**Decision maker appeal outcome report**

Ethical Supplier Mandate/Threshold

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| --- |
| **Cover summary** |
| **Reference no.:** | <breach reference number> |
| **Supplier:** | <company name> |
| **Supplier ABN/ACN:** | <company ABN/ACN> |
| **Contract reference:** | <contract name/number> - *also note if this is a subcontractor contract* |
| **Procuring agency:** | <investigating agency> |
| **Business area:** | <area within the agency> |
|  |
| **Date of decision:** | <date of decision> |  |

# Purpose

**For use by:** the appropriate appeal decision maker (the Director-General (DG) of the procuring agency, or the government-owned corporation, statutory body or special purpose vehicle in ownership of the contract).

**For submission to:** the Executive Officer of the Department of Energy and Public Works - Queensland Government Procurement (QGP) Compliance Branch.

This report should be completed when an outcome is formed by the decision maker on an appeal submission under the Ethical Supplier Mandate (Mandate) or the Ethical Supplier Threshold (the Threshold). It captures the appeal decision, including the penalty deemed appropriate under the policy (if any).

This document, along with any attachments, is confidential and should be managed appropriately as per the *Information Privacy Act 2009* (Qld) and other information sharing requirements relevant to the Queensland Government.

**Requirements for this report:**

 [ ]  Submission of an appeal from a supplier, related to a decision under the Mandate or Threshold.

 [ ]  A Panel recommendation.

 [ ]  An appeal determination by an appropriate decision maker.

*All triangular brackets should be removed and replaced with the appropriate data*.

# Decision maker details

**Decision maker:** <insert name of decision maker>

**Decision maker position:** <insert position of decision maker>

**Decision maker agency:** <insert agency>

2.1 Declared conflicts of interest

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| **Is there a conflict of interest with a decision maker?**  [ ]  Yes [ ]  No |
| **Decision maker** | **Nature of conflict** | **Declaration date** |
| <insert name> | <detail the nature of the conflict> | <insert the date of declaration> |

# Supplier details

**Supplier:** <insert full name>

**ABN/ACN:** <insert supplier ABN/ACN>

**Postal address:** <insert business postal address>

# Appeal details

**How many breaches are being appealed in this submission? <insert # of breach appeals>**

For collated submissions (more than one breach appeal on the same decision), copy and paste the following table within this section of the document, ensuring one table is completed per breach appeal.

|  |
| --- |
| **Breach appeal number: 1** |
| **Appeal overview** |
| **Reason for appeal:** | [ ]  The process outlined in the *Ethical Supplier Mandate 2021* has not been followed.[ ]  Show cause details, extenuating circumstances or specific supporting evidence were not taken into account in the original decision.[ ]  The decision was not in line with the penalty guidelines.  |
| **Appeal submission details:**(see QGP Compliance Branch appeal submission report for the full submission) | <insert a comprehensive summary of the appeal submission from the supplier> |

# Procedural fairness proceedings

**Were procedural fairness processes managed as per the policy?** [ ] Yes [ ]  No

**Summary of key areas of the procedural fairness process that have been considered by the decision maker as part of this appeal decision:**

<insert a comprehensive summary of the decision maker’s consideration of the procedural fairness proceedings, including operational timelines and areas of significance in the supplier’s responses, or [x]  Not applicable>

# Advice received on behalf of the decision maker relevant to the appeal

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| --- |
| **Did the decision maker seek external advice ahead of forming a decision?** [ ] Yes [ ]  No |
| **Advice topic** | **Name and position of advice author** | **Summary of advice** | **Item #** |
| <insert subject of advice> | <insert name, position and organisation of author of advice> | <insert summary of advice provided> | as per Section 8 |

# The appeal decision

For collated submissions (more than one breach appeal on the same decision), copy and paste the following table within this Section of the document, ensuring one table is completed per breach appeal.

|  |
| --- |
| **Breach appeal number: 1** |
| **Is the appeal in scope of the policy?** | [ ]  **Yes** [ ]  **No** |
| If yes, select the applicable criteria. | [ ]  The process outlined in the *Ethical Supplier Mandate 2021* has not been followed.[ ]  Show cause details, extenuating circumstances or specific supporting evidence were not taken into account in the original decision.[ ]  The decision was not in line with the penalty guidelines. |
| **Will this appeal be granted?** [ ]  **Granted** [ ]  **Denied** |
| **Reason for determining the appeal should be granted/denied:** | <insert explanation of how and why the decision maker formed this outcome> |
| **Will the original penalty be revised?** | [ ]  **Yes** [ ]  **No** |
| **If yes, what will the revised penalty be?**<insert details of the revised penalty> |
| **Reason for revised penalty determination:** | <regardless of a yes/no determination, insert explanation of how and why the decision maker formed this outcome> |

11.1 Panel alignment

**Does the appeal decision align to the recommendation of the Panel?** [ ] Yes [ ]  No

# Report attachments

Identify all attachments included with this report. Pre-filled attachment numbers and subsequent attachment cover pages should be updated to reflect the needs of the submission.

Attachments and specific ‘Item numbers’ are to be referenced throughout the document where prompted.

|  |  |
| --- | --- |
| **Attachment 1** | **Advice received on behalf of the decision maker** |
| *Item numbers should also be reflected in Section 6* |
| Item 1.1 | <insert document name i.e. Legal advice on supplier conduct> |

*<add/remove/update following table as needed>*

|  |  |
| --- | --- |
| **Attachment 2** | **<Other>** |
| Item 2.1 | <insert document name> |

# Report sign-off

This report should be approved and signed by the appeal decision maker.

|  |
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| <insert signature> |
| **Details of signee:** | <insert name of signee>, Director General, <insert department name> |
| **Date of signing:** | <insert date name> |

# Attachment 1 – Advice received on behalf of the decision maker

**Advice received on behalf of the decision maker relevant to the appeal**

**Attachment 1**

Item <1.1>