: Examples of Misconduct & Serious Misconduct

Misconduct

1. **Minor Financial Improprieties**
 - low-value, unauthorized purchases or use of resources for personal purposes
2. **Conflict of Interest (Unreported)**
 - Failing to disclose relationships or outside interests that could influence impartiality
 - Engaging in business activities that could conflict with duties if not promptly addressed
3. **Workplace Conduct Issues**
 - Disorderly or indecent conduct
4. **Violation of Organizational Policies**
 - Minor misuse of organizational assets, such as using office supplies for personal use
 - Misuse or misappropriate use of facilities
 - Incapacity for work due to influence of alcohol or illegal drugs or improper use of legal drug
 - Criminal or civil offense within or outside employment deemed to render the employee unsuitable for employment

Serious Misconduct

1. **Repeated or habitual instances of misconduct** described above.
2. **Fraud and Major Financial Misconduct (Serious Financial Irregularities)**
 - Embezzlement, theft, or unauthorized significant use of funds or resources
 - Falsifying financial records, reports, or misrepresenting financial statements with intent to deceive
 - Accepting or offering bribes, kickbacks, or gifts that influence organizational decisions
 - Mismanagement leading to significant financial losses
3. **Significant Conflict of Interest**
 - Using one's position to benefit oneself, family, friends, or affiliated entities at the expense of the organization
 - Failing to disclose major conflicts of interest in matters involving procurement, hiring, or partnerships
4. **Corruption and Abuse of Power**
 - Misuse of authority, including favoritism in contracts, hiring, or promotions
 - Coercion or threats to influence staff or stakeholders for personal or professional advantage
5. **Harassment, Discrimination, and Workplace Violence (Serious Interpersonal Misconduct)**

- Harassment based on race, gender, age, religion, nationality, disability, or another protected characteristic
 - Sexual exploitation or abuse.
 - Sexual harassment, including unwelcome advances, inappropriate comments, or quid pro quo behavior
 - Physical intimidation or violence, creating a hostile work environment
 - accessing or downloading pornographic images
- 6. Health and Safety Violations**
- Willful neglect or intentional disregard for safety protocols, putting others at significant risk
 - Failure to report serious accidents or unsafe practices that endanger the workplace
- 7. Serious Breach of Confidentiality and Privacy**
- Unauthorized disclosure of sensitive or personal data, such as employee information or proprietary research
 - Sharing proprietary information with external parties or competitors, leading to potential harm or loss
- 8. Falsification or Manipulation of Information**
- Altering or fabricating important data, records, or reports with intent to mislead
 - Misrepresentation of qualifications, experience, or outcomes that could mislead stakeholders
- 9. Scientific and Research Misconduct**
- Plagiarism, falsification, or fabrication of research findings or data
 - Breach of research ethics, including misappropriation of funds or improper treatment of research subjects
- 10. Intellectual Property Violations**
- Unauthorized use, distribution, or theft of copyrighted materials, patents, or trade secrets
 - Failing to respect intellectual contributions in a manner that could lead to legal action or reputational damage
- 11. Retaliation Against Whistleblowers**
- Punitive action against employees who report misconduct or cooperate with investigations
 - Obstructing or harassing individuals involved in whistleblowing activities
- 11. Severe IT and Digital Misconduct**
- Deliberate use of organizational systems for illegal or highly inappropriate activities
 - Engaging in online behavior that breaches organizational policies and severely damages the organization's reputation

Annex B: Proposed Case Triage and Prioritization Framework

The triage and prioritization framework below is designed solely to serve as a basis to determine the relevant escalation pathway of cases and appropriate prioritization of investigative resources.

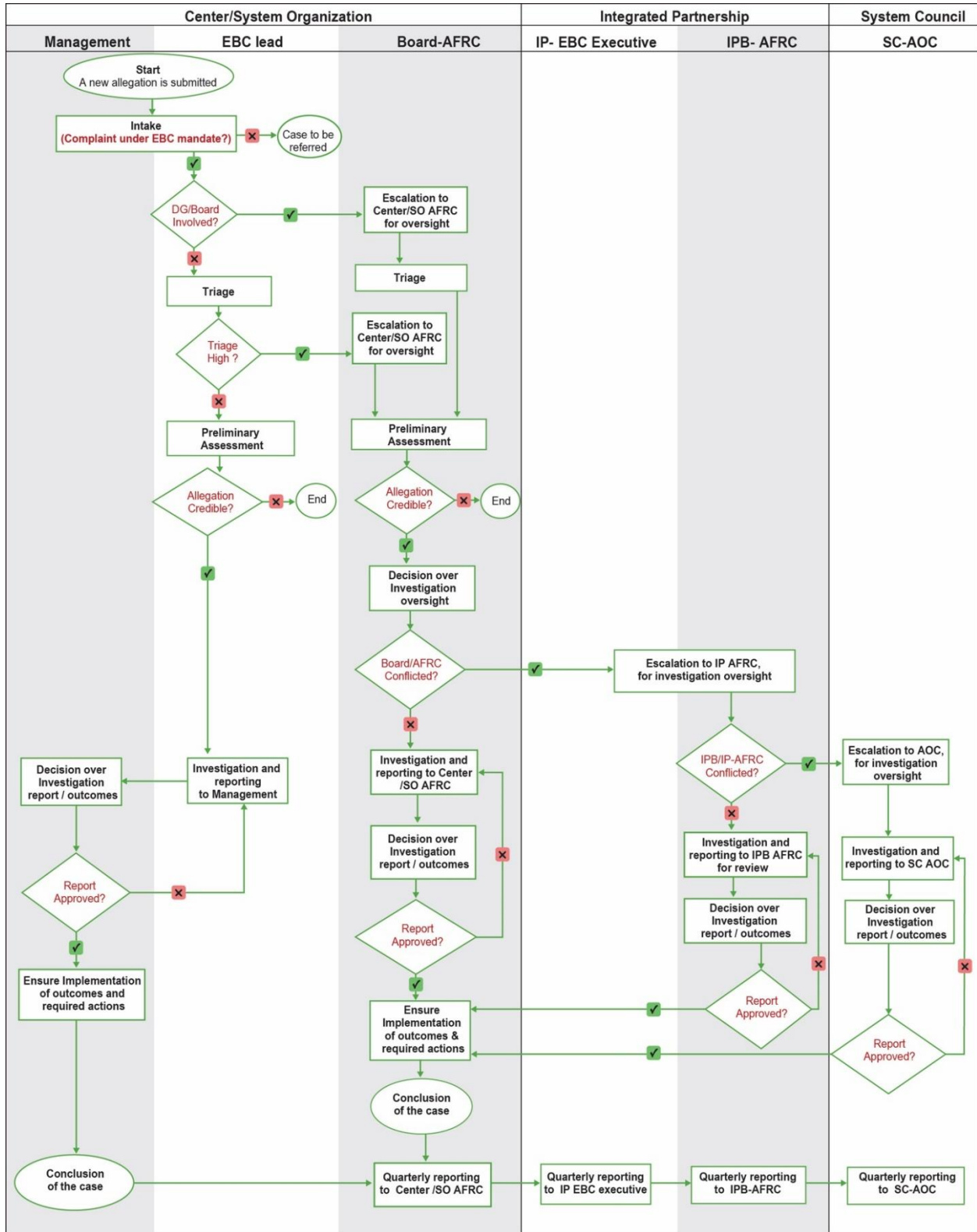
Case Triage Framework				
Criteria/ severity level	Base	MEDIUM	HIGH	HIGHEST
Potential value of Loss \$	Approx < 10k	10k- 100K	>100k	N/a
Type/Nature of misconduct	Others	Others	Sexual harassment, exploitation and abuse, child safeguarding, bribery of public agent/official	N/a
Number of affected person (s)	One	Few	Several	N/a
Hierarchy level of Subject of Complaint	Junior	Management	Center/SO senior management (excluding DGs)	Director Generals, EMD, or Governing Body members (Boards, and their committees), or the System Council and their committees
Risk to Safety (<i>victim, witnesses, informants, investigators</i>)	Low	Medium	High	N/a
Repetitive concerns/allegation	No	Multiple (from different sources)	N/a	If there is a failure of internal resolution mechanisms at the Center level.
Involvement of Law enforcement/ local authorities	No involvement	Minimal Involvement and Interest	Very Significant Involvement and interest.	N/a
Number of centers affected	One	One	One	Multiple Centers/SO affected
Legal, financial, or reputational consequences at CG system level	None	None	None	Yes
Center leadership / Board is conflicted	No	No	If Center/SO leadership is conflicted	If Center/SO board is conflicted
Case Prioritization Framework				
Priority level	Center/SO will complete the investigation work when resources permit.	Center/SO will conduct the investigation as and when resources are available.	Center/SO will give priority to complete the investigation as soon as possible.	Center/SO will give priority to complete the investigation as soon as possible.

Annex C: Escalation Process RASCI Matrix (Serious Ethical Misconduct)

Activity	Management			Governance / Oversight		
	DG/EMD	Center/SO EBC Lead	IP-EBC Executive	Center/SO Board (AFRC)	IPB (AFRC)	System Council (AOC)
Case Intake	A	R	S	I	I*	I*
Case Management	A	R	S	I	I*	I*
Case Triage	A	R	S	I	I*	I*
Determining if escalation is necessary	I	R	S	A	I*	I*
Appoint Investigator	I	R	R (if escalated)	A	A (if escalated)	A (if escalated)
Investigation Oversight	I	S	S (if escalated)	A	A (if escalated)	A (if escalated)
Closure of Investigation	I	S	S (if escalated)	A	A (if escalated)	A (if escalated)
Final Decision on Action	R	C	S (if escalated)	A	I (if escalated)	I (if escalated)
Summary Reporting	I	R	A	I	I	I
Donor Disclosure	R	S	S (if escalated)	A	A (if escalated)	A (if escalated)

R = Responsible (does the work) | A = Accountable (ultimate authority) | S = Support (as needed) | C = Consulted (asked for input) | I = Informed (kept up to date) | I* = Informed through quarterly aggregate reporting

Annex D: Escalation Flow Chart



Annex E: Escalation Scenarios

Scenario 1: Conflict of Interest and Favoritism Involving a Director General

Allegation of undisclosed conflict of interest and favoritism involving the Director General (DG) of Center (A) and a consultant. Reported through the Center (A) EBC Lead.

- a. Initial Intake: The complaint was triaged by the Center EBC Lead and determined to fall within the EBC mandate, assessed as credible and categorized as “serious misconduct.”
- b. Oversight Assignment: Center (A) AFRC confirmed it was not conflicted and could objectively oversee the case. The AFRC assumed oversight and commissioned a third-party, pre-approved independent firm to conduct the investigation.
- c. Investigation & Reporting: The investigation was conducted independently. The resulting report was reviewed and approved by the Center (A) AFRC and shared with the Center Board.
- d. Outcome Implementation: Center (A) AFRC ensured that recommended disciplinary and remedial actions were implemented by the Center’s DG and HR Director, consistent with internal policies.
- e. Reporting and System-wide Visibility: Aggregate anonymized summary included in Center (A)’s quarterly report to the Center (A) AFRC and the EBC Executive. The EBC Executive compiled system-wide reporting for IPB-AFRC review and optional commentary to the AOC.

Scenario 2: Bribery Involving a Center Board Member

Allegation of bribes paid by a service provider to a Center (A) Board member. Received via the Center (A) EBC Lead.

- a. Initial Intake: The complaint was reviewed and determined to be within the EBC mandate and credible, categorized as “serious misconduct.”
- b. Oversight Assignment: The Center (A) AFRC determined that a majority of its members were conflicted or recused. Per escalation thresholds, the case was escalated to the IPB-AFRC which agreed to assume oversight.
- c. Investigation & Reporting: The IPB-AFRC commissioned an investigation through an independent, pre-approved firm under the EBC Function. The report was reviewed by IPB-AFRC and shared with the IPB.
- d. Outcome Implementation: IPB-AFRC coordinated with Center (A) AFRC to oversee implementation of recommended actions. Center (A) ensured appropriate remedial actions in accordance with policy.
- e. Reporting and System-wide Visibility: Aggregate anonymized summary included in Center (A)’s quarterly report to the Center (A) AFRC and the EBC Executive. The EBC Executive compiled system-wide reporting for IPB-AFRC review and optional commentary to the AOC.

Scenario 3: Sexual Harassment Involving System Organization and Center Staff

Sexual harassment allegation involving a System Organization staff member and a Center (A) staff member. Initially reported to the DG of Center (A).

- a. Initial Intake: Complaint deemed credible and under the EBC mandate. Categorized as “serious misconduct.”
- b. Oversight Assignment: Center (A) AFRC confirmed it was not conflicted and assumed oversight. The EBC Executive was consulted and IPB-AFRC was informed.
- c. Investigation & Reporting: Center (A) AFRC commissioned an investigation by an independent firm. The EBC Executive coordinated with the System Organization to ensure cooperation. The report was shared with Center (A) AFRC, the Center Board, and IPB-AFRC.
- d. Outcome Implementation: Center (A) AFRC and IPB-AFRC ensured implementation of outcomes through both Center and SO governance channels. Whistleblower protections were upheld.
- f. Reporting and System-wide Visibility: Aggregate anonymized summary included in Center (A)’s quarterly report to the Center (A) AFRC and the EBC Executive. The EBC Executive compiled system-wide reporting for IPB-AFRC review and optional commentary to the AOC.

Scenario 4: Medium Severity Case of Financial Misconduct

Allegation of cash diversion (~USD 1,000) by a financial accountant at Center (A), reported to the Center EBC Lead.

- a. Initial Intake: The case was determined to fall within the EBC mandate and categorized as medium severity based on value and subject role.
- b. Oversight Assignment: The EBC Lead conducted the triage and provided recommendations to the Center (A) DG, who authorized an internal investigation to be carried out by the Center’s internal audit team.
- c. Investigation & Reporting: Internal audit concluded the investigation and submitted the report to the DG. The report was approved, and actions were coordinated with the HR Director.
- g. Outcome Implementation: DG and HR Director implemented required disciplinary measures.
- h. Reporting and System-wide Visibility: Aggregate anonymized summary included in Center (A)’s quarterly report to the Center (A) AFRC and the EBC Executive. The EBC Executive compiled system-wide reporting for IPB-AFRC review and optional commentary to the AOC.