

# Whistleblowing Incident Management Guideline

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### **Approvals** This document requires the following approvals.

Title	Signature	Date
Chairman, Board Audit Committee		
Chairman, Board of Directors		

The document is in line with Information Security Management Systems (ISO27001:2022) as stated in the link below:

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## Acronym/Definitions

Acronyms	Definitions
WB	Whistleblowing
PenCom	National Pension Commission
NCCG	Nigerian Code of Corporate Governance
BAC	Board Audit Committee
LPPFA	Leadway Pensure PFA

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#### Whistleblowing incident management guideline

#### 1.0 Purpose of the Guideline:

The purpose of the Whistleblowing guidelines is stated below:

- i. To establish a framework for receiving, investigating, and addressing whistleblowing reports
- ii. To outline the procedure for investigating and dealing with all reported cases of illegal and unethical conduct and any other misconduct across the Company
- iii. To ensure confidentiality of the Whistleblowing activities and provide proper channels to enhance escalation
- iv. To promote a culture of transparency, accountability, and integrity

#### 2.0 Scope of the Guideline:

- i. It applies to all Shareholders, Board of Directors, Employees, Customers, Suppliers, Vendors Contractors, and other Third-party stakeholders.
- ii. It covers all forms of whistleblowing, including financial, ethical, and legal concerns

#### 3.0 Key Guiding Principles:

- 1. **Confidentiality:** Protect whistleblower identities and maintain confidentiality throughout the process
- 2. **Neutrality:** Ensure impartial investigation and decision-making
- 3. **Transparency:** Provide clear communication and updates to whistleblowers and stakeholders
- 4. **Accountability:** Hold individuals and departments accountable for actions and decisions
- 5. **Protection:** Safeguard whistleblowers from retaliation and victimization

#### 4.0 Whistleblowing Procedures:

1. **Receipt of Whistleblowing Report:** Establish multiple reporting channels (e.g., email, phone, in-person). The channels below have been established.

Register or report any incidents through any of the following channels.

- 1. Send an email to: Whistleblowing.hotmail@iodccg.com
- 2. Call a dedicated whistleblowing toll free line: 080000REPORT OR 080000737678
- 3. Make a report by filling a form online via web portal: <a href="https://iodccg.com/wb/">https://iodccg.com/wb/</a>
  The Whistleblower may report incidents anonymously or choose to declare their identity.
  - a. Acknowledge and document the report: The Whistleblowing incident recipient, Institute of Directors Centre for Corporate Governance (IoDCCG) shall

acknowledge receipt of the incidents, document the report and present the report to the Authorized personnel\* as stated in the Executed Service Level Agreement.

- b. **Ensure confidentiality and anonymity (if requested):** The IoDCCG shall ensure confidentiality of the reported incidents and anonymity of the whistleblower (if requested).
- c. **Assess the report's credibility and severity:** The IoDCCG shall assess the report's credibility and severity before sharing the report with the Authorized personnel in order to determine the appropriate escalation process. All reports received by the Ombudsman must be escalated within 48 hours to one or more of the authorized personnel outlined in the SLA at Leadway Pensure PFA.
- 2. **Initial Assessment and Triage:** The IoDCCG shall review and evaluate the initial incident reported for credibility and severity within 48 hours by carrying out preliminary assessment before sending the reported incident to the Authorized personnel. The IoDCCG The following shall be carried out
  - a. **Determine the nature and scope of the incident:** The IoDCCG shall determine the nature and scope of the incident. The incident shall be reported on monthly, quarterly basis and report immediately if the reported incident is material.
  - b. Assign a unique case number on any reported incident for tracking and documentation
    - a. Where the Whistleblowing incident concerns the employees of LPPFA (except Head of Internal Audit), the reporting line shall be directed to the the Chairman of Board Audit Committee, Head, Internal Audit and Head, Compliance respectively.
    - b. Where the Whistleblowing incident concerns the Head, Internal Audit or any Heads of departments, the reporting line shall be directed to the Chairman, Board Audit Committee,
    - c. Where the whistleblowing matter concerns Board members, the reporting line shall be directly to the Board Chairman
    - d. Where the whistleblowing matter concerns the Board Chairman the reporting line should be escalated to the Shareholders
  - c. **Prioritize the incident based on severity and urgency:** The IoDCCG shall prioritize any incident based on severity and urgency.
  - 3. **Investigation**: A thorough and independent investigation shall be conducted. The investigation shall be conducted either internally or outsourced to an external Consultant depending on the nature of the incident.
    - a. Appoint an independent investigator or investigation team: The Head, Internal Audit shall be responsible to carry out independent internal investigations or refer to the Company Secretary/Legal Advisor or the Head Human Resources as appropriate. The investigations can also be outsourced to the independent Consultant or escalated to the law enforcement agencies depending on the severity. Where the report indicates that a company employee has breached laid down company policies, the Head Internal Audit will refer the matter to

- the Head Human Resources for investigation in line with laid down disciplinary procedures as contained in the staff handbook/and or HR policies manuals.
- b. **Prioritize the reported incident based on severity and urgency:** The investigator shall prioritize the reported incident based on severity and urgency
- c. Gather evidence and interview witnesses: The investigator shall gather evidence and interview witnesses
- d. **Identify potential risks and impacts**: In conducting the investigation, the investigator shall identify potential risks and impacts of the reported incident to the organization with respect to reputational damage.
- e. **Maintain a thorough and objective investigation record:** The investigator shall maintain and give a thorough and objective investigation record
- f. For external whistleblowing reports and or internal reports that need to be escalated to the police or law enforcement, the matter will be escalated to the Company Secretary/Legal Advisor for investigation to ensure that LPPFA is legally covered at all times.
- g. Provide updates on investigation progress and findings (if requested)
- 4. **Analysis and Findings**: The Investigator shall draw conclusions and identify corrective actions
  - a. **Analyze evidence and draw conclusions:** The investigation shall analyze he evidence gathered during the investigation and draw conclusion
  - b. **Identify root causes and responsible individuals/entities:** The investigation shall identify the root cause of the reported incident and responsible individuals or entities.
  - c. **Determine necessary corrective actions:** The investigator shall determine necessary corrective actions.

#### 6.0 Reporting and Disclosure:

The investigator shall communicate findings to relevant stakeholders (i.e. Authorized personnel) based on the escalation points specified in section (4.2b) of this guideline.

- a. **Report findings to relevant stakeholders (e.g., management, board, regulators):**The investigator shall report findings to the relevant stakeholders (i.e. Authorized personnel). In case the reported incident involves regulatory infraction, the findings shall be reported to the regulator through the Compliance officer.
- b. **Ensure transparent and timely communication:** When reporting the findings, the investigator shall ensure transparency and timely communication.
- c. **Protect the whistleblower's identity (if requested):** The investigator and the authorized personnel shall protect the whistleblowers by observing the principle of anonymity.
- d. **Corrective Actions:** After the reporting of findings and recommendations, the corrective actions including disciplinary measures (if required) shall be developed, implemented and monitored.

#### 7.0 Whistleblower Protection and Support:

The Whistleblowing activities are meant to offer guidance and protection throughout the process by ensuring

i. The whistleblower confidentiality and anonymity

- ii. The Protection and prohibiting retaliation and victimization against whistleblowers
- iii. That disciplinary actions are taken against individuals who engage in retaliation and victimization behaviour against whistleblowers
- iv. Any whistleblower who gave wrong or untrue information shall be dealt with in line with the Company's policy and Disciplinary procedures

#### 8.0 Documentation and Record-Keeping:

All the parties to the Whistleblowing report shall

- a. Maintain detailed records of the incident and investigation
- b. Document all findings, actions, and decisions
- c. Store records securely and confidentially
- d. Retain records for a minimum of [10] years or in line with the Company retention policy

#### 9.0 Review and Evaluation:

There should be regular review and evaluation of the whistleblowing incident management process to identify areas for improvement and update policies and procedures accordingly.

This guideline will be reviewed by the Head of Internal Audit every two years, or earlier as the need arises. Any substantive changes will be formally approved by the Board of Directors through the Board Audit Committee.

#### 10.0 Training and Awareness:

The organization shall (through the Ombudsman)

- a. Provide regular training on whistleblowing policies and procedures
- b. Raise awareness about the importance of whistleblowing
- c. Encourage a speak-up culture within the organization

#### 11.0 Responsibilities:

- a. **Board Audit Committee:** Oversee Whistleblowing policy implementation and incident management guideline
- b. **Ombudsman:** Monitor all reported incidents and report to the Authorized personnel as stated in the Executed Service Level Agreement
- c. Investigators (Internal or External): Conduct impartial investigations and analysis
- d. **Management:** Implement recommendations and any corrective actions from the whistleblowing report and monitor progress
- e. **Human Resources**: Provide whistleblower support and protection and investigate all reports related to breach of company policies by employees, in line with laid down disciplinary procedures in the staff handbook/HR policies manual.

By implementing this guideline and any other related documents, LPPFA shall demonstrate its commitment to transparency, accountability, and integrity.

#### NB:

\*Authorized Personnel (i.e. designated and authorized receivers) refers to individuals who have the permission, clearance, or authorization to receive the report of whistleblowing activities. The following are Authorized personnel/Authorized receivers and their purpose:

The Compliance Officer shall receive the report on monthly basis or as required and monitor compliance when the need arises. He also communicates the report with the Regulatory authority if the need arises.

The Head, Internal Audit, shall receive the report every month, every quarter or as required. He carries out independent investigation of any reported matters and report to the BAC.

The MD/CEO shall receive notification about the report from the Compliance officer.

The Chairman of the Board Audit Committee shall receive all the reports every month, quarter or as required. The Chairman of the Board shall receive all the reports through the BAC and if the reported case is about the Board members, the Board Chairman shall receive the report directly.