# Misconduct Incident Management Regulation

**January 2023**

## General information

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If you have any general questions about this regulation, please contact: misconduct@sos-kd.org. For questions related specifically to child safeguarding, please contact childsafeguarding@sos-kd.org. For questions related specifically to PSHEA, please contact pshea@sos-kd.org.
The SOS Children’s Villages International policy framework was approved by the General Assembly in June 2021 and has three binding levels (foundations, policies and regulations) and a non-binding level (user guides).
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Purpose

The purpose of this regulation is to lay down the process for SOS Children’s Villages International and its member associations on how to manage suspected incidents of misconduct, as guided by the principles set out in this regulation. Misconduct means any breach of the SOS Children’s Villages Code of Conduct or of any policy or regulation referred to in the Code of Conduct with respect to the safeguarding of children and adults and to the protection of the financial assets of SOS Children’s Villages.

Categories of rules

This regulation defines the following categories of rules.

**Legally binding (B):** legally binding rules of a regulation constitute the minimum common standard to be implemented and applied by each member association and SOS Children’s Villages International. Subject to applicable national laws, member associations or SOS Children’s Villages International can apply a stricter standard for regulations or its individual rules, but they cannot go below the standard of rules as defined in the regulation. Each member association and SOS Children’s Villages International are obliged to notify the CEO in the event one or more rules of the regulation contravene applicable national laws and they must mitigate the consequences by proposing alternative solutions to ensure compliance. The breach of a legally binding rule entails consequences, depending on the gravity of the breach. This includes disciplinary measures for employees, suspension/termination of governing body membership or suspension/expulsion of federation membership. Legally binding rules are phrased as “must” requirements.

**Recommended (R):** recommended rules go beyond the minimum common standard and are not required to be implemented and applied by member associations. SOS Children’s Villages International, as the norm-setting authority, however, will implement and apply recommended rules, and all member associations are strongly encouraged to follow this example as far as applicable national laws or their internal policies allow, in order to achieve more uniform standards across the federation. Recommended rules are phrased as “should” requirements.

Principles of incident management

The management of all suspected cases of misconduct must be guided by the following principles which demonstrate our commitment to pursue and respond to all violations of the SOS Children’s Villages Code of Conduct and the policies or regulations referred to in it and to prevent further harm:

**Duty of care.** SOS Children’s Villages International (SOS CVI) and its member associations (MAs) recognize their duty to protect the persons in their programmes and in their organizations from harm. The duty of care extends to all persons involved in the reported misconduct, including victims/survivors, witnesses, subjects
of complaints, and all those responding to the incident such as incident managers and investigators, and to the resources entrusted to the respective organization.

**Do no harm.** SOS CVI and its MAs ensure that the actions to respond to any concern adhere to the principle of “do no harm” with regard to reporters, victims/survivors, witnesses, subjects of complaints, programme participants, staff, families, community members, and anyone else who may be impacted by, or responding to, the misconduct. Do no harm is defined as the organization’s responsibility to minimize the harm that may be created inadvertently as a result of the organizational activities.

**Confidentiality.** SOS CVI and its MAs protect personal data of reporters, victims/survivors, witnesses, and subjects of complaints against any unauthorized use outside of the misconduct incident management process. Information is available only to a limited number of people, authorized by designated senior manager, for the purpose of responding to the defined misconduct. Information can be disclosed to any third party only based on consent of the persons concerned, unless the organization is bound to do so by a specific legal obligation according to the national or local legislation (e.g. referral of criminal incidents to governmental authorities). Special attention needs to be paid in case of risk of harm to self or others. This is to fulfil the principle of “do no harm.”

**Victim/survivor-centred.** The wishes, feelings, needs and rights of the children and adults who experience misconduct are prioritized at every step of the response. Without exception, every child and adult affected by misconduct has access to appropriate, accessible, timely and quality support services, and tailored to the individual’s needs, experiences and choices. This approach reinforces the agency and self-determination of the affected persons.

**Child-centeredness and child participation.** All decisions affecting children are made in the best interests of the child. This means hearing the child’s views, considering every child’s individual needs, choices and experiences, and assessing both short- and long-term impact.

**Non-discrimination and inclusion.** An inclusive and non-discriminatory response is informed by an understanding that risk is influenced by power and societal and organizational norms which exclude people based on their sex, gender, gender identity, race, ethnicity, colour, language, age, sexuality, ability, income, religion and other identity characteristics.

**Due process.** SOS CVI and its MAs respond to reported or identified behaviour or acts in accordance with this regulation.

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1. “‘Personal data’ means any information relating to an identified or identifiable natural person (‘data subject’); an identifiable natural person is one who can be identified, directly or indirectly, in particular by reference to an identifier such as a name, an identification number, location data, an online identifier or to one or more factors specific to the physical, physiological, genetic, mental, economic, cultural or social identity of that natural person.” See Article 4, Point 1, of the Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation).

2. “Freely given, specific, informed and unambiguous indication of the data subject’s wishes by which he or she, by a statement or by a clear affirmative action, signifies agreement to the processing of personal data relating to him or her.” See Article 4, Point 11, of the Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation).
**Inter-sectoral approach.** SOS CVI and its MAs do not operate alone when responding to misconduct and abuse but rather work with other stakeholders and groups, including state authorities, if and as required.

**Accountability.** All staff and persons working on behalf of SOS CVI and its MAs, including contracted personnel, volunteers, members of governing bodies, and other persons associated with SOS Children’s Villages, including partners, are required to report misconduct in accordance with the SOS CVI policy framework and the applicable national laws.

**Proportionality.** The least intrusive response appropriate to the misconduct or risk presented is made.

**Professionalism.** The response to all reports of defined misconduct is timely, planned, thorough, and fully documented. Decisions are based on established facts and are fair, impartial, and without discrimination.
Incident management team

1. Each MA, and SOS CVI for each GSC-run operation, must appoint a national incident management team, which is in charge of responding to reports, as described in this regulation.

1.1. The national incident management team must provide the organizational response to all reported and identified incidents of misconduct experienced by children (child safeguarding), adult programme participants, community members, staff and those working with and on behalf of SOS Children’s Villages as well as partners (adult safeguarding), and fraud, corruption and other misuse of SOS Children’s Villages assets (asset protection), be it at programme or national level.

1.2. Subject to item 1.4 below, the number of members of the national incident management team (incident managers) depends on the needs of the MA / GSC-run operation.

1.2.1. If the MA or SOS CVI (for GSC-run operations) has received more than 20 reported or identified incidents of misconduct a year on average in the past three years, the MA or SOS CVI must appoint a full-time incident manager. For every 20 reported or identified incidents a year, the MA or SOS CVI must appoint an additional full-time incident manager. The specific profile of this full-time incident manager depends on what type of incidents the national incident management team has been mainly responding to.

1.2.2. Should there be a significant increase in the number of reported incidents within a six-month period, the MA or SOS CVI must appoint an additional full-time incident manager or focal point.

1.2.3. In case of a high misconduct and safeguarding risk profile, the MA or SOS CVI must appoint a full-time incident manager even if the number of reported or identified incidents does not exceed on average 20 incidents a year. The risk profile is assessed through a regular risk assessment analysis conducted by the MA or SOS CVI.

1.3. The members of the national incident management team must be assigned by a designated senior manager.

1.3.1. In terms of the organizational structure, members of the national incident management team remain in their respective functional teams. The incident management team does not constitute a new organizational entity and they work together on cross-functional incident management.

1.3.2. In their capacity as incident managers, members of the national incident management team must report to a designated senior manager. This designated senior manager is responsible for leading the incident management team and coordinating the organizational response.
1.3.3. Line managers of the respective misconduct and safeguarding teams must not be members of the incident management team.

1.3.4. The roles and responsibilities of the incident managers (members of the national incident management team) must be included in their job description.

1.4. The national incident management team must include at least three members, representing the respective safeguarding teams (child safeguarding, adult safeguarding, asset protection). The team must include a member with HR expertise.

1.4.1. If and as required, the incident management team may bring in internal and external experts on specific misconduct and safeguarding topics.

1.4.2. The incident management team must consult the designated senior manager about the next steps with regard to dealing with a reported or identified misconduct, and must seek their approval.

1.4.3. Incident managers must not conduct investigations.

1.5. The national incident management team must not replace technical misconduct and safeguarding teams (child safeguarding, adult safeguarding, asset protection) at national and programme level. The work of technical misconduct and safeguarding teams focuses on prevention, raising awareness and capacity building. Incident management must not be a responsibility of these technical misconduct and safeguarding teams.

2. SOS CVI must establish for the General Secretariat (GSC) an incident management team which is in charge of incident management, as described in this regulation, in every International Office Region (IOR) and in the International Office (IO).

2.1. Members of an IOR incident management team must be assigned by the International Director Region or designated senior manager.

2.1.1. If the IOR has been involved in monitoring and/or direct management of more than 20 reported or identified incidents a year on average in the past three years, the IOR must appoint a full-time incident manager. For every 20 reported or identified incidents a year, the IOR must appoint an additional full-time incident manager.

2.1.2. Should there be a significant increase in the number of reported incidents within a six-month period, the IOR must appoint an additional full-time incident manager.

2.1.3. If a region has a high misconduct and safeguarding risk profile, the IOR must appoint a full-time incident manager even if the number of reported or identified incidents where the IOR is involved in incident management does not exceed on average 20 incidents a year.
2.2. In the context of incident management, the IOR incident management team must report directly to the IDR or to a designated senior manager, who is responsible for leading the incident management team.

2.3. The IOR incident management team must not replace the technical IOR misconduct and safeguarding teams. The work of the technical IOR misconduct and safeguarding teams focuses on prevention, raising awareness and capacity building.

2.4. The incident management team at the IO must be composed of incident managers from the respective misconduct and safeguarding departments or teams.

2.5. The IO incident management team must report directly to the Executive Board or to a designated senior manager, who is responsible for leading the incident management team.

3. Members of an incident management team (incident managers) must have a background and/or proven track record in incident management or a similar topic.

3.1. All incident managers must receive onboarding on incident management in SOS Children’s Villages within the first month of their assignment.

3.2. Incident managers who do not have relevant background or experience in incident management or a similar topic must receive specific training within the first month of their assignment, in addition to their onboarding by the respective organization.

3.3. All incident managers must participate in regular refresher trainings (at least once a year) on incident management.

3.4. The trainings can take place virtually or face-to-face, and they must be organized at least annually and cover the lessons learnt from the management of misconduct incidents and individual development needs identified during the annual performance appraisal.

3.5. The roles and responsibilities of a designated incident manager must be recognized as part of a respective position description and/or recorded in a personnel file. Required capacity development and ongoing trainings are an integral and mandatory part of such an assignment. Time and resources must be allocated accordingly.

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4. Every MA, and SOS CVI for each GSC-run operation, must define appropriate channels for reporting allegations of defined misconduct in the areas of child safeguarding, adult safeguarding and asset protection. As a minimum, the following options must be in place:

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3 This can be e.g. a deputy IDR or a designated CVI representative.
4.1. Face-to-face reporting to the relevant misconduct and safeguarding experts at programme level, who in turn inform the incident management team.

4.2. Face-to-face reporting directly to the members of the incident management team.

4.3. Dedicated email address and/or phone number (hotline), maintained by the incident management team.

4.4. Reporting boxes in all SOS Children’s Villages programmes, maintained by designated misconduct and safeguarding experts, who in turn inform the incident management team.

5. Reporting channels must include culturally sensitive and age-appropriate options that respond to the cultural diversity in which the organization operates globally and that meet the needs of the target group.

6. For the General Secretariat (GSC), the following reporting channels must be maintained:

6.1. Face-to-face reporting to the relevant misconduct and safeguarding experts, who in turn inform the incident management team.

6.2. Face-to-face reporting directly to the members of the incident management team.

6.3. Dedicated email address and/or phone number (hotline), maintained by the incident management team: misconduct@sos-kd.org (maintained by the IO), and, for example, misconduct-eucm@sos-kd.org, misconduct-wcna@sos-kd.org, etc. (maintained by individual IORs).

6.4. Whistleblowing channel (available here and here).

6.5. Feedback & Complaints form (available here).

6.6. Reporting boxes, maintained by designated misconduct and safeguarding experts, who in turn inform the incident management team.

7. In addition to the above reporting channels, any person may also report an alleged misconduct incident or concern of any kind to the external ombuds body in the country of the MA where the alleged misconduct occurred or where the concern originates.

8. To capture information provided through any of the existing reporting channels, the incident management team must use a standard initial incident report form. This initial incident report form is provided in annex 1.

9. Any staff member, contracted worker, volunteer, member of a governing body, or any other person associated with SOS Children’s Villages must report any misconduct incident that they

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4 Misconduct and safeguarding experts include e.g. members of a programme child safeguarding team, PSHEA, HROD, Internal Audit, or Finance and Controlling.

5 See note 4.

6 See note 4.
have become aware of to the respective incident management team within 24 hours or as soon as possible.

9.1. Reports must be made even if the identity of the subject of complaint or even the victim/survivor is unknown.

9.2. Reports must be made even if no specific evidence is available.

9.3. Reports must be made whenever a staff member, contracted worker, volunteer, member of a governing body, or any other person associated with SOS Children's Villages know or suspect that an incident of misconduct has occurred.

9.4. Failure to report may result in disciplinary actions against the respective staff member, contracted worker, volunteer, member of governing bodies, or any other person associated with SOS Children's Villages who failed to report the alleged incident.

9.5. It is strictly forbidden to interfere in the reporting process with the aim to influence a report of alleged misconduct. SOS Children's Villages takes action against a person involved in such interference. Depending on the gravity of the interference, the consequences may range from disciplinary action to reporting to law enforcement authorities.

9.6. Reporters must be protected from retaliation. Any action taken against a reporter must be approved by a governing body of the MA. In the case of SOS CVI (for GSC-run operations and the GSC), any action against a reporter must be approved by a designated senior manager one organizational level up.

10. MAs and the GSC should encourage reporters to use any other reporting channel that they deem appropriate and that is available to them.

10.1. Programme participants and staff must be informed of external partners they can turn to if they feel unsafe, like the child welfare authority, a child helpline or a children’s ombudsperson.

11. MAs and the GSC must accept both anonymous and named reports. All reports must be treated with equal seriousness.

12. Every reported incident must go through due incident management.

13. If it is concluded that an MA or a GSC staff member, contracted worker, volunteer, or any other person associated with SOS Children’s Villages has knowingly and wilfully made a malicious report intended to harm other persons or the organization, disciplinary action must be taken. A good-faith mistake about whether an alleged incident has occurred or about the nature of the incident cannot serve as grounds for disciplinary action.

14. MAs and the GSC must allow only qualified and regularly trained staff to maintain reporting channels and to manage reports received via these channels. All such staff must uphold strict confidentiality and need-to-know principles, and they must sign specific confidentiality agreements before taking up any incident management tasks.
15. After receiving an initial report, the incident manager must acknowledge receipt of the report to the reporter(s) and inform the reporter(s) about the next steps in managing the report. This must happen within 24 hours or as soon as possible after receiving the report.

15.1. The incident manager must inform the reporter(s) that they may approach the reporter(s) later with additional questions about the nature of the reported incident, persons involved, time frame, and location of the incident, so as to decide about appropriate next steps.

15.2. If the information in the initial report is not sufficient to assess the reported incident and decide about the next steps (see “Incident Registration” below), the incident manager must contact the reporter(s) who reported the allegations and ask the reporter(s) to provide this additional information within a maximum of 14 calendar days.

15.3. If the reporter(s) has/have not replied within this time frame, or has/have not provided sufficient information needed for incident assessment, the respective incident manager must formally close the incident and inform the reporter(s) accordingly.

**Incident registration**

16. In MAs and GSC-run operations, the respective incident management team must register every incident of misconduct in the area of child safeguarding, adult safeguarding or asset protection reported to the MA in the National Safeguarding Incident Register.

17. In the GSC, the respective incident management team must register every incident of misconduct in the area of child safeguarding, adult safeguarding, or asset protection reported to the GSC in the GSC Safeguarding Incident Register.

18. The incident management team must maintain the respective record on the register and update it after every incident review (see “Regular Review” below).

19. All information relating to misconduct incidents, including details about alleged victims/survivors, witnesses and subjects of complaint must be treated confidentially.

19.1. A strict need-to-know principle must be applied in all decisions about sharing any specific information about a reported misconduct incident and a person involved, including but not limited to their name, age, family background and medical conditions. Only persons directly involved in incident management are allowed to have access to this information.

19.2. All other individuals who, due to their specific role, need certain information about the reported incident must receive this information without the personally identifying data. The need-to-know principle must still be applied, and the incident management team must perform a thorough check whether the request for more information can be justified.
Incident assessment

Initial risk assessment

20. The incident management team who received the reported misconduct allegation must assess the reported allegation within the next 48 hours. This initial assessment must establish whether or not any of the following is applicable:
   a) There are any immediate risks to the victim/survivor, witness, reporter, subject of complaint or to the organization.
   b) A potential criminal act may have taken place.
   c) There is a conflict of interest, which requires escalating the responsibility for incident management to the next federation level.
   d) The incident may have broader, federation-wide impact going beyond the affected MA, and therefore the incident management process needs to be monitored by the GSC.

Immediate risks

21. If the incident management team establishes any immediate risks to the alleged victim/survivor, witness, reporter, subject of complaint or to the organization, the incident management team must inform the designated senior manager within the next 24 hours along with a recommendation on how to mitigate these risks.

21.1. Should there be any open questions that must be answered by the reporter so further actions can be decided, the incident management team must contact the reporter (if contact details are available) within the next 24 hours.

22. The incident management team must document all these actions in the respective incident register.

Potential criminal case

23. The designated senior manager who is responsible for coordinating the response and leading the incident management team must report to the relevant governmental authorities all misconduct allegations that may involve a criminal act according to the laws of the country in whose jurisdiction the incident reportedly occurred.

23.1. The designated senior manager must give due consideration with respect to countries and places where there are doubts about the integrity and/or competence of the police or other agencies, and where a referral of the incident to the respective authorities could therefore result in unlawful harm (e.g. torture or death) to the subject of complaint, for example.

23.2. Any decision not to report allegations that may constitute a crime to the police or other statutory authorities must be recorded. The decision must clearly state the reasons for non-
reporting to the authorities. The decision must be taken by the designated senior manager at the level of the organization where the allegation is being dealt with, and submitted for approval to the respective governing body.

Escalation

24. The respective incident management teams in MAs, GSC-run operations and in the GSC must apply the principle of escalation:

24.1. If the reported misconduct incident implicates a member of the national incident management team, the incident management team must escalate the incident to a designated senior manager who coordinates the incident management process, along with a recommendation for further action.

24.2. If the reported misconduct incident implicates one or more members of an MA’s or GSC-run operation’s management team, the national incident management team must escalate the responsibility for incident management along with a recommendation for appropriate next actions to the incident management team at the respective International Office Region (IOR) of the GSC. In the case of MAs in Western Europe and North America (EUNA), the national incident management team must escalate the responsibility for incident management to the incident management team at the IO. At the same time, the national incident management team must inform the chairperson of the MA’s governing body.

24.3. If the reported misconduct incident implicates one or more members of the MA’s supervisory board, the national incident management team must escalate the responsibility for incident management to the incident management team at the respective IOR of the GSC.

24.4. If the reported misconduct incident implicates one or more senior staff members of the IOR of the GSC, the IOR incident management team must escalate the responsibility for incident management to the incident management team at the International Office.

24.5. The incident management team at the International Office must inform the Executive Board that an incident has been escalated to the International Office, but must share with the Executive Board only general information about the nature of the incident, alleged victims/survivors (programme participants, staff, external third party), and the time frame of the alleged incident. This is to maintain confidentiality and independence of the incident management process.

24.6. If the reported misconduct incident implicates one or more senior staff members of the International Office of the GSC, the incident management team at the International Office of the GSC must inform the respective International Senate Committee of the incident, and recommend the next steps with regard to incident management.

24.7. If the reported misconduct incident implicates one or more members of a legal body of SOS Children’s Villages International, the respective incident management team in the
International Office of the GSC must escalate the responsibility for incident management to the president of the International Senate.

25. The respective incident management team must document all escalation decisions in the relevant safeguarding incident register.

**Allegation assessment**

26. After concluding the initial risk assessment, the incident management team which received the reported allegation must assess the available information about the reported allegation to decide whether there are sufficient grounds for investigation or other response actions. The incident management team must use a standard risk assessment form that is provided in the annex 2.

27. If the initial report does not contain sufficient information about the nature of the incident, persons involved, the time frame of the incident, and the location where it happened to proceed further with incident assessment and decide about appropriate next steps, the respective incident management team must contact the reporter(s) within 48 hours after receiving the report and ask the reporter(s) to provide this additional information within a maximum of 14 calendar days.

28. The assessment of the allegation must be an analysis of the information provided by the reporter and other available documentation, such as staff personnel files, individual development plans of the programme participants, etc., in light of the national legislation and SOS Children's Villages binding policies. It must not include any investigative interviews with the reporters, victims/survivors, witnesses, or subjects of complaints unless the responsible child welfare and/or law enforcement authorities specifically request them.

29. If the reported alleged misconduct does not fall under any type of misconduct defined in the SOS Children's Villages International binding policies and regulations, or any other document that is binding for the respective member association, the allegation is treated as a concern and is not pursued further under this regulation. Instead, the respective incident management team refers the concern to the appropriate units within an MA, GSC-run operation or GSC for resolution. The respective incident management team must document any such referral in the relevant safeguarding incident register.

30. If the reported or identified incident is not of a potential criminal nature and it is not required to refer the incident to the relevant governmental authorities, the incident management team must assess the information on the basis of the following criteria in order to determine whether or not an investigation can be opened:

   a) Does the alleged misconduct fall under any type of misconduct defined in the SOS Children's Villages International binding policies and regulations, or any other document that is binding for the respective member association?

   b) Who committed the alleged misconduct or is implicated in it? (Name and/or position of the subjects of complaint: staff member, governing body member, business partner, representative of governmental authority, etc.)

   c) What happened? (Precise description of the alleged misconduct, details of surrounding circumstances)
d) When did the alleged misconduct occur? (Date, time, time frame, duration, frequency)
e) Where did the alleged misconduct occur? (Country, programme location, facility)
f) Are external statutory authorities or responsible agencies willing and able to do an investigation?

31. With respect to alleged child safeguarding misconduct, additional information may be required for the decision on opening an investigation. Additional information on this process is provided in annex 3.

32. If the initial report does not meet the assessment criteria as set out above, the respective incident management team must give the reporter(s) the opportunity to provide further details within 14 calendar days. This communication must be made in a form that is appropriate to the age, and mental and cognitive development level of the reporter.

33. If the reporter(s) has/have not replied within 14 days, or has/have not provided sufficient information, the respective incident management team must formally close the incident and inform the reporter(s) accordingly. Once the incident is closed, the reporter may resubmit the allegation with new information, which the incident management team must treat as a new reported misconduct incident and register it in the respective safeguarding incident registry.

34. The incident management team, which conducts the allegation assessment, must conclude the assessment within 10 working days of receiving the allegation. If the incident management team has requested the reporter(s) to provide additional information on the reported incident, the time frame for concluding the allegation assessment is counted from the moment the reporter(s) respond(s) to the incident management team.

35. The respective incident management team must close the assessment of the reported incident by submitting a report to the designated senior manager within 3 working days, with a reasoned decision of whether or not the assessment criteria for opening an investigation have been met. If they have been met, the designated senior manager must hand over the assessment file and related materials to the designated investigation team for investigation.

36. The assessment report must be stored in the relevant safeguarding incident register.

Information flow on misconduct incidents from MAs and GSC-run operations to the GSC

37. If the incident management team determines that the reported incident of misconduct may have broader, federation-wide impact going beyond the affected MA or GSC-run operation, it must immediately inform the incident management team at the respective IOR of the GSC. Federation-wide impact means:
   a) incidents which have triggered or may trigger negative media coverage, loss of income due to negative perception of the situation by donors, or criminal investigation or other direct intervention by the relevant governmental authorities
   b) incidents where SOS Children’s Villages staff have been accused of sexual abuse

38. The incident management team of an MA or GSC-run operation must prepare a misconduct incident paper (provided in annex 4) for all misconduct incidents with a federation-wide impact
and submit it to the respective incident management team of the IOR. Such misconduct incident papers must be updated on a monthly basis regarding the progress of the situation, the support provided to the victims/survivors, or any measures taken to protect the assets of the organization. The national incident management teams must submit this monthly update to the IOR incident management team by the 10th day of the following month.

39. Where the MA or GSC-run operation has escalated the responsibility for incident management to the GSC in accordance with item 24, the respective IOR incident management team must submit the misconduct incident paper and all monthly updates related to it to the IO incident management team by the 10th day of the following month.

40. Where the IOR has escalated the responsibility for incident management to the IO in accordance with item 24, the respective IO incident management team must submit the misconduct incident paper and all related monthly updates to the EB by the 10th day of the following month.

Handover for investigation or other measures

41. If the incident management team establishes that the reported allegations meet the assessment criteria for opening an investigation in accordance with item 30, the incident management team must establish terms of reference for an investigation into the allegations and submit them to
   a) the designated investigation team, or
   b) an external investigation provider if the designated senior manager deems it necessary for reasons of objectivity, safety, or brand and reputation concerns. The designated senior manager who coordinates the incident management process takes this decision.

42. Apart from a recommendation to conduct an investigation, or in parallel to it, the incident management team may recommend other remediation measures in order to strengthen the relevant procedures in the respective MA and/or GSC office and to minimize potential risks. This may include e.g. organizing specific workshops for programme participants, staff, volunteers and partners; trainings for programme participants and staff, including child and youth care practitioners; or improving existing procedures. Support should also be offered, including mediation or specialized psychological and other support to the persons affected by the reported or identified misconduct.

42.1. All recommended actions, outcomes and decisions must be recorded. An action plan must be developed.
42.2. Recommended remediation and support measures must be included in the action plan, including the responsibilities of individual staff members and the time frame for implementation.

42.3. The decisions and actions must include informing other stakeholders as appropriate.

42.4. Whenever required, support must be provided to aid victims/survivors in overcoming traumatic experiences of the past and building resilience, and where necessary, enabling them to take steps towards a self-reliant life based on a tailor-made individual plan agreed with the victims/survivors and the MA and/or GSC.

43. MAs and SOS CVI (for the GSC and GSC-run operations) must inform their donors or partners about reported misconduct incidents, in accordance with valid contracts or agreements. Such information must be provided without the personally identifying data, unless they are directly involved in the incident management process.

44. Should an MA be required to inform their partners about a reported misconduct incident, it must inform the respective IOR to ensure proper aligned communication to the relevant stakeholders within and outside of the federation.

Regular review

45. The incident management team must review the status of the incident management at least once per quarter as long as the incident remains open, subject to item 46.

45.1. The review must focus on how the incident has been responded to, whether actions recommended in the incident assessment and/or conducted investigation have been taken, and what information is shared with relevant stakeholders.

45.2. After completing the review, the incident management team must update the relevant safeguarding incident register with the findings and the planned next steps.

46. Where the MA or GSC-run operation has escalated the responsibility for incident management, and where the incident may have broader, federation-wide impact in accordance with item 37, the IOR incident management team must review the status of the incident management at least once per month, as long as the incident remains open.

46.1. After completing the review, the incident management team must update the relevant safeguarding incident register with the findings and the planned next steps, and inform the respective IOR.

46.2. The IOR incident management team may request further clarification of the incident management status and the planned next steps.
47. The reporter and the victim/survivor have the right to inquire about the status of the complaint before they have been notified of the incident closure.

48. The designated senior manager must close the incident by signing off a closure notice, based on information provided by the investigation team (items 49.1 and 49.2) or by the incident management team (49.3).

49. A case can be closed only when one of the following conditions is met:
   
   49.1. The investigation confirms the allegation and all remediation actions have been implemented.
   
   49.2. The investigation finds the allegations are unsubstantiated or unfounded.
   
   49.3. The assessment of the allegations does not meet the defined assessment criteria.

50. If the action plan which addresses the conclusions of an investigation includes a legal action, the incident can be closed only once this legal action has been initiated and the legal process is beyond the control of SOS Children’s Villages.

51. The respective incident management team must prepare a final report containing key actions, related findings and lessons learned, to inform improvements in processes and practice as well as to identify future training needs.

52. For the incidents where the responsibility for incident management has been escalated to the GSC and incidents which may have broader, federation-wide impact, the incident management team must share the final report with the IOR incident management team.
   
   52.1. The IOR incident management team can enquire about the incident closure from the national incident management team.

53. The respective incident management team must insert the final report along with the closure notice into the relevant safeguarding incident register.

54. If the initial allegation against an SOS Children’s Villages staff member, contracted worker, volunteer, or any other person associated with SOS Children’s Villages has been substantiated and a disciplinary action has been taken, this information must be included in the personnel file of that person.

55. Should the initial allegation not be substantiated, the subject of complaint has a right to request a letter from the designated senior manager who coordinates the misconduct incident management process that specifically confirms that they were cleared of all allegations.
   
   55.1. The letter must be included in the personnel file of the respective staff member.
   
   55.2. Where appropriate and requested by the investigation subject, the designated senior manager must inform the staff and other relevant stakeholders (partner organizations, governmental authorities, etc.) of the outcome.
56. Once the misconduct incident is closed, the respective incident management team must communicate a summary of the key findings and actions taken to the reporter and/or survivor/victim.

56.1. The summary must be edited in a way that protects the confidentiality of all persons involved.

56.2. If the reporter is a child, they must be informed about the response outcomes in a way that is appropriate for their level of understanding.

56.3. The reporter must be informed of their right to appeal against the outcomes of the decisions and actions, in accordance with the procedures defined by the MA and/or GSC.

57. For incidents initially reported to the GSC, the IOR incident management team must inform the reporter of the findings and actions taken relating to the reported allegations.
## Definitions

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>adult safeguarding</td>
<td>Responsibility of SOS Children's Villages to individuals aged 18 years and above as staff, associates, programme participants, or members of the community, to prevent and stop both the risks and experience of harm, abuse or exploitation caused by SOS Children's Villages staff, associates, programmes or operations, while at the same time making sure that the adult's well-being is promoted, including, where appropriate, having regard to their views, wishes, feelings, and beliefs in deciding on any action.</td>
</tr>
<tr>
<td>asset protection</td>
<td>Responsibility of SOS Children's Villages to prevent and respond to fraud, corruption and other misuses of SOS Children's Villages assets.</td>
</tr>
<tr>
<td>child and youth safeguarding</td>
<td>All activities an organization undertakes to ensure that its staff, operations and programmes do no harm to children and youth and do not expose them to the risk of harm and abuse; that appropriate responses and effective management of concerns are in place; and that any concerns the organization has about children's and youth safety in its own programmes and within the communities they work in are reported to the appropriate authorities. Note: SOS Children's Villages works with a large number of youth. Youth will be safeguarded by SOS under the relevant laws and practice related to their status as a child under the age of 18 years and an adult over the age of 18 years.</td>
</tr>
<tr>
<td>incident management</td>
<td>The process of responding to a reported or identified incident of misconduct.</td>
</tr>
<tr>
<td>incident management team</td>
<td>The body made up of at least three members, representing the respective safeguarding teams or departments (child safeguarding, adult safeguarding, asset protection), who is in charge of responding to reported and identified incidents of misconduct.</td>
</tr>
<tr>
<td>incident manager</td>
<td>The person responsible for providing the organizational response to all reported and identified incidents of misconduct. They are appointed by a designated senior manager, who in turn is in charge of coordinating the response and making strategic decisions. Incident managers form an incident management team.</td>
</tr>
<tr>
<td>misconduct</td>
<td>Any breach of the SOS Children's Villages Code of Conduct or of any policy or regulation referred to in the Code of Conduct with respect to the safeguarding of children and adults and to the protection of the financial assets of SOS Children's Villages.</td>
</tr>
<tr>
<td>need-to-know principle</td>
<td>Information related to a reported incident of misconduct is shared with different stakeholders depending on their role in the process of responding to the incident.</td>
</tr>
</tbody>
</table>
- The designated senior manager coordinating the organizational response and the incident management team responding to the reported incident have full access to the information about the incident.
- Other staff receive specific information about the incident if they need it to fulfil their work-related tasks (e.g., an HR manager receives information necessary for a disciplinary process).
- All other stakeholders (e.g., the reporter, GSC staff, promoting and supporting associations) receive information without the personally identifying data about the incident to protect the confidentiality of all persons involved.

**reporter**
The person who reports an allegation, concern or suspicion of misconduct. The person can be anyone, including but not limited to former or current programme participants, former or current staff or associates at any level, partners, donors, contractors, and members of the public.

**safeguarding**
The responsibility that organizations have to make sure their staff, operations and programmes do no harm to children and adults. This includes preventing the risk of harm and abuse and reporting any concerns to the authorities.

For SOS Children's Villages, safeguarding is an umbrella term that covers child safeguarding (under the age of 18) and adult safeguarding (over the age of 18), including the prevention and protection from sexual harassment, exploitation and abuse.
Annex 1. Standard initial report form

**Incident no:** (Facility ID/year/no) __________________

<table>
<thead>
<tr>
<th>Details of the reporter:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: __________________</td>
</tr>
<tr>
<td>Sex: ☐ Male ☐ Female</td>
</tr>
<tr>
<td>Address: ___________________________________________</td>
</tr>
<tr>
<td>Telephone: __________________</td>
</tr>
<tr>
<td>Mobile: __________________</td>
</tr>
<tr>
<td>Fax: __________________</td>
</tr>
<tr>
<td>E-mail: __________________</td>
</tr>
</tbody>
</table>

**Position in or relationship to SOS:** _________________________

**Relationship to child / young person:** ___________________________

<table>
<thead>
<tr>
<th>Details of the concern:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Include details of the incident (what, who, where, when), what the reporter has observed, physical and emotional state of the victim (any cuts, bruises, behaviour and mood).</td>
</tr>
<tr>
<td>- Did the reporter speak directly to the victim?</td>
</tr>
<tr>
<td>- Did the victim report or disclose abuse? If so, what was said (use exact words of the victim)?</td>
</tr>
<tr>
<td>- If not, what made the reporter suspicious?</td>
</tr>
<tr>
<td>- Who else was there/saw what happened?</td>
</tr>
</tbody>
</table>

*Use additional page if necessary.*
### When was the report made?

| Time: _____ | Date: _____ | Reporting office/place: __________________________ |

### Victim's details:

**Complete as many details as possible**

<table>
<thead>
<tr>
<th>Name:</th>
<th>____________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex:</td>
<td>☐ Male  ☐ Female</td>
</tr>
<tr>
<td>Age:</td>
<td>_____ Date of birth: __________________</td>
</tr>
<tr>
<td>Address:</td>
<td>____________________________</td>
</tr>
<tr>
<td>Language/s spoken:</td>
<td>______________</td>
</tr>
<tr>
<td>Any disability:</td>
<td>____________________________</td>
</tr>
<tr>
<td>School:</td>
<td>______________ Class: ____ Teacher: ______________</td>
</tr>
</tbody>
</table>

Name and contact details of family of origin/legal guardians/care takers (delete as appropriate):

| __________________________________________ |

**Any other information?** What else is known about the victim? In case of a child or young person, provide information about other children in the household or family.

### Who is suspected or alleged to have harmed or put a child at risk:

**Complete as many details as possible**

<table>
<thead>
<tr>
<th>Name:</th>
<th>____________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex:</td>
<td>☐ Male  ☐ Female</td>
</tr>
<tr>
<td>Address/current location:</td>
<td>____________________________</td>
</tr>
<tr>
<td>Language/s spoken:</td>
<td>______________ Age: _____</td>
</tr>
<tr>
<td>Relationship to victim:</td>
<td>____________________________</td>
</tr>
<tr>
<td>Relationship to SOS:</td>
<td>____________________________</td>
</tr>
<tr>
<td>Occupation:</td>
<td>____________________________ Employer: ____________________________</td>
</tr>
</tbody>
</table>

Any other details (including physical description, current whereabouts):
Note: The alleged person must be presumed innocent until proven otherwise.

**Initial assessment of the reported incident**

1. Are there any immediate risks to the victim/survivor, witness, reporter, subject of complaint or to the organization?
   Include any immediate safety concerns such as access of alleged perpetrator to the victim.

   Has any emergency medical or other immediate support been provided? If so what, when and by whom? Is medical attention required?

2. Does the reported incident of misconduct fit to the criteria for a potential criminal act?

3. Is there any conflict of interest at the level of the organisation responsible to deal with the incident which requires an escalation to the next federation level?
   ☐ Yes
   Please provide more details:
   ☐ No

4. May the incident have broader federation-wide impact going beyond the affected MA?
   ☐ Yes
   Please provide more details:
   ☐ No

   *Who else knows? (e.g. national authorities, other agencies, family members, other individuals)*

**Actions taken to date?** *(e.g. referral to the police, social welfare etc.)*

1. Immediate risks

2. Potential criminal case

3. Escalation

**Completed by:**
Name:

Signature:

Date:
Annex 2. Standard assessment form

Incident no: (Facility ID/year/no)_____________________

Report received by: (name, position)

Date: Click or tap to enter a date.

Reporting channel: Choose an item.

Reported allegations related to: (GSC office or member association in the center of the allegations)

Incident assessment conducted by: (name, position)

Date: Click or tap to enter a date.

Conclusion of the incident assessment

Investigation required: Choose an item.

Organizational entity responsible for further incident management: Choose an item.

This incident assessment form provides a summary of the reported allegations, related SOS Children’s Villages International’s binding policies and regulations, and any open questions or comments important for further incident management. If an allegation consists of several aspects, it is important to assess these aspects separately.

If any of the questions is not relevant due to the nature of the reported incident of misconduct, skip this question and continue in completing the rest of the form.
<table>
<thead>
<tr>
<th>1.</th>
<th>Allegation</th>
<th>Related SOS CVI binding policies and regulations</th>
<th>Open questions or comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(Brief description of the allegation)</td>
<td>(where possible, provide references to specific articles or chapters)</td>
<td>(questions to be clarified in the course of the incident management)</td>
</tr>
</tbody>
</table>

**Immediate protection and medical and/or therapeutic support measures for the victim:**

*What is the current situation of the victim? Are there any immediate safety concerns?*

*Has any emergency medical or other immediate support been provided? Is medical attention required?*

*What other support measures for the victim are needed? Can they be organized by SOS Children’s Villages or is external support required?*

**Cooperation with external authorities:**

*Can the incident be referred to an external authority? If yes, which one (police, governmental authority, court, child welfare authority etc.)?*

*Does the incident fulfil criteria of a criminal offence? What are the legal obligations of SOS Children’s Villages?*

*How to cooperate with and best support the responsible external authority?*

**Informing the child’s family of origin:**

*What is the legal relationship between the biological parents and the victim? Are they the legal guardians of the child? Did the court limit / terminate their parental rights?*

*Depending on the legal relationship, who is responsible for informing the family of origin?*

*What kind of support can SOS Children’s Villages offer to the family of origin? Can this support be organized internally or is external support required?*
Involving other stakeholders:

Which other parties - such as the legal guardian and/or agency that referred the child to SOS Children’s Villages, other staff at regional and/or international level, need to be informed?

Are there any legal requirements regarding informing the legal guardian or any other external stakeholders about the incident?

Has a crisis communication plan been prepared?

Risk assessment:

<table>
<thead>
<tr>
<th>Risk no.</th>
<th>Who is at risk?</th>
<th>What factors place them at risk?</th>
<th>What is the risk?</th>
<th>What controls are in place?</th>
<th>Risk rating H,M,L</th>
<th>What additional agreed controls are to be put in place?</th>
<th>By whom?</th>
<th>By when?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
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<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Conclusion

In this section, summarize whether the reported allegations contain sufficient information to commission an investigation. Should an escalation be required, provide a rationale for such decision with a reference to specific allegations listed above.

<table>
<thead>
<tr>
<th>7</th>
<th>In case of collecting additional information about the victim(s) not contained in the initial report, please summarize it in a separate document attached to the risk assessment form.</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>It is important to collect all available information about the subject of complaint and other persons who put the victim at risk. Any additional information not included in the initial report needs to be summarized in a separate document attached to the risk assessment form.</td>
</tr>
<tr>
<td>9</td>
<td>The risk rating DOES NOT imply a classification of the form of abuse, i.e. to determine or decide if the incident is a 'severe' or 'mild' form of child abuse. SOS CVI take all forms of child abuse equally seriously.</td>
</tr>
</tbody>
</table>
Recommendations (next steps)

Recommendations from the incident management team that conducted the assessment to the designated senior manager regarding the next steps.
Annex 3. Additional information required for the decision to open a child safeguarding investigation

1. This Annex summarizes additional information that the incident management team needs to collect before making a decision on opening an investigation of reported allegations of child abuse and neglect.\(^\text{10}\)

1.1. In regard to the assessment of reported child safeguarding allegations, the incident management team may involve other staff who are able to support the discussion and decision-making based on their knowledge and experience or their responsibility with regard to the child or the family involved.

1.2. In case of accusation of a staff member, this staff member can be under no circumstances involved in the assessment.

Assessment areas

2. The incident management team must reflect on the following questions / areas:

2.1. Immediate protection and medical and/or therapeutic support measures for the child or young person affected by the abuse.

2.2. Any other specific needs of the child or young person affected by the abuse that need to be considered in the assessment process. This may involve e.g. past incidents of abuse where the child or young person was involved, disabilities, family history of the child or young person including previous placements in alternative care etc.

2.3. How to inform the child about the organizational response to the reported allegation and get their feedback on the process.

2.4. Which other parties, such as the legal guardian and/or agency that referred the child to SOS Children’s Villages, other staff at regional and/or international level, need to be informed or even directly involved?

2.5. How to cooperate with and best support the responsible external authority?

2.6. Informing the child’s family of origin.

Risk Assessment

3. The incident management team puts special focus on the potential risks associated with the reported child safeguarding allegation. The main purpose is to deepen the initial risk assessment with a particular focus on the following questions:

\(^{10}\) For a description of different forms of abuse, please refer to the SOS Child Protection Policy.
3.1. What is the risk?

3.2. Who is at risk?

3.3. What factors place the child or young person involved in the reported allegation at risk?

3.4. What protective measures are in place?

3.5. What is the risk rating of the incident? The incident management team calculates the risk rating based on the likelihood and impact of the potential future actions on the child or young person involved in the reported allegation.

3.6. What additional agreed protective measures are to be put in place?

4. The risks are reviewed and the findings are updated, whenever a significant change in the incident occurs.
# Annex 4. Misconduct incident paper

Please treat this as **CONFIDENTIAL** and share only on a strict need-to-know basis!

Please select the nature of misconduct

Please select version, Click or tap to enter a date.

## SUMMARY

Please ensure that all information included in the table below is updated and changes are marked in yellow when numbers, people, etc. change.

<table>
<thead>
<tr>
<th>Member Association / Programme Unit</th>
<th>Click here to enter Member Association and Programme Unit.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Incident number</td>
<td>Country ISO code/calendar year/order of the incident in the calendar year</td>
</tr>
<tr>
<td>Author</td>
<td>Click here to enter your name and position/function.</td>
</tr>
</tbody>
</table>

### Incident Description

*Please summarize the allegation(s) in one sentence.* Keep the description of the situation concise and focused on most important issues.

*The incident paper can also describe a broader situation in a member association with multiple allegations.*

### Incident Status

*Please summarize the current status* (in case of an information update, mark the new information yellow). Use bullet points and keep the summary short.

### People involved

Fill in here the different types of individuals affected by the abuse

<table>
<thead>
<tr>
<th>Individuals affected by the abuse</th>
<th>Number of persons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Choose an item.</td>
<td>Choose an item.</td>
</tr>
</tbody>
</table>
(‘victims/survivors’), and subjects of complaint (‘subjects of complaint’). You can select multiple categories.

For all selected categories, it is mandatory to insert the number of individuals involved.

<table>
<thead>
<tr>
<th>Subjects of complaint</th>
<th>Number of persons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Choose an item.</td>
<td>Choose an item.</td>
</tr>
<tr>
<td>Choose an item.</td>
<td>Choose an item.</td>
</tr>
<tr>
<td>Choose an item.</td>
<td>Choose an item.</td>
</tr>
</tbody>
</table>

Support provided to the individuals affected by the abuse
Fill in here the different forms of support that the person(s) affected by the abuse have received, be it from the organization or from external resources. You can select one or more of the suggested options.

- ☐ Psychological support
- ☐ Medical support
- ☐ Social support
- ☐ Access to legal support for criminal/civil proceedings
- ☐ Other
- ☐ No support provided

Current employment status of the subject of complaint (in case of SOS staff and associates accused of misconduct)
Provide this information separately for every staff member accused of misconduct.

Choose an item.

<table>
<thead>
<tr>
<th>Subject of complaint</th>
<th>Employment status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Choose an item.</td>
<td>☐ To be decided</td>
</tr>
<tr>
<td></td>
<td>☐ Cleared of all allegations</td>
</tr>
<tr>
<td></td>
<td>☐ Further support or training</td>
</tr>
<tr>
<td></td>
<td>☐ Suspended</td>
</tr>
<tr>
<td></td>
<td>☐ Warning letter</td>
</tr>
<tr>
<td></td>
<td>☐ Dismissed</td>
</tr>
<tr>
<td></td>
<td>☐ Reported to the governmental authorities</td>
</tr>
<tr>
<td></td>
<td>☐ Arrested</td>
</tr>
<tr>
<td></td>
<td>☐ Unknown (e.g. whereabouts of the accused person is not known)</td>
</tr>
</tbody>
</table>
## INCIDENT(S) STATUS AND STATISTICS

<table>
<thead>
<tr>
<th>Incident(s) Status</th>
<th>Reported to the external authorities</th>
<th>Organisational response</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐ Not reported</td>
<td>☐ Support to the victim provided</td>
</tr>
<tr>
<td></td>
<td>☐ Not accepted for further investigation</td>
<td>☐ Under investigation</td>
</tr>
<tr>
<td></td>
<td>☐ Under investigation</td>
<td>☐ Closed investigation</td>
</tr>
<tr>
<td></td>
<td>☐ Closed investigation</td>
<td>☐ Process for dealing with past incidents of abuse</td>
</tr>
</tbody>
</table>

**Closed investigation:**

<table>
<thead>
<tr>
<th></th>
<th>☐ Allegation upheld</th>
<th>Remediation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>☐ Allegation partly upheld</td>
<td>☐ Pending</td>
</tr>
<tr>
<td></td>
<td>☐ Allegation not substantiated</td>
<td>☐ Closed</td>
</tr>
<tr>
<td></td>
<td>☐ Allegation unfounded</td>
<td></td>
</tr>
</tbody>
</table>

| Incident(s) category                     | Multiple selection possible                                               |                                                               |
|-------------------------------------------|                                                                          |                                                               |
|                                           | ☐ Physical abuse                                                          | ☐ Sexual abuse                                                |
|                                           | ☐ Neglect and negligent treatment                                          | ☐ Emotional abuse                                             |
|                                           | ☐ Other                                                                   | ☐ Violation of children's privacy                             |

If you selected “other”, please click and enter details here.

| Date / time span of the incident(s)      |                                                                           |                                                               |
|-------------------------------------------|                                                                          |                                                               |
|                                           |                                                                        Date / time span when the incident(s) occurred. If this is not known, provide the reporting date and specify it in brackets. |                                                               |

### ALLEGATION(S) *(Please anonymize: no personal data, e.g., name, age, specific position)*

#### When was the allegation(s) first reported/identified?

Click here to enter the date.

#### Who reported/identified the allegation(s)?

Click here and choose from the drop-down list:

If you selected “other”, please click and enter details here.

#### How has the allegation(s) been reported/identified?

Click here and choose from the drop-down list:

#### Who has the allegation(s) first been reported to?

Click here to enter persons who have been informed about the allegation(s).

#### What was reported/identified? Please describe the allegation(s) in greater detail.

Click or tap here to enter text.
## Incident Management

| Initial risk assessment | Is there an immediate risk for the safety of the victim/survivor, witness, reporter, subject of complaint, or to the organisation?  
This includes incidents when the misconduct will continue if no response is taken by the organisation, incidents where the victim/survivor, witness, or reporter are at risk of reprisal by the subject of complaint etc.  
Choose an item.  
May the reported incident be a potential criminal act?  
Fill in here whether the reported incident is according to the national laws a criminal act. Keep in mind that it is mandatory to report all potential criminal incidents to the relevant governmental authorities.  
Choose an item.  
Is there any conflict of interest at the level of the organisation responsible to deal with the incident, which requires an escalation to the next level up?  
Choose an item.  
Could the incident have broader federation-wide impact going beyond the affected MA?  
If you select ‘Yes’, select the reason for the GSC involvement in a monitoring role. It is possible to select multiple options. Please note that you are required to inform the respective IOR proactively about the incident.  
Choose an item. |
|---|---|
| Action(s) taken to respond to initial assessment | Victim/survivor, witness, reporter, subject of complaint or organisation safety  
Provide details of the actions taken to mitigate the risks to the victim/survivor, witness, reporter, subject of complaint, or organisation.  
Click or tap here to enter text.  
Reported to law enforcement authorities or other relevant state authorities  
Fill in whether the member association informed relevant governmental authorities about the incident.  
☐ Yes  
☐ No  
If not, why: Click or tap here to enter text.  
Incident monitored by the GSC  
Provide the rationale why the GSC gets involved in a monitoring role.  
☐ SOS staff member or associate has been accused of sexual coercion and abuse.  
☐ High media coverage or the risk of it.  
☐ Donor interest or the risk of it.  
☐ Public interest or the risk of it.  
☐ Government interest (incl. criminal investigation) or the risk of it.  
Responsibility for incident management escalated  
☐ Responsibility escalated to national level  
☐ Responsibility escalated to IOR level  
☐ Responsibility escalated to IO level |
| Allegation assessment | The alleged misconduct falls under any type of misconduct defined in SOS Children’s Villages International’s binding policies and regulations, or any document that is binding for the respective member association.  
☐ Yes |
Legal guardian of the child informed:
☐ Yes
☐ No
☐ Not applicable

Institutional funding affected
Should an institutional donor fund the concerned programme location, it is required to provide this information in order to inform the colleagues in charge of Institutional Partnership Development (IPD).
☐ Yes
☐ No

External statutory authorities or responsible agencies are willing and able to do an investigation.
☐ Yes
☐ No
☐ Not applicable

Internal investigation required:
☐ Yes
☐ No

INVESTIGATION  (Please anonymize; NO personal data, e.g., name, age, specific position)

If the investigation is planned or ongoing, what are the ongoing and/or next investigative steps? (e.g. nomination of investigators, document collection, document review, interviews, research)

Click here to describe the ongoing and next investigative steps.

Summarize those investigative steps that have been completed and the investigation results:

Click or tap here to enter text.

TIMELINE

Please fill in the timeline with the most relevant milestones / events in the investigation of the case. You can add more text boxes by copy and pasting.

PROGRESS IN INCIDENT MANAGEMENT

It is important to provide an update on the most significant developments in incident management that happened since the previous update. In the provided information, answer the questions listed below. If possible, keep the structure of the information as suggested below. List the updates from top (newest update) to bottom (previous information).

Individuals affected by the abuse
- What is the current situation of the individuals affected by the abuse? Has there been any significant change?
- Which support actions have been newly put in place for the individuals affected by the abuse, or significantly extended?
- Have you learned about any further victims and survivors of abuse? If yes, when and how you got this information?

Alleged abusers
- What is the status of a judicial process against the alleged abusers (if applicable)?
- What is the status of disciplinary actions against accused staff (if applicable)?

Organizational changes and improvements
- Which actions have been taken to strengthen child safeguarding work in the respective programme location (member association) to prevent similar incidents in the future?

Update from Click or tap to enter a date.

REMEDIATION

Which remediation (corrective) measures have been taken both immediately and based on the investigation results? Please use the table below to list and describe remediation measure, responsible person/unit, status and deadline.

For example: HR measures (e.g., suspension, individual trainings and sensitization sessions, disciplinary warning, demotions, termination); review access rights (e.g., keys, IT); review signatory powers; process enhancements. Please try to list the various measures in bullet points and mark the actions bold to give a better overview.

Click or tap here to enter text.

<table>
<thead>
<tr>
<th>Remediation measure (Please anonymize)</th>
<th>Responsible person/unit</th>
<th>Completed</th>
<th>Pending</th>
<th>Deadline</th>
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PRIVACY STATEMENT
SOS Children’s Villages acknowledges the protection of natural persons in relation to the processing of personal data as a fundamental right. Hence, there are limitations on what personal data we share both internally and externally. When possible violations of law occur, it is of special importance to safeguard the integrity and reputation of individuals involved. Therefore, it is necessary to anonymize information that might infringe on the personal rights of the affected persons, e.g., name, age, and position.

ANNEX: BACKGROUND INFORMATION ABOUT THE INCIDENT