

Partners In Health
Complaint and Whistleblower Policy

Approved by Lori Silver, General Counsel

Date: March 28, 2022

1. Policy statement

Partners In Health (PIH)'s mission of providing healthcare to the poor and vulnerable demands that we all adhere to the highest standards of professional and personal ethical conduct. We are committed to maintaining a culture of openness and accountability to prevent misconduct and wrongdoing from occurring and to address issues when they do occur. PIH staff members should be confident that they can raise concerns and challenge poor practice and behaviour. We welcome the opportunity to address concerns as early as possible so that we can investigate and take appropriate corrective action. This policy provides guidance on how to report specific concerns, how PIH will investigate and respond to complaints, and protections against retaliation for reporting.

2. Purpose

Partners In Health's Complaint and Whistleblower Policy facilitates open and honest communication concerning governance, finances, and compliance with law, policy, and ethical principles.

3. Scope

This Policy applies to all PIH staff (directors, officers, employees, interns and volunteers) at PIH care delivery sites, university sites and coordination sites, as well as partners and service providers with whom Partners In Health has a contractual relationship (collectively, "PIH Associates"). While the mechanisms outlined in this Policy can also be used by PIH patients and community members, local community complaint mechanisms are set up to facilitate patients and community members in raising concerns and reporting wrongdoing by PIH.

4. What to report

All PIH Associates are encouraged to report under this Policy any concerns about any of Partners In Health's activities that they believe, in good faith, to be illegal, unethical, questionable or contrary to our policies. These matters include, without limitation, violations of law; fraud, theft or embezzlement; improper financial transactions or use of PIH's assets; accounting, internal controls or auditing irregularities such as undocumented transactions or misleading financial reporting; kickbacks; bribery; improper concealment, falsification or destruction of PIH records; sexual exploitation, sexual abuse or sexual harassment; unsafe working conditions; violations of donor requirements; and violations of PIH's Code of Conduct or conflicts of interest policy. Sexual exploitation, abuse and sexual harassment also may be reported via PIH's PSEAH focal



points at PIH care delivery sites, as described in the PIH's Policy on Prevention of Sexual Exploitation, Abuse and Sexual Harassment.

This policy is not intended to address general complaints about the workplace, interpersonal issues, or other issues not related to the violations described above. General complaints should be raised with supervisors or other responsible functions within PIH. Harassment, discrimination and other workplace complaints also should be reported directly to Human Resources at PIH sites.

2. Reporting

For our employees, interns and volunteers, we want you to feel comfortable in approaching your supervisor or management in instances where you believe violations of policies or standards have occurred. If at any time PIH Associates have concerns about misconduct and wrongdoing as described in this Policy, they also may raise the concern directly by sending an email to our Speak Up mailbox: speakup@pih.org.

PIH Associates also may contact the following PIH officers:

PIH Chief Operating Officer Patrick Ulysse at pulysse@pih.org

PIH General Counsel: Lori Silver at lsilver@pih.org

PIH Chief Financial Officer Megan Carbone at mcarbone@pih.org

Reporting may be done anonymously, although this may impede the ability of PIH to assess the complaint or conduct its investigation. PIH encourages non-anonymous reporting.

3. Confidentiality and cooperation

PIH will treat a report under this Policy as confidential, subject to and limited by the need to investigate, obtain legal advice and act in consultation with counsel, prevent or correct the action, and comply with applicable laws.

Reporting individuals are expected to act in good faith, co-operate in internal investigations, and provide truthful information in connection with any governmental, law enforcement or other inquiry or investigation.

4. Non-retaliation for reporting or refusing to act

PIH will not engage in retaliation by terminating, demoting, disciplining, harassing or discriminating against any PIH Associate, if the PIH Associate has:

- in good faith disclosed information under this Policy to a PIH Associate who has authority over such associate or to another PIH Associate who has authority to investigate or correct the problem, where the PIH Associate has a reasonable belief that the

information demonstrates a violation or possible violation of law or PIH policy, or involves conduct that is otherwise unethical or questionable;

- provided information to any government agency or law enforcement agency regarding conduct that the PIH Associate reasonably believes involves a violation or possible violation of law, or who testifies or otherwise assists in a governmental or law
- enforcement investigation, hearing, or inquiry concerning such a violation or possible violation of law;
- exercised his or her rights as a whistleblower in any former employment; or
- refused to participate in an activity that would result in in a violation of law.

If a PIH Associate believes that he or she has been subject to any such retaliation or other adverse action by PIH, the PIH Associate should report such action as set out in Section 2. Any PIH Associate who engages in such retaliation may be subject to disciplinary action, up to and including termination of employment. For purposes of this policy, the term “law” includes federal and state statutes, and federal, state, and local rules and regulations.

6. Investigation and action

PIH will investigate reports under this Policy, and any reports of related retaliation or discrimination, and take such corrective and other actions, including consulting with counsel and follow-up communication with the reporting PIH Associate, as it believes is appropriate under the circumstances.

7. Other laws and policies

This Policy is intended to supplement and not supersede applicable laws and PIH policies including, without limitation, those relating to harassment, discrimination, or personnel matters.

8. Document owners and revision history

Document owner: Lori Silver, General Counsel, Partners In Health

Version	Date		Revision Notes
0.2	February 2018	Revised	
0.3	February 2021	Revised	Policy revised as part of strategic PSEAH review
0.4	March 2022	Revised	General updates

Review date: March 2022

END