

Quality Council of India



MANUAL ON ETHICAL PRACTICES

Quality Council of India

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FOREWORD

Quality Council of India (QCI), since its inception, has been extensively involved in fostering quality among all its stakeholders through voluntary certification schemes, design & delivery of customized capacity building programmes, making strategies for implementation & sensitizing a cross-section of stakeholders on new developments on quality in areas related to international framework of accreditation, industry, healthcare, environment, education & training etc.

The main objective of laying out this manual is to set into force a well-defined & transparent risk management / risk mitigation mechanism, which on one hand will help to structure the existing systems / procedures to minimize leakage of resources / information and on the other hand would help in making systems / procedures more transparent and accountable in its dealings with stakeholders. For accomplishing this activity it is utmost important that all the QCI employees and the concerned stake holders come forward to involve themselves into this process of establishment of ethical machinery in QCI & its constituent boards. Furthermore, Integrity, probity and uprightness of officials manning this system are an indispensable factors in ensuring good governance and establishing an ethical machinery in QCI.

I am glad to see the initiative of Ethics department in bringing out the first edition of the 'Manual on Ethical Practices'. The manual is an effort to comprehensively cover all the relevant issues and instructions relating to the various schemes / work being done by QCI & its boards. The manual also captures the essence of existing practices in the government and industry and has been developed to suit the requirements of an international organization like QCI.

Any suggestions to further improve the manual is always welcome.

Secretary General

Place:

Date:

QCI POLICY ON ETHICS

Quality Council of India (QCI) since its inception has been intensely involved in improving the quality among all stakeholders by advising them with the solutions to improve their quality initiatives, by designing of voluntary certification schemes, design & delivery of customized capacity building programmes, making strategies for implementation and sensitizing a cross-section of stakeholders on new developments on quality.

The prime motto of QCI in laying out this Manual on Ethical Practices is promotion of professionalism, Transparency, Promptness and Impartiality in the organisation. The ethics policy of QCI & its associated boards namely: NABET, NABH, NABCB & NBQP, recognize the importance of Values & Ethics in the functions and Governance of an organisation.

The ethical System in QCI is committed to assist the Management to promote Transparency & Parity in its decisions and operations for providing an effective service to our stakeholders.

CHIEF ETHICS OFFICER (CEhO)

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CHAPTER – 1 INTRODUCTION

1.1 IMPORTANCE OF ETHICAL PRACTICES IN AN ORGANISATION

For the growth of any organisation it is utmost important for its employees to follow certain ethical practices. Inculcation of such practices in the organisation culture besides helping in eradication of malpractices, corruption etc. from the organisation, helps in improving its productivity and building up the confidence of its stakeholders in its functions & functionaries.

Ethical policy of QCI acts as a tool in the hands of Management to make the organisation as a whole healthy, prosperous, productive & sensitive to the needs and requirements of the public / its stakeholders. Further, it also assists the Management in identifying areas vulnerable to complaints / malpractices / pilferage / leakage of resources / information and suggest preventive measures to plug the loopholes in the system.

1.2 ETHICAL PRACTICES FOR QCI STAFF

Every QCI employee, including those working in Boards is bound to observe certain rules of conduct and discipline in discharging his / her duties. The Code of Discipline which is binding on a QCI employee may be both written and unwritten. The employee is expected to maintain absolute integrity and devotion to duty at all times and is bound to conduct himself / herself in accordance with the guidelines stipulated in the matter.

The employee should not only be honest in its official functions but should also conduct himself / herself in private life in a manner that his / her actions are not questioned on suspicion of dishonesty and lack of integrity. He / she should not indulge in corruption / malpractices and other irregularities which will or has the potential to malign the image of QCI.

1.3 OBJECTIVE

QCI is committed to implement the best practices leading to transparency & impartiality in all its policies & functions. The Objective of this ethics manual is to lay out guidelines, organisational structure and procedures to be followed for implementation & management of ethical machinery in the organisation and keep it activated at all times. This manual provides a framework for taking necessary punitive / preventive activities towards the fulfilment of the objectives of QCI in this respect. This also aims to introduce fool proof devices in the existing system, fine

tune the existing system & build a system that ensures corruption free environment in the organisation.

1.4 SCOPE OF THE MANUAL

This manual extends to all QCI employees (appointed on short term basis / contractual appointments / regular employees) QCI accredited agencies and Associated experts/assessors. This manual stipulates procedures, practices, punitive / preventive actions to strengthen the ethical practices / machinery in QCI. However, these provisions contained in the Manual, will have exemptions wherever procedure is laid down in a standard / guidance document of international agencies, of which QCI /its constituent Board is a member.

1.5 RESPONSIBILITY OF IMPLEMENTATION

This manual lays down the responsibility of implementation of the policies for strengthening the ethical machinery in the organisation squarely on the Head of the Office (Secretary General) through Chief Ethics Officer (CEhO).

1.6 SYSTEM OF DISRIBUTION & AMENDMENT / REVISION FOR THE MANUAL

The Chief Ethics Officer (CEhO).is vested with the responsibility of issuing the manual after the approval of the Head of the Office (Secretary General). The manual will be posted on the QCI website (protected mode - ready only), QCI staff / employee / stakeholder can view it for their information and as a guidance to the general public.

QCI may revise this manual as and when required. Once revised the existing version will be removed from the site and new version with revision no, month & year of revision will be uploaded on the QCI site. The new version will be applicable from the day it is approved by the Governing body of the QCI and posted on website (the date from which the revised manual is effective will be indicated on the manual).

1.8 OTHER GUIDING / INSTRUCTIONS, MANUALS OF QCI

QCI has laid down following operational / instructional / Service Manual to act as a guiding documents for its employees to discharge their duties effectively & efficiently:

- (i) Service Manual
- (ii) Finance Manual (Part of Service Manual)
- (iii) Sexual harassment of women at workplace.

- (iv) Any other instructions / circulars /orders issued from time to time by the competent authority.

All the QCI employees are required to strictly / judicially follow the stipulated guidelines so as to create a transparent and ethical system of governance within the organisation.

CHAPTER – 2 CHIEF ETHICS OFFICER

2.1 APPOINTMENT OF THE CHIEF ETHICS OFFICER IN QCI

The Chief Ethics Officer shall be appointed by the Secretary General, QCI after the approval of Chairman, QCI. Further, the Chief Ethics Officer shall be appointed on part-time basis, by assigning additional responsibility to the employee of QCI not below the level of Deputy Director. The tenure of the part-time CEhO will be three years, in the first instance. He / She will report directly to the Secretary General in so far as matters related to ethics, complaints, malpractices are concerned. It shall be ensured that the employee appointed as Chief Ethics Officer is not handling any work which may lead to conflict of interest in the duties assigned to him/her.

2.2 ROLE AND RESPONSIBILITY OF THE CHIEF ETHICS OFFICER

The Chief Ethics Officer (CEhO) shall independently handle all the matters related to ethics, complaints and malpractices concerning the organisation objectively and impartially and will discharge the onerous responsibility of maintaining probity and integrity in the organisation. He / She will take /suggest preventive as well as punitive measures to ensure the corruption free climate in the organisation. These measures will include but not limited to:

- a) Taking all possible measures to strengthen ethical practices;
- b) Taking steps to keep the ethical machinery activated all the time;
- c) Making periodic inspections of the corruption-prone areas;
- d) Taking steps to expedite completion of preliminary investigations / oral inquiries;
- e) Taking all such measures as may be necessary for eliminating or minimizing the scope of corruption and malpractices.
- f) Inculcating strong ethical practices amongst staff and officers of the organisation.
- g) Liase with the Nodal point and replying to queries and complaints forwarded by DIPP from time to time.
- h) Report status to Governing body

2.3 CODE OF CONDUCT FOR THE CHIEF ETHICS OFFICER

- a) The CEhO should have devotion to the assigned duty.
- b) He / She is required to display absolute integrity, impartiality, fairness, objectivity in all functions and actions,

- c) He / She should conduct investigation without personnel prejudices and any influence.
- d) To act objectively in collecting the facts and evidence- both oral and documentary.
- e) The CEhO shall evolve mechanisms & develop channels to cover the areas vulnerable to corruption for conducting preventive checks.
- f) Before taking up a complaint received from any source for investigation, CEhO is required to ensure that it has an Ethical angle and after the complaint has been taken for investigation, CEhO will Plan adequately before commencement of an investigation and make reasonable assessment of time required.
- g) CEhO should investigate each case in detail to form a logical picture of all the facts and evidence. However, he / she should verify the authenticity of the source of information while investigation.
- h) CEhO will ensure to complete the investigation process unflinching within defined / reasonable timeframe and conclude the report of investigation in scrupulously fair and just manner by linking all facts and evidence. CEhO is required to be firm in conviction and determination.
- i) CEhO should not be instrumental in building a false case against an employee, conclude the investigation in haste, disclose source of information / divulge the identity of the complainant and act irresponsibly in official conduct.
- j) The CEhO shall maintain absolute confidentiality during the process of investigation.

2.4 ACCESS TO DOCUMENTS

The CEhO by virtue of the powers conferred to her /him by QCI is empowered to seize / call for / take into custody, any document / record / material pertaining to the complaint / allegation received, for the propose of investigation. All the Boards / departments are required to cooperate with the Ethics department in fulfilment of the assigned mandate, by way of the following;

- (i) Providing of records / documents / relevant information for inquiry
- (ii) Providing of guidance documents and manuals related to the scheme.
- (iii) Implementation of the suggestions w.r.t streamlining of the existing processes to help to make them more transparent and less complex thereby reducing the scope for corruption.

CHAPTER – 3 COMPLAINTS, INVESTIGATIONS & DISPOSAL

3.1 COMPLAINTS

QCI is a highly vibrant organisation with its emphasis on self-reliance, profitability and competitiveness. In order to meet the challenge of Quality Assurance in the sectors such as Education & Training, Environment, Hospitals, skill certification, MSME etc., QCI has evolved & set into force, well defined transparent accreditation mechanisms. For achieving its objectives it is utmost important that its employees, empanelled assessors, Technical Experts and accredited agencies function in a transparent & responsible manner and do not resort to any unethical practices (including corruption, malpractice and Misconduct).

Complaints form a very vital source of information for any organisation by providing a feedback on (i) effective implementation or otherwise of the processes / procedures stipulated in respect of the schemes / programs under its ambit. (ii) Information related to unethical activities if any practiced by any of the employee and or associated agencies / persons.

In view of the above, it is utmost important that the complaint is not vague or contain sweeping general allegations (redressal of grievances should not be the focus of complaints). Complaints must contain factual details, verifiable facts and related matters.

3.2 AUTHORITIES FOR SUBMISSION OF THE COMPLAINT

Aggrieved party may submit a complaint to any of the following QCI authorized representatives:

- (i) Chairman, QCI
- (ii) Secretary General, QCI
- (iii) CEO of the respective board /Departmental Head.
- (iv) CEhO

3.3 TYPE AND NATURE OF THE COMPLAINTS

- 3.3.1 The complaint can be submitted in the manner such as Written – Signed, Oral / Verbal and Anonymous / Pseudonymous. However, it should be ensured that when an oral / verbal complaint is received, the identity of the complainant is identifiable / verifiable.. It may be noted that QCI reserves the right to consider the complaint of Anonymous / Pseudonymous nature.

3.3.2 Based on the merit and contents of a complaint it may be classified under following categories for its early disposal:

Category of Complaint		Description of Complaint
Category -1	:	Complaints simple in nature & not involving misconduct, delinquency, Procedural lapses, ethical angle etc.
Category - 2	:	Complaints serious in nature i.e. involving misconduct, delinquency, procedural lapses e.t.c, but not involving any ethical angle
Category – 3	:	Complaint involving ethical angle.
Category -4	:	Complaints relating to purely administrative matters such as, such as late attendance, disobedience, insubordination, negligence, lack of Supervision or operational or technical irregularities, sexual harassment at workplace etc.
Category - 5	:	Anonymous / Pseudonymous Complaints
Category - 6	:	Complaint by way of parliament question / RTI application

3.4 SOURCE OF INFORMATION

3.4.1 The various probable sources from where QCI may receive a complaint are defined as under:

- a) Complaints received from employees of the organization (Information on corruption /malpractices on the part of the QCI officials may also be received from their sub-ordinates. While it is expected for an employee to submit the complaint through proper channel however, a direct complaint may also be considered if supported by relevant documentary evidence).
- b) Complaints received from stakeholders /general public.
- c) Complaints received from associated Ministries
- d) Complaints received from People’s representative’s M.P., M.L.A. etc.
- e) Surprise Checks/ Internal Audit Reports.
- f) Reports of irregularities in accounts detected in the routine audit of accounts; e.g. tampering with records, over-payments, misappropriation of money or materials etc.
- g) Complaints and allegations appearing in the press / Media etc.

- h) Source information, if received verbally from an identifiable source, to be reduced in writing.
- i) In addition, the Chief Ethics Officer may also devise and adopt such methods, as considered appropriate & fruitful in the context of nature of work handled in QCI, for (i) collecting intelligence about any malpractice and misconduct conducted by any of the employee / associated agency /empanelled assessor (ii) receiving and inquiring into public interest disclosures against acts of corruption, wilful misuse of power or discretion, or criminal offences by QCI officials.

3.5 REGISTRATION OF COMPLAINTS

3.5.1 The complaint received from any source by concerned board / concerned department / SG secretariat should be noted chronologically (as it is received or taken notice of) in a Complaint register at the respective Board / department or Ethics department as the case may be. The complaint should be recorded in a format specifying the following:

- (i) Date of the complaint,
- (ii) Source of the complainant
- (v) Name of the complainant,
- (vi) Category of complaint (written / oral / Anonymous /Pseudonymous),
- (vii) Nature of the complaint (involving QCI staff /Assessor/accredited agency)
- (viii) Type of complaint (involving ethical /vigilance angle or not),
- (ix) Action taken with the date.
- (x) Date of disposing of the complaint.

3.5.2 The complaints in which there is an allegation of corruption or pecuniary motive; or if the alleged facts prima facie indicate an element or potentiality of a vigilance angle should be entered in a separate register.

3.6 PROCEDURE FOR HANDLING & DISPOSAL OF COMPLAINTS RECEIVED DIRECTLY BY THE CONCERNED BOARDS / DEPARTMENTS.

3.6.1 Any complaint received directly by the constituent Board of QCI or any of its department (excluding Ethics) shall be examined by the concerned CEO or the designated employee for its veracity . Based on its initial examination it shall be categorised in accordance with the categories listed in clause 3.3. The complaint shall than be handled and disposed of as per the procedures stipulated below:

3.6.2 In case the nature of the complaint is in accordance with category -1 (listed above), it shall be dealt with as per the internal laid out procedure of the concerned Board.

3.6.3 In case the nature of the complaint is in accordance with category -2 (listed above), the respective board shall conduct internal inquiry at its end to verify the factual position of the allegations made therein.

(a) If no serious observations are noticed, the board may dispose of the complaint under intimation to CEhO.

(b) However, if some serious observations are encountered, it shall forward the same to SG, QCI alongwith the copy of complaint, inquiry report and necessary documents for further decision in the matter.

3.6.4 In case the nature of the complaint is in accordance with category -3, the CEO shall forward the same to ethics Department. However the concerned Board after constituting an internal inquiry in the matter, shall also forward the same alongwith the relevant documents to Central Ethics department in a reasonable time period.

Note:

The copy of the Internal Inquiry report duly signed by the concerned CEO / Departmental head should only be forwarded to the Ethics department.

3.7 COMPLAINTS RECEIVED BY S.G. SECRETARIAT / ETHICS DEPARTMENT

3.7.1 Each complaint received by Secretary General, secretariat or the Central Ethics department will be examined by the CEhO, to see whether there is any substance in the allegations made in it, which merit looking into. Where the allegations are vague and general and prima facie unverifiable, the CEhO may decide, with the approval of SG, QCI, that no action is necessary and the Complaint should be filed with remarks therein.

3.7.2 Where the complaint seems to give definite information that requires a further check and that the CEhO feels that an inquiry / investigation is required to be made to verify the allegations, he/she may proceed on the complaint in accordance with the procedures detailed below.

3.7.3 For assessment of the involvement of ethical angle in the complaint prima facie, the CEhO may adopt the following procedure:

(i) Study of the nature of the complaint and its type i.e. defining the category it is falling in (listed in 3.2 above)

(ii) Listing of the allegations made in the complaint and identifying the person / officials involved.

(iii) Seeking of following information from the concerned board/department :

a) Files /records /documents related to the allegations.

b) System/rules/guidelines w.r.t the matter involved in the complainant.

c) Past practices followed in similar cases

- d) Practices followed in the similar cases dealt alongwith the case, under question.
- e) Documents related to delegation of powers, discretionary powers in case the decision taken in the case is not in conformity to the stipulated guidelines of the scheme / subject.

- (iv) Based on the information received the CEhO shall analyse the of the facts to conclude to involvement of ethical angle.
- (v) The CEhO in consultation with SG, may decide on the further course of action to be taken on the complaint based on its nature.

3.7.4 In case of category -1 complaint: it will be registered by the ethics department and forwarded to the concerned board for necessary action and disposal, as per the procedure stipulated in clause 3.6.2 above. However, the copy of the internal inquiry report (if conducted) and the communications sent to the complainant shall be made available to the Ethics department for Record.

3.7.5 In case of category -2 complaint: it will be registered by the ethics department and forwarded to the concerned board for its disposal, as per the procedure stipulated in clause 3.6.3 above. However, in either of the cases listed above, the copy of the internal inquiry report, supporting documents and the communications sent to the complainant shall be made available to the Ethics department for Record / verification (if required) and necessary action (as the case may be).

3.7.6 In case of category -3 complaint involving ethical angle: it will be registered by the ethics department and forwarded to the concerned board. The concerned board after constituting the internal inquiry into the matter in a reasonable time period (not more than one months) will submit the report to the Ethics department along with supporting documents. In case the CEhO feels that the report does not clearly mention all the facts and figures for disposal of the complaint, he / she may after the approval of SG, conduct detailed investigation of the matter to verify the facts required for the disposal of the complaint. If required a committee may be constituted by SG to conduct detailed investigation in the matter.

3.7.7 Category -1 & Category 2 complaint initially received directly by the board and the same disposed by the respective Board as per procedure stipulated in Clause 3.6.2 & 3.6.3 (a) is resubmitted by the complainant with some additional documents /evidence /details to SG, QCI. The CEhO may call for additional information in the matter from the concerned CEO / designated persons The Ethics department shall re-examine the matter based on the additional information provided by the complainant, Board and the inquiry report (if any).

- (a) In case the CEhO feels that the complaint does not merit any further investigation he/she may dispose of the complaint in consultation with SG.
- (b) However, if any lapses are observed, the CEhO after the approval of SG, may conduct detailed investigation of the matter to verify the facts required for the

disposal of the complaint. If required a committee may be constituted by SG to conduct detailed investigation in the matter.

3.7.8 Category - 4 complaints, which relate to purely administrative matters or technical lapses, should be dealt with separately under “non-vigilance complaints”. The CEhO will forward the copy of said complaints to the administration for appropriate action in accordance with service manual under intimation to CEhO.

3.8 ANONYMOUS / PSEUDONYMOUS COMPLAINT

QCI reserves the right to pursue an anonymous/pseudonymous complaint. Further, when in doubt, the pseudonymous character of any complaint may be verified by enquiring from the signatory of the complaint. In case he/she cannot be contacted at the Address given in the complaint, or if no reply is received from him/her within a reasonable time, it should be presumed that the complaint is pseudonymous and should accordingly be ignored. In either of the case mentioned herein, action taken for disposal should be recorded.

Regardless of the nature of the complaint, QCI does not preclude itself from taking cognizance of any complaint, on which action is warranted. In the event QCI decides to make an inquiry into an anonymous or pseudonymous complaint to look into any verifiable facts alleged in such complaints, the CEhO will look into the complaint to make necessary investigation and report the results of investigation to the Secretary General, QCI, for further course of action in the matter.

3.9 COMPLAINTS ALREADY SUBMITTED TO APPELLATE AUTHORITY OF THE BOARD.

In case the complaint is already being considered by an Appellate Authority stipulated in respect of a scheme by the respective Board, the same shall not be considered by Ethics department.

However, as part of the Appellate mechanism of QCI, in case the aggrieved party is not satisfied with the decision of the Appellate Authority of the Board, he/she may appeal to SG QCI. In case SG so desires, may direct the CEhO to conduct a detailed enquiry into the matter and report the findings to him for taking decision on the Appeal.

3.10 PARLIAMENT QUESTIONS & APPLICATIONS UNDER RTI

Parliament questions & RTI applications related to ethical practices received from PIO / DIPP, shall be processed by the officers designated for purpose. However, relevant information in this respect shall be obtained from CEhO / Ethics department.

Note:

- (i) A complaint containing allegations against several officers shall be treated as one complaint for the purpose of statistical returns.
- (ii) In case a public organization furnishes any information in confidence, the confidence should be respected. However, the identity and, if necessary, the antecedents of a person, who lodges a complaint on behalf of a public organization, may be verified before action is initiated.
- (iii) All The Boards are required to frame their own internal complaint handling procedure and intimate it to Ethics department.
- (iv) It is the responsibility of QCI to give protection to the complainant (in case of employee) against harassment or victimization. However, serious action (in accordance with clause 4.6 of this manual) will be taken against him/her in case the complaint, on verification, is found to be false and malicious.

3.11 INVESTIGATION OF THE COMPLAINTS

The CEhO may undertake following procedures for investigation depending on the magnitude of the complainant and nature of the allegations made:

- 3.11.1 In case the allegations contain information which can be verified from the documents / records / files / visit reports etc., the CEhO without loss of time would secure such records for verification (the concerned Board /department would have to provide the required documents to the CEhO within a weeks' time). If any of the documents/paper contained therein supports the allegations made in the complaint, it would be taken by CEhO for retention in the custody of Ethics department, to safe guard it against any tempering.
- 3.11.2 However, in case the original documents are required by the concerned Board / department for further action a certified / authenticated copy of the same will be retained by the CEhO and the Original document will be handed over to the officer deputed by CEO / CEO of the Board. The authenticated copy of the document will bear the date and signatures of the CEhO and the, officer deputed by CEO / CEO of the Board who is handed over the original document. Further, the officer concerned / CEO would be made accountable for the safe custody of the original document(s) in question.
- 3.11.3 In case any official or employee tries to prevent access to any document required by Ethics Department in connection with some complaint or deliberately misplaces the required document, it shall be taken as violation of organisational rules and will amount to misconduct. The Ethics department shall recommend for necessary action (in accordance with service manual), against the concerned employee(s) to SG. After the approval of SG the administrative department shall take necessary action against such employees.

- 3.11.4 In case the Ethics department requires a sample document / record for verification, it may officially send a written request to the CEhO / Department head for providing the same within 7 working days.
- 3.11.5 In case the CEhO feels that the documents / records / report presented to the Ethics department by the concerned Board / Department do not present the exact picture of the facts or if it is felt that the matter has not been handled / investigated adequately at the Board / department level, he / she in consultation with SG, QCI may constitute a committee to conduct a detailed investigation w.r.t the allegations made in the complainant.
- 3.11.6 During the process of verification of the facts, the staff / assessors enquired would be required to give a signed copy of the written statement certifying the facts stated by them orally. However, wherever necessary the CEhO / ethics department would corroborate the important / necessary facts disclosed from other reliable sources.
- 3.11.7 During the course of detailed investigation the concerned employee may also be given an opportunity to tender his/her version of the facts in order to find out his / her plausible explanation. However, there is no question of making available to him /her any document.
- 3.11.8 If the detailed investigation warrants the need of site inspection, the CEhO in consultation with SG may constitute a committee / authorize an individual to conduct the site visit to verify the factual position.
- 3.11.9 Investigation shall also warrant the deposition of certain QCI officials / employees as witness for verification of the facts and circumstances in a particular case and also to analyse the details. The Ethics department shall seek prior approval of SG for calling such officials for investigation, through their CEO / department head.
- 3.11.10 In case the employee called for deposition fails to come on the scheduled date & time without any valid reason, the shall amount to an act of disobedience against the said employee. The Ethics department after the approval of SG shall write to administrative department to take necessary action (in accordance with service manual) against such employees.
- 3.11.11 In cases of serious nature (i.e. involving fraud, theft, misappropriation of organisation funds etc), If the detailed investigation warrant the need for inquiring / calling, people / agencies other than the QCI employees for aiding the investigation process with some additional evidences required for making a fair / clear recommendation, It may send a written request to the SG QCI. SG in consultation with Chairman QCI may decide on the matter. The additional information / evidences / statements / documents etc. so provided by the outside person / agency concerning the case may be taken into consideration by the inquiry committee for conducting rational investigation. However, the inquiry committee shall not solely base its recommendation on the said information / evidences /

statements / documents. However, the expenditure (boarding / lodging / travelling etc) incurred by such agencies / persons on account of attending the investigation process shall be borne by the QCI.

3.11.12 During the investigation following points need to be taken care by the CEhO /Committee constituted for the purpose :

- (i) To ensure expeditious investigation, as delay in the investigation may cause unnecessary mental anguish to the employee concerned and in case the complaint is found to be false it would cause lot of distress to him/her and other employees in the organisation. Further any delay in investigation process also reduces its usefulness to the organisation.
- (ii) However, it also needs to be ensured that the investigation is not completed in haste without proper factual verification of the allegations made. The investigation must be conducted in a meticulous manner to plug each gap & link.
- (iii) Investigation must be carried out in an impartial & fair manner without any prejudice to any employee.
- (iv) The investigation must throw light on the nature and extent of violation of rules /procedures stipulated for work /scheme in question.
- (v) A thorough examination of the documents /evidences leading to proof of allegations.
- (vi) It shall ascertain the officials / persons responsible for such violations.
- (vii) It shall also focus on the extent of loss of any kind, such violation(s) has caused to QCI and or the gain caused to the employee / parties concerned.
- (viii) CEhO must keep a constant track of the cases under investigation for ensure their logical conclusion.

3.12 CASES WARRANTING TRANSFER /TEMPORARY SUSPENSION

Normally during the period of inquiry, the employee against whom the complaint is made shall continue to work on the assigned duty till the charges are proved and he/she is found guilty. However in some exceptional cases as listed below, the CEhO in writing shall advise SG for transfer /temporary suspension of the concerned employee forthwith till the time investigation is complete:

- (i) Cases where continuance in office of the employee will prejudice the investigation, trial or any inquiry,
- (ii) If the official complained against is in-charge of Stores, equipment's, administrative or any other records etc. and there is a possibility of his / her tampering with the records,
- (iii) Where the continuance in office of the employee is likely to seriously subvert discipline in the office;

- (iv) Where allegations have been made against the employee and the preliminary inquiry revealed that a prima facie case is made out which would justify his prosecution or his being proceeded against in departmental proceedings, and where the proceedings are likely to end in his conviction and or dismissal, removal or compulsory retirement from service

3.13 SUBMISSION OF INVESTIGATION REPORT

3.13.12 The CEhO / Committee Investigating the matter should prepare a self-contained report including the material available to controvert the defence. The Investigation report should briefly state all the facts with clarity and accuracy.

3.13.13 The Report must contain the following documents / information enclosed with it for consideration by SG , QCI for deciding on the appropriate action to be taken against the employee /associate agency / assessor / expert (in case allegations are proved) or the complainant (if allegations are found to be base less / vague) :

- a) The copy of the Complainant.
- b) Details of the allegations made and Officials / experts involved in each.
- c) Details of the rules / guidelines violated, documents assessed (allegation-wise) to verify the same and examination of the evidence.
- d) Copies of the relevant documents / guidelines supporting the above.
- e) Oral / written statements of the suspected officials regarding their version on the rules and procedures violated.
- f) Copy of the internal inquiry report received from the concerned Board / Department.
- g) Statements of experts related to the matter on such violation.
- h) Statement of witness who corroborates and supports allegations (oral / written).
- i) Statement of conclusion based on the (i) statement made by officials (including the suspect employee) / experts / assessors (ii) examination of the documents. It must clearly specify as to what is proved against whom allegation wise.
- j) Details of any kind loss which been cause to QCI due to such violation.
- k) The comments of the CEhO
- l) Specific actionable recommendations by the CEhO

Note:

- a) Besides acts of fraud, cheating, bribe, theft, giving undue benefit to an agency / person etc amounting to ethical angle, any undue / unjustified delay in processing a case perceived after considering all factors would also conclude to presence of ethical angle.

b) Any procedural gaps / mistakes / errors or any such activity although conducted accidentally but causes loss of any form or kind to the QCI, may not be treated as ethical angle. But at the same time it would not entitle the employee concerned to be spared of disciplinary action by QCI management. Further, It shall also be ensured that such gaps / mistakes / errors / or any such activity, do not re-occur in future.

3.13.3 The SG, QCI shall consider the inquiry report based on the facts presented therein and the comments of CEhO. In case he is satisfied with the investigation and concurs to the recommendations made he may call for an appropriate action against the concerned employee/assessor/agency as per per the procedures stipulated in Chapter -4.

3.13.4 In case of complaint regarding the unethical practices resorted by the QCI empanelled assessors /Technical Expert/: the Ethics department after the approval of SG will forward the inquiry report alongwith the approval of SG to the concerned Board for taking necessary action against the concerned assessor/Expert under intimation to the Ethics department.

3.13.5 In case SG, QCI feels that the facts have not been presented /verified in totality he may order for another inquiry / further enquiry into specific issues.

CHAPTER – 4 PUNITIVE ACTION& APPEAL

4.1 ACTIVITIES WARRANTING PUNITIVE ACTIONS

Acts of Omission / Commission of an employee /associated bodies /associated experts, which may fall under the purview of unethical practices may be categories under following heads:

- (i) Serious negligence and dereliction of duty resulting in considerable loss to Organisation.
- (ii) Causing deliberate financial and or wrongful loss to the organisation (including: the act resulting in maligning of the image of QCI).
- (iii) Corruption, deliberate wrongful presentation of records /details and or hiding of facts, leading to incorrect /appropriate decisions.
- (iv) Having malafide intention.
- (v) Any act flouting the code of conduct stipulated in the Service manual (applicable to QCI employees).
- (vi) Any other action not in the interest of QCI.

Any particular complaint / allegation may have any one or more than one of the features listed above. The nature / severity of the punishment to be imposed on the person /group of persons involved in such an act of omission/commission shall be taken keeping in mind the magnitude of the loss to the organisation.

4.2 PUNITIVE ACTION AGAINST THE EMPLOYEES

After the completion of the inquiry, the Ethics department shall present the factual position to the SG , QCI. In case the allegations as levied in the complaint are found to be true, the CEhO after the approval of SG will forward the inquiry report to the administrative department for taking appropriate action against the employee(s) concerned in accordance with service manual, under intimation to the Ethics department.

A per the Service manual the penalty that may be imposed on an employee considering the magnitude of Omission / Commission, is classified as under:

MINOR PENALTY

- a) Censure
- b) Withholding increment
- c) Withholding promotion for specified period
- d) Recovery from pay whole or part of any pecuniary loss caused to the council by negligence.

MAJOR PENALTIES

- a) Reduction to lower stage in the same pay band
- b) Reduction to lower stage or lower pay band.
- c) Compulsory retirement.
- d) Termination with accrued benefits
- e) Termination without any benefit

The CEhO shall ensure that a speaking order is issued while imposing punishment on the delinquent employee.

4.3 PUNITIVE ACTION AGAINST SEPARATED EMPLOYEES / EX-EMPLOYEES

QCI may encounter with such cases wherein the complaint is received after the employee concerned has resigned /superannuated or it may be the case that till the time the inquiry is complete the concerned employee has resigned / superannuated from the organisation. As per the Service rules, action can only be initiated against the employees of the QCI. Hence in such cases SG QCI in consultation with Chairman QCI may decide on the further course of action to be taken depending upon the magnitude of the Omission / Commission.

4.4 PUNITIVE ACTION AGAINST THE ASSESSORS / TECHNICAL EXPERTS

Looking into the nature of the activities performed by different boards it is likely that the persons other than the employees of QCI including that of constituent Boards are involved in the acts of omissions / commission and hence, do not fall within the purview of the conduct rules of QCI. In such cases action against the concerned assessor /expert shall be initiated under appropriate civil /criminal law after the approval of Chairman QCI.

4.5 PUNITIVE ACTION AGAINST ASSOCIATED / ACCREDITED AGENCIES

In such cases the CEhO shall forward his / her recommendations to the concerned Board / Department after the approval of the SG, for initiating appropriate action against the concerned at its level in accordance with the stipulated guidelines in the matter.

4.6 ACTION AGAINST PERSONS MAKING FALSE COMPLAINT

If on inquiry / investigation, the complaint is found to be false, malicious, vexatious or unfounded, QCI shall take appropriate action (as applicable under law / service rules) against the complainant in case of the QCI employee.

In case of some outside agency /ex-employee, SG, QCI, in consultation with Chairman, QCI, may decide on the future course of action to be taken against the complainant.

4.4 APPEAL

An officer/staff of the Council who has been proceeded against by the Disciplinary Authority, may at his discretion, can make an appeal to the Appellate Authority against the decision of the Disciplinary Authority (as per the guidelines stipulated in Service manual). The decision of the Appellate Authority shall be final in such cases.

CHAPTER – 5 PREVENTIVE ACTIONS

5.1 NEED FOR PREVENTIVE ACTIONS

It is utmost important that the culture of Honesty, transparency and unprejudiced nature is practiced by every employee / associated experts of QCI .irrespective of the level / department/ Board. Chapter -4 outlines the punitive actions to be taken against any employee / person / agency who after inquiry is proved to be involved in a act in contravention to the godliness stipulated by QCI. However, punitive actions alone cannot set a strong foundation for ethical machinery in an organisation. These have to be coupled up with the preventive actions. The preventive actions sets up procedures and systems to restrain the acts of wrong doing and misconduct in the various areas of the functioning of the organization. The preventive actions may include the following (but not limited to):

- (i) Laying of clear cut guidelines / rules /conditions / procedures in all the areas related to stakeholders / employees.
- (ii) Transparency in all actions / processes / procedures and positive feedback helps.
- (iii) Reduction in discretion powers which may lead to a scope of granting undue favours and clear cut delegation of powers at each level. Fixing accountability at each level.
- (iv) The computerizations of procedures help in reducing interface between officials and applicants.
- (v) Effective control and supervision

5.2 IDENTIFICATION OF SENSITIVE AREAS / POSTS

One of the major activity of CEhO in QCI is identification of the areas prone to unethical practices and suggest measures to curb /minimise the factors fostering such practices. In an organisation like QCI which has four associated boards and involved in quality assurance in various sectors, it may not be possible for the Ethics department to keep a close watch on every activity of each Board / department. Hence, in order to suggest the preventive measures, the Ethics department shall adopt the following strategies:

- (i) In consultation with the CEO of the Board / designated person, shall identify the areas/posts more susceptible to complaints and devise necessary strategies for minimising the same.
- (ii) Based on the number & areas of complaints received the CEhO shall suggest measures for systemic correction and modification of rules and

processes which, because of their ambiguity /cumbersomeness / complexity/ lack of transparency and or use of personal discretionary powers give rise to scope of Corruption.

- (iii) Based on the nature of the complaints received the procedural gaps/ any modifications if required in the scheme implementation procedure shall be identified by the CEhO and communicated to concerned Board / department for implementation after the approval of SG, QCI.
- (iv) Identification of the areas which allow close interaction of the applicants with the junior officials of the board with the applicants and create a ground for germination of unethical practices.
- (v) CEhO shall also oversee that whether the concerned board had planned any preventive actions in the past and if so whether the same have been properly implemented.
- (vi) The sensitive posts in the organisation shall be identified by the CEhO in consultation with the CEO of the board and the same may be got notified by the SG. These post may be reviewed every two years.

5.2 SURPRISE CHECKS

Any stipulated mechanism cannot completely stop the unethical practices but with the effective implementation of preventive measures it can control them to large extent. With the approval of SG if required teams may be formed to conduct surprise checks in the sensitive areas from time to time to see if all the procedures have been implemented without any gap. In case any loopholes are observed the same may be reported to SG and after the approval of SG, the concerned CEO shall be advised to immediately plug in the gap.

The surprise check team may constitute officers of some other department. The information of surprise check shall not be made available to the concerned board in advance. Further surprise check may be conducted any time in case an information of some irregularity is received in any area.

The surprise checks should be qualitative to discourage the employees from indulging themselves into any malpractices. Such checks should be objective and be designed in such a way so as to cover all boards/departments without causing much disturbance to their regular activities.

5.3 TRAINING AND AWARENESS PEOGRAMS

The staff involved in the Ethics department should be trained regularly for

educating them regarding various facets of ethics such as investigation techniques /procedures, disciplinary proceedings etc. by appropriate authorities /agencies.

Further, staff who are not part of ethics department should also be made aware of the ethical practices, punitive actions and preventive actions etc. through awareness programs. These training programmes would expose the employees to the functions of ethic department and ethic mechanisms.

5.4 CLEARANCE FROM THE ETHICS DEPARTMENT

The Administration would send a written request to the Ethics department for seeking information on any pending complaint / case related to ethics, pending against an employee of QCI (excluding that of ethics department) for clearance (i.e. prior to processing the case) in the following conditions :

- (i) When the confirmation / clearance of probation period of an employee is under consideration.
- (ii) When promotion of an employee is under consideration.
- (iii) For clearing the dues of the employee, in case he/she resigns /superannuates.
- (iv) At the times of consideration of request of an employee for deputation / Passport / applying for appointment/assignment outside the office /deputing for training (in India) on office expenditure /foreign training etc.
- (v) At the time of: grant of reward/award for meritorious services

In case of officials working in Ethics department, such clearance would be based on the recommendation of CEhO and approval of SG. While in case of CEhO, SG would be the final authority for giving clearance.

Note:

The Ethics department & its functionaries lay their strong focus on the proactive maintenance of ethical machinery rather than enforcing punitive actions. This shall facilitate in creating an environment in QCI, which enables its employees to discharge their duties / functions with absolute integrity, impartiality, fearlessness and in a transparent manner, so that the cases of punitive actions are minimal.