



KARAMOJA TUMAINI NETWORK · KTN

Complaints and Community Feedback Procedure

Every voice heard, every complaint answered

Policy Category Governance Policy · Classification: Public

Adopted by the Board of Directors May 2026

Status Version 1.0 · Effective May 2026 · Next review May 2029

OUR COMMITMENT

Karamoja Tumaini Network commits to listening as carefully as it works. Anyone, a child, a parent, an elder, a partner, a stranger, may complain or give feedback about anything KTN does, in Nga’Karamojong or any language, in writing or by voice, openly or anonymously, without cost and without fear.

We will acknowledge what we receive, handle it fairly and confidentially, act on what is founded, answer the person who raised it, and protect them from any retaliation. Safeguarding concerns will move immediately under our safeguarding policies. And we will read our complaints honestly, because they are free evidence of where we are failing.

WHY IT MATTERS

KTN works with people who have been ignored by systems for decades, and children who have learned that adults do not listen. An organisation that only transmits, reports out, messages out, but never receives, repeats that failure. Complaints are also protection: the community member who can safely say something is wrong is the early warning that keeps children safe and keeps small problems from becoming harm.

WHERE IT APPLIES

Every KTN office, outreach site, activity and event, across Karamoja, Kampala and the corridor. Every person KTN serves or affects, and every person who works for or with KTN. Every channel: in person, suggestion boxes, phone, radio referral, digital, and through community structures, regardless of the source of funding.

HOPE · HEAL · EMPOWER

A complaint answered well is trust built twice.

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Policy Approval

This Complaints and Community Feedback Procedure was considered and approved by the Board of Directors of Karamoja Tumaini Network in May 2026 and takes effect from that date as a governance instrument of the organisation. Compliance with it is mandatory for everyone within the scope set out in Chapter 2, and it is open to every child, family and community member KTN serves. It is the procedure by which KTN listens to the people it serves, answers them with respect, and puts things right, and it treats the voice of the community as a measure of whether KTN is doing its job. The resolution reference and the signatures below complete the formal record of adoption.

Field	Detail
Policy status	Approved
Approval authority	Board of Directors
Approval date	May 2026
Effective date	May 2026
Version	1.0
Board resolution reference	KTN/BRD/RES/2026/_____

The Board Secretary enters the resolution number from the minutes of the approving meeting before the signed copy is filed.

APPROVAL SIGNATURES



Chairperson, Board of Directors

Karamoja Tumaini Network · May 2026

A Statement of Commitment from the Board

Karamoja Tumaini Network works with families who have rarely been asked what they think, and almost never been answered. A mother in Napak whose child was turned away, a boy on a Kampala street who was promised a visit that never came, an elder who watched a distribution pass his village: each of them has something KTN needs to hear, and each of them has good reason to believe that saying it would cost them something and change nothing.

This Board does not accept that. A complaint is not an attack on KTN and it is not a favour granted to the person who makes it. It is information the organisation cannot buy and cannot do without, offered by someone who still believes KTN can do better. An organisation that hears nothing from the people it serves is not doing well; it is not listening.

We therefore commit to three things that are not negotiable. Anyone may raise a matter, in Nga’Karamojong or English, spoken or written, in their own name or anonymously, and through someone they trust if that is easier. Every matter is acknowledged within five working days and answered within twenty, and where that cannot be met the person is told why and given a date. And no one, ever, suffers for having spoken: retaliation against a complainant is treated as misconduct, whoever commits it.

The Board will see what this procedure produces, not just that it exists. We receive the numbers, the patterns and the matters that were not resolved, and we expect to be told when the answer given was not good enough. The children and communities of Karamoja are owed an organisation that listens to them as carefully as it reports to its donors. This procedure is how we keep that promise, and how we can be held to it.

Chairperson, Board of Directors

Karamoja Tumaini Network

Adopted by resolution of the Board of Directors, May 2026.

Document Control

Field	Detail
Policy title	Complaints and Community Feedback Procedure
Registered name	Karamoja Tumaini Network Limited, a company limited by guarantee without share capital, Reg. No. 80034272074698, incorporated on 1 July 2025 under the Companies Act, 2012 (Cap. 106); permitted to operate as a Non-Governmental Organisation by the National Bureau for Non-Governmental Organisations under permit number INDP000745-NB, file number MIA/NB/2026/06/7454
Version	1.0
Status	Approved and adopted by the Board of Directors
Approval date	May 2026
Effective date	May 2026
Policy owner	Karamoja Tumaini Network, acting through its Board of Directors.
Policy custodian	The Executive Director, supported by the Complaints and Feedback Focal Point, who coordinates the receiving, recording, routing and closing of matters and maintains the register, working with the Designated Safeguarding Lead on safeguarding matters.
Applies to	All KTN representatives, who must make this procedure known, help people use it, and never obstruct it; and open to every child, family member, community member, partner and member of the public KTN works with or serves.
Related policies	The Strategic Plan 2026 to 2030; the Child Safeguarding Policy; the PSEA Policy; the Whistleblowing and Protected Disclosure Policy; the Finance and Anti-Fraud Policy; the Human Resources and People Management Policy; the Code of Conduct; the Workplace Harassment Policy; the Data Protection and Privacy Policy; and the Advocacy and Communications Policy.
Related legislation	The Children Act (as amended); the Data Protection and Privacy Act, 2019 (Cap. 97); the Non-Governmental Organisations Act, 2016 (Cap. 109); the Prevention of Trafficking in Persons Act, 2009; and Uganda's obligations under the UN Convention on the Rights of the Child and the African Charter on the Rights and Welfare of the Child.
Related standards	Recognised international standards for accountability to affected populations and community feedback, including the Core Humanitarian Standard on Quality and Accountability and the complaints and feedback practices applied by leading international NGOs and donor-funded institutions.
Definitions	Key terms are defined in Chapter 2; acronyms and abbreviations are listed at the front of this document.
Review frequency	Every two years, or earlier where experience shows the procedure is not working well for the people it is meant to serve, or where a change in law, a donor requirement or a serious incident requires it (Chapter 9).
Next scheduled review	May 2029

Version Control Register

Version	Date	Description of change	Approved by
1.0	May 2026	First edition. Developed as a governance instrument: benchmarked against recognised standards for accountability to affected populations and community feedback; aligned with Ugandan law and the KTN Strategic Plan 2026 to 2030; structured with numbered, auditable requirements, process tables, service standards and a control environment; reviewed and adopted by the Board of Directors.	Board of Directors

Amendment History Register

No.	Date	Section(s) affected	Summary of amendment	Approved by
			Completed by the policy custodian as amendments are approved under Chapter 9. Until an amendment is made, this register intentionally remains blank.	
1	16 August 2026	Front matter; Contents; Section 2.3; new Section 8.6; annex titles	Presentation and completeness update. Full front matter added (List of Tables, List of Figures, a Statement of Commitment from the Board, Executive Summary); Contents rebuilt as one live field listing sub-headings and annexes; new Section 8.6, Records, Audit Trail and Retention; three cross-references that labelled Section 4.3 a chapter corrected; annex titles renumbered Annex A to Annex E; Chairperson's signature applied. Approved by the Executive Director as an administrative update under Section 9.9.	

Distribution List

Recipient	Format	Date issued
Board of Directors	Electronic copy and one signed print copy for the corporate record	May 2026
Executive Director and all staff	Electronic copy; included in the staff induction pack	May 2026
Communities served	Community information page (Annex B), explained in Nga’Karamojong and read aloud where needed	Ongoing
Child Protection Committees and local leaders	Briefing on the procedure and how to help people use it	Ongoing
Partner organisations	Relevant extracts issued with each agreement	With each agreement
Donors and public	Full copy on request; published on the KTN website, www.karamojatumaini.org	From adoption

The policy custodian keeps this list current. The authoritative version of this document is the signed copy held by the custodian; electronic copies carry the same text.

Contact Information

Field	Detail
Procedure owner	Karamoja Tumaini Network
Procedure custodian	The Executive Director, supported by the Complaints and Feedback Focal Point
Raise a complaint or give feedback	Any KTN representative, or the Complaints and Feedback Focal Point (Annex B)
A child’s safety or possible harm	The Designated Safeguarding Lead, the same day, under the Child Safeguarding Policy
Sexual exploitation or abuse	The PSEA Focal Point, the same day, under the PSEA Policy
Fraud or serious wrongdoing	The Finance and Anti-Fraud and Whistleblowing routes
Kampala office	Da Joy House, Room JS05A, Waliggo Road, Komamboga, P.O. Box 10066, Kampala
Napak office	C/o Matany Trading Centre, Matany Town Council, Napak District
Email	info@karamojatumaini.org
Website	www.karamojatumaini.org

Acronyms and Abbreviations

Acronym	Meaning
CFFP	Complaints and Feedback Focal Point
CHS	Core Humanitarian Standard on Quality and Accountability
CPC	Child Protection Committee
DPA	Data Protection and Privacy Act, 2019 (Cap. 97)
DSL	Designated Safeguarding Lead (as named in the Child Safeguarding Policy)
ED	Executive Director
KTN	Karamoja Tumaini Network
MEAL	Monitoring, Evaluation, Accountability and Learning
PSEA	Protection from Sexual Exploitation and Abuse
RACI	Responsible, Accountable, Consulted, Informed
UNCRC	United Nations Convention on the Rights of the Child

Executive Summary

This is Karamoja Tumaini Network's authoritative procedure for receiving, handling and answering complaints and feedback from the children, families and communities it serves, and from anyone else who deals with KTN. It applies to every board member, member of staff, volunteer, intern, peer educator, community worker, consultant, contractor and partner, and it is open to every community member without condition or cost.

The communities KTN works with have the least power and the fewest ways to be heard. This procedure shifts a little of that power back to them. It opens routes that do not require literacy, a phone or a journey; it runs in Nga'Karamojong as well as English; and it accepts a matter raised in person, in writing, through a trusted third party, or anonymously. It sets a service standard that can be measured: five working days to acknowledge, twenty to respond.

The procedure does five things. First, it defines what a complaint and what feedback are, and what belongs under another instrument. Second, it fixes the routing: safeguarding, sexual exploitation and abuse, fraud and whistleblowing matters leave this procedure immediately for the policy that governs them, and are never handled as ordinary complaints. Third, it sets out how a matter is received, recorded, assessed, investigated, answered and closed, with the responsibility for each step named. Fourth, it protects the person who raises a matter, through confidentiality, data protection and an absolute bar on retaliation. Fifth, it makes the whole system accountable through a register, a documented audit trail, stated retention periods, published indicators and regular reporting to the Board.

The procedure is proportionate to what KTN is and can operate today, and it is built to grow. Its measure is not the number of complaints received but whether the people who raise them are answered, and whether what they say changes anything. A period with no complaints at all is treated as a warning that the channels are not working, not as evidence that nothing is wrong.

1

CHAPTER ONE

INTRODUCTION

Why listening and answering sits at the heart of KTN's duty of care, and how this policy is organised.

1 Introduction

Why this procedure exists, the context it serves, and how it fits the wider governance of Karamoja Tumaini Network.

1.1 Organisational Context

Karamoja Tumaini Network (KTN) is a Karamojong-led, child-focused organisation registered in Uganda. It works to break the cycle that pushes children from the Karamoja sub-region onto the streets of Kampala and other towns, under the six pillars of the SHIELD framework of the Strategic Plan 2026 to 2030: Safeguard, Heal, Integrate, Empower, Lead and Data.

The children and families KTN serves often have the least power and the fewest ways to be heard. This procedure shifts a little of that power back to them, giving them a clear, safe and accessible way to raise a concern, ask a question, make a suggestion, or tell KTN when something has gone wrong.

2

working languages this procedure runs in, Nga’Karamojong and English, plus spoken and non-written routes

5 / 20

working days to acknowledge a matter and to respond, the service standard this procedure sets

74.2%

poverty rate in Karamoja; the people KTN serves often have the least power to be heard (UBOS, 2023/24)

Figure 1. The context this procedure serves: communities with little power, and a service standard for hearing them.

1.2 Rationale for this Procedure

KTN is accountable not only to government and donors, but especially to the children and communities it exists to serve. A working complaints and feedback procedure lets KTN catch problems early, including safeguarding problems, correct mistakes, improve its work, and show the people it serves that their voice counts. This is downward accountability, and KTN treats it as a measure of whether it is living up to its values.

POLICY STATEMENT

Every child, family and community member can raise a complaint or give feedback to KTN safely, freely and in a way that suits them, including in Nga’Karamojong and without reading or writing. KTN listens, responds fairly within clear time limits, routes serious matters to the right place at once, and uses what it hears to put things right and improve.

1.3 Strategic Alignment

SHIELD pillar	What this procedure contributes
Safeguard	Concerns about a child’s safety are caught early and routed to the Designated Safeguarding Lead the same day.
Heal and Integrate	Families and children can say when support is not working, so it can be put right.
Empower	Communities are treated as partners with a voice, not as passive recipients.
Lead	Visible, accountable listening demonstrates the maturity that lets KTN convene and lead.
Data	Patterns in complaints and feedback inform how KTN plans and improves its work.

Table 1. Alignment of this procedure with the SHIELD framework of the Strategic Plan 2026 to 2030.

1.4 How to Use this Document

This is a governance instrument. Chapters 1 to 3 set context, purpose and the governance framework. Chapter 4 sets the binding requirements, each numbered (PR-001 onward) so it can be audited. Chapters 5 to 9 set roles, procedures, risk, compliance, enforcement, improvement and review. Chapter 10 holds the working tools: the complaint form, the community information page, the routing guide and the register.

States Parties shall assure to the child the right to express their views freely in all matters affecting the child.

UN CONVENTION ON THE RIGHTS OF THE CHILD, ARTICLE 12

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CHAPTER TWO

PURPOSE, OBJECTIVES AND SCOPE

What this policy is for, who and what it binds, and the words it uses precisely.

2 Purpose, Objectives and Scope

What this procedure is for, the measurable objectives it sets, who and what it covers, and the terms on which it is interpreted.

2.1 Purpose

This procedure sets out how KTN receives and responds to complaints and feedback from the children, families and communities it serves, and from partners and the public, so that people are heard, answered fairly, and protected, and so that KTN learns.

2.2 Objectives

This procedure is designed to achieve the following objectives, against which its effectiveness is measured under Chapter 8.

Ref	Objective
OBJ-01	Every child, family and community member can raise a matter safely and in a way that suits them.
OBJ-02	Matters are acknowledged and answered within clear, published time standards.
OBJ-03	Safeguarding, exploitation and fraud matters are recognised and routed to the right place at once.
OBJ-04	No one is penalised or loses KTN's help for raising a matter in good faith.
OBJ-05	Complaints and feedback are recorded, reviewed for patterns, and used to improve the work.
OBJ-06	Communities see that their voice led somewhere, through closing the loop and community participation.

Table 2. Procedure objectives.

Performance against these objectives is monitored and reported under Chapter 8.

2.3 Scope and Applicability

Anyone may use this procedure, and everyone who acts for KTN must support it.

Dimension	In scope	Treated elsewhere
Who may use it	Any child KTN works with, a parent or family member, a community member or leader, a partner, or a member of the public.	A staff member's complaint about their own employment is a grievance under the Human Resources Policy.
What it covers	KTN's work, services, the conduct of its representatives, and decisions that affect the people it serves.	Sensitive matters follow dedicated routes (Section 4.3) while still being recorded here.
Who must support it	Every KTN representative, who makes it known, helps people use it, and never obstructs it.	

Table 3. Scope and applicability.

Compliance is mandatory for everyone within scope.

2.4 Precedence and Interpretation

RULES OF PRECEDENCE

A child's safety comes first.

Any matter suggesting a child is at risk is treated as a safeguarding matter at once, ahead of ordinary complaint handling.

Sensitive matters take the faster route.

Safeguarding, PSEA, fraud and serious-wrongdoing matters follow their dedicated routes, which are faster and more confidential.

Accessibility is not optional.

Where a person cannot use one channel, KTN offers another, including spoken and non-written routes and Nga'Karamojong.

Silence is referred upward.

Where this procedure is silent, the principles in Chapter 3 govern and the matter is referred to the Executive Director.

2.5 Definitions

Term	Meaning
Complaint	An expression that KTN did something, or failed to do something, that was wrong, unfair or harmful.
Feedback	Any view shared with KTN about its work, including suggestions, questions and positive comments.
Downward accountability	Being answerable to the children and communities an organisation serves, not only to funders and government.
Closing the loop	Telling the person who raised a matter what came of it.
Sensitive matter	A safeguarding, sexual-exploitation, fraud or serious-wrongdoing matter that follows a dedicated route.
Child Protection Committee	A community structure that helps protect children and can help people raise concerns to KTN.
Complaints and Feedback Focal Point	The person KTN appoints to receive and coordinate the handling of complaints and feedback.

Table 4. Definitions of key terms.

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CHAPTER THREE

GOVERNANCE FRAMEWORK

Who owns this policy, from the Board to the focal point, and how its decisions travel.

3 Governance Framework

The principles, structures and authorities through which KTN governs complaints and community feedback.

3.1 Governance Principles

Principle	What it requires in practice
Accessible to all	People can raise matters in ways that suit them, in Nga’Karamojong as well as English, in person or at a distance, and without reading or writing. Children can use it too.
Safe and confidential	It is safe to speak up; information is shared only with those who need it, and identity is protected as far as possible. People may raise a matter anonymously.
Free, and never held against you	Using the procedure costs nothing, and no one is penalised, treated worse, or denied help for using it in good faith.
Child friendly	Children are helped to raise concerns in ways suited to their age, and listened to with care.
Responsive and fair	KTN acknowledges what it receives, looks into it fairly, and responds within clear time limits, treating everyone fairly.
We act and we learn	Complaints and feedback are used to put things right and to improve the work, not just logged.

Table 5. Governance principles applied throughout this procedure.

3.2 Governance Structure

Body or role	Mandate under this procedure
Board of Directors	Adopts the procedure; receives regular reports; holds ultimate accountability for accountability to communities.
Executive Director	Accountable for the procedure in practice; ensures it is resourced and used.
Complaints and Feedback Focal Point	Coordinates receiving, recording, routing and closing of matters; maintains the register.
Field focal points	Receive matters at field level, including in Nga’Karamojong, and put children and community members at ease.
Designated Safeguarding Lead and PSEA Focal Point	Receive and handle safeguarding and PSEA matters routed under Section 4.3.
All representatives	Make the procedure known, help people use it, and pass matters on promptly and, where sensitive, through the right route.

Table 6. Governance structure for complaints and community feedback.

3.3 Routing and Decision Authority

The matter is about	Where it goes	How quickly
General complaint, suggestion, question or feedback	Complaints and Feedback Focal Point	Acknowledge within 5 working days; respond within 20
A child’s safety or possible harm	Designated Safeguarding Lead (Child Safeguarding Policy)	The same day

The matter is about	Where it goes	How quickly
Sexual exploitation or abuse	PSEA Focal Point (PSEA Policy)	The same day
Fraud, theft or misuse of funds	Finance and Anti-Fraud and Whistleblowing routes	Without delay
Serious wrongdoing	Whistleblowing Officer (Whistleblowing Policy)	Without delay
A staff member's own employment	Human Resources (grievance)	Per the HR Policy

Table 7. Routing and decision authority matrix.

3.4 Delegation of Authority

The Board delegates the running of this procedure to the Executive Director, and the day-to-day coordination to the Complaints and Feedback Focal Point, but the accountability for listening to communities stays with the Board. The Focal Point does not handle sensitive matters alone; these are routed at once to the Designated Safeguarding Lead, the PSEA Focal Point or the Whistleblowing Officer, who act under their own policies. A child's safety is never delayed by the complaints process.

3.5 Governance of this Procedure

The Executive Director owns this procedure on behalf of the Board. The Complaints and Feedback Focal Point is its day-to-day custodian, responsible for the register and the working tools. The Board adopts the procedure and any amendment, and reviews it under Chapter 9.

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CHAPTER FOUR

POLICY REQUIREMENTS

The numbered, auditable requirements every person at KTN is held to.

4 Policy Requirements

The binding requirements of this procedure. Each is numbered, observable, auditable and enforceable.

This chapter sets the requirements with which everyone must comply. Each requirement carries a unique reference (PR-001 onward), is monitored under Chapter 8 and enforced under Chapter 9.

4.1 Accessibility and Channels

POLICY STATEMENT

The procedure is built for the people KTN actually serves: it works in Nga’Karamojong, for people who do not read or write, and for children.

Ref	Requirement
PR-001	KTN shall make this procedure known in the communities it serves, in plain language and in Nga’Karamojong, including to people who do not read or write, and to children.
PR-002	KTN shall offer several channels: in person to any representative or the Focal Point; a feedback or suggestion box at KTN sites; a publicised telephone number; community meetings and structures such as Child Protection Committees and local leaders; and through partner organisations.
PR-003	A person may raise a matter anonymously, and KTN shall act on anonymous matters as far as it can.
PR-004	No one shall be charged, penalised, treated worse, or denied KTN’s help for raising a complaint or giving feedback in good faith.

4.2 Receiving and Acknowledging

Ref	Requirement
PR-005	Every complaint and item of feedback shall be recorded in the complaints and feedback register, with the date, what was raised, and how the person wishes to be contacted, if at all.
PR-006	KTN shall acknowledge a matter, normally within five working days, unless the person is anonymous or cannot be contacted.
PR-007	Every representative shall make the procedure known, help people use it, receive what is raised with respect, and never obstruct it.

4.3 Assessment and Routing of Sensitive Matters

SAFEGUARDING STANDARD

Some matters must not be handled as ordinary complaints. Everyone who receives complaints and feedback is trained to recognise sensitive matters and route them at once, while keeping the person safe and saying no more than necessary.

Ref	Requirement
PR-008	Each matter shall be assessed and categorised, and its seriousness judged, before it is handled.

Ref	Requirement
PR-009	A matter concerning the safety or possible harm of a child shall be routed to the Designated Safeguarding Lead the same day, under the Child Safeguarding Policy.
PR-010	Sexual exploitation or abuse shall be routed to the PSEA Focal Point; fraud or misuse of funds to the Finance and Anti-Fraud and Whistleblowing routes; and a staff member's employment grievance to Human Resources.
PR-011	A matter routed to a dedicated route shall still be recorded in the register, in a way that protects confidentiality, so that KTN keeps a complete picture.

4.4 Response and Closing the Loop

Ref	Requirement
PR-012	KTN shall look into each matter fairly, gather what it needs, and decide what to do, putting right what should be put right.
PR-013	KTN shall tell the person the outcome and the reasons, in a way they understand, normally within twenty working days, or explain why more time is needed and when to expect an answer.
PR-014	A person who is not satisfied may ask for the matter to be reviewed by a more senior person, including, for serious matters, the Executive Director or the Board.
PR-015	KTN shall share with communities, in general terms, the kinds of issues raised and what KTN has done in response.

4.5 Children's Complaints and Feedback

Ref	Requirement
PR-016	Children shall be helped to raise concerns in ways suited to their age and in a language they understand, and shall be listened to with patience and care.
PR-017	A child shall never be required to raise a concern through an adult who is the subject of it; any matter suggesting a child may be at risk shall be treated as a safeguarding matter at once, and the child told what will happen next in a way they understand.

4.6 Confidentiality, Data Protection and Non-Retaliation

Ref	Requirement
PR-018	Information shall be shared only with those who need it to act, and the identity of the person protected as far as possible, with particular care for children and sensitive matters.
PR-019	Records shall be kept securely and handled under the Data Protection and Privacy Act, 2019 (Cap. 97).
PR-020	No one who raises a complaint or gives feedback in good faith shall be retaliated against; retaliation is treated as serious misconduct.

5

CHAPTER FIVE

ROLES, RESPONSIBILITIES AND ACCOUNTABILITIES

Who is responsible and accountable for what, made explicit.

5 Roles, Responsibilities and Accountabilities

Who is responsible and accountable for receiving, routing and resolving complaints and feedback, expressed through a RACI matrix.

5.1 Governance Roles

Role	Mandate under this procedure
Board of Directors	Adopts the procedure; receives regular reports; holds ultimate accountability for accountability to communities.
Executive Director	Accountable in practice; resources the procedure; handles escalated and serious matters.
Complaints and Feedback Focal Point	Coordinates receiving, recording, routing and closing; maintains the register; reviews for patterns.
Field focal points and representatives	Receive matters with respect, help people use the procedure, and route promptly.
Designated Safeguarding Lead and PSEA Focal Point	Handle safeguarding and PSEA matters under their own policies.
MEAL function	Supports monitoring, community feedback tools and reporting.

Table 8. Governance roles and mandates.

5.2 RACI Matrix

Responsibilities are assigned using the RACI convention: R (Responsible), A (Accountable), C (Consulted), I (Informed). In KTN's lean structure one officer may hold several roles.

Activity	Board	ED	CFFP	Staff	DSL
Adopt and review this procedure	A	R	C	I	C
Make the procedure known to communities	I	A	R	R	I
Receive and record a matter	I	I	A	R	I
Acknowledge within the time standard	I	I	R	C	I
Assess and route a sensitive matter	I	C	R	C	A
Investigate and respond	I	A	R	C	C
Close the loop and share learning	I	A	R	C	I
Report to the Board	A	R	C	I	C

Table 9. RACI matrix.

The Designated Safeguarding Lead holds Accountable status for safeguarding matters routed from this procedure, handled under the Child Safeguarding Policy.

5.3 Three Lines of Defence

Line	Who	Role
First line	Representatives and field focal points	Receive matters with respect and route them promptly.
Second line	Complaints and Feedback Focal Point and MEAL	Coordinate handling, maintain the register, monitor time standards and patterns.
Third line	Board and independent or external review	Provide independent assurance that communities are genuinely heard.

Table 10. Three lines of defence for complaints and community feedback.

6

CHAPTER SIX

PROCEDURES AND OPERATIONAL REQUIREMENTS

The step-by-step procedures that turn requirements into daily practice.

6 Procedures and Operational Requirements

The step-by-step handling of complaints and feedback, with the control and record at each stage.

Each procedure is presented as a process table: stage, activity, responsible officer, control and records generated.

6.1 Receiving and Recording

Stage	Activity	Responsible	Control	Records
1. Receive	Receive the matter through any channel, in the person's language	Any representative	Received with respect; not obstructed (PR-007)	Intake note
2. Record	Enter the matter in the register with date and contact wishes	CFFP	All matters recorded (PR-005)	Register (Annex D)
3. Triage	Identify quickly whether the matter is sensitive	CFFP	Sensitive matters spotted early	Triage note

Table 11. Receiving and recording procedure.

6.2 Acknowledging

Stage	Activity	Responsible	Control	Records
1. Acknowledge	Let the person know the matter is received	CFFP	Within 5 working days (PR-006)	Acknowledgement record
2. Explain	Explain what will happen next, in a way understood	CFFP	Plain language; Nga'Karamojong where needed	Note

Table 12. Acknowledgement procedure.

6.3 Assessing and Routing

Stage	Activity	Responsible	Control	Records
1. Assess	Assess the matter and its seriousness	CFFP	Categorised before handling (PR-008)	Assessment
2. Route	Route sensitive matters at once to the right place	CFFP	Same-day safeguarding routing (PR-009)	Routing record
3. Keep safe	Keep the person safe; say no more than necessary	Any representative	Confidentiality maintained	Note
4. Record	Record the routing in the register	CFFP	Complete picture kept (PR-011)	Register (Annex D)

Table 13. Assessing and routing procedure.

6.4 Investigating and Responding

Stage	Activity	Responsible	Control	Records
1. Look into it	Consider the matter fairly and gather what is needed	CFFP / manager	Fair handling (PR-012)	Case note

Stage	Activity	Responsible	Control	Records
2. Act	Decide and do what is needed; put things right	ED / manager	Action proportionate to the matter	Action record
3. Respond	Tell the person the outcome and reasons	CFFP	Within 20 working days (PR-013)	Response record
4. Review	Offer review by a more senior person if not satisfied	ED / Board	Right of review (PR-014)	Review record

Table 14. Investigating and responding procedure.

6.5 Closing the Loop and Learning

Stage	Activity	Responsible	Control	Records
1. Close	Record the outcome and close the matter	CFFP	Matter closed properly	Register (Annex D)
2. Share back	Share with communities what was raised and changed	ED / CFFP	Closing the loop (PR-015)	Community feedback record
3. Seek feedback	Seek feedback actively through meetings and scorecards	MEAL / CFFP	Active, not passive, listening	Scorecard results
4. Learn	Review patterns and feed them into planning	ED / MEAL	Lessons used to improve	Learning note

Table 15. Closing the loop and learning procedure.

7

CHAPTER SEVEN

RISK MANAGEMENT AND INTERNAL CONTROLS

The risks this policy manages and the controls that hold them.

7 Risk Management and Internal Controls

The risks in handling complaints and feedback, the controls that manage them, and how risk is rated and escalated.

7.1 Risk Management Approach

KTN manages the risks in handling complaints and feedback within the wider risk governance of the Strategic Plan, under which the Board holds ultimate responsibility for risk. Risks are identified, rated by likelihood and impact, controlled, and escalated. The most significant are reported to the Board.

7.2 Risk Register

Risk	Description	L	I	Inh.	Key controls	Res.	Owner	Escalation
Missed safeguarding	A safeguarding matter not recognised or routed in time	M	H	High	Training to recognise; same-day routing; DSL oversight	Med	DSL	Board
Unheard voices	People cannot or will not raise concerns	M	H	High	Multiple channels, Nga’Karamojong, anonymity, child-friendly	Med	CFFP	ED
Retaliation	A person is penalised for raising a matter	L	H	Med	Non-retaliation rule; confidentiality; enforcement	Low	ED	Board
Slow or no response	Time standards missed; loop not closed	M	M	Med	5 and 20 day standards; register monitoring	Low	CFFP	ED
Data exposure	Complaint information disclosed improperly	L	M	Med	Confidentiality, least-sharing, DPA handling	Low	CFFP	ED
Tokenism	Listening that does not lead to change	M	M	Med	Closing the loop, scorecards, Board reporting	Low	ED	Board

Table 16. Complaints and feedback risk register.

Likelihood (L) and impact (I) are rated H, M or L; Inh. is the inherent rating and Res. the residual rating. Risks are reviewed at least quarterly by the Executive Director; safeguarding risk continuously by the Designated Safeguarding Lead.

7.3 Key Controls Register

Control objective	Control activity	Owner	Evidence	Frequency	Assurance
Everyone can be heard	Multiple accessible channels in Nga’Karamojong	CFFP	Community information page; channel use	Ongoing	Community feedback
Sensitive matters are caught	Training and same-day routing	CFFP / DSL	Routing records	As arising	DSL review
Matters are answered in time	5 and 20 working-day standards	CFFP	Register dates	Per matter	ED review
Records are complete and safe	Register and confidential handling	CFFP	Register (Annex D)	Ongoing	Audit

Control objective	Control activity	Owner	Evidence	Frequency	Assurance
Listening leads to change	Closing the loop and Board reporting	ED	Community-share records; Board paper	At least annual	Board oversight

Table 17. Key controls register.

7.4 Risk Rating and Escalation

Each risk is rated by likelihood and impact; the combination sets the attention it receives. A rising or materialised risk is escalated promptly, with any safeguarding risk going at once to the Designated Safeguarding Lead and the Board.

Impact \ Likelihood	Low	Medium	High
High	Medium	High	High
Medium	Low	Medium	High
Low	Low	Low	Medium

Table 18. Risk rating scale (likelihood against impact).

8

CHAPTER EIGHT

COMPLIANCE, MONITORING AND REPORTING

How performance is measured, reported and assured.

8 Compliance, Monitoring and Reporting

How compliance with this procedure is assured, what is monitored, and how it is reported.

8.1 Compliance Obligations

Obligation	Source	Owner	Monitoring	Evidence
Hear the views of children	Children Act; UNCRC Article 12	CFFP	Channel use; child matters	Register
Route and act on safeguarding	Child Safeguarding and PSEA Policies	DSL	Routing review	Case records
Process complaint data lawfully	Data Protection and Privacy Act, 2019 (Cap. 97)	CFFP	Access review	Access logs
Be accountable to affected people	Core Humanitarian Standard	ED	Community feedback; scorecards	Feedback records
Uphold this procedure	This procedure	ED	Annual review	Compliance review

Table 19. Compliance obligations matrix.

8.2 Monitoring and Indicators

KTN tracks a small set of honest indicators, built into existing MEAL arrangements and disaggregated by sex and by child or adult where relevant.

Indicator	Target	Frequency
Matters acknowledged within five working days	100%	Quarterly
Matters responded to within twenty working days	Improving	Quarterly
Safeguarding matters routed to the DSL the same day	100%	As arising
Communities reporting they know how to raise a concern and trust it	Improving	Annual
Issues fed back to communities (closing the loop)	All	At least annual

Table 20. Monitoring indicators.

8.3 Reporting

Report	Prepared by	Audience	Frequency
Complaints and feedback summary and patterns	Complaints and Feedback Focal Point	Executive Director	Quarterly
Safeguarding matters routed from this procedure	Designated Safeguarding Lead	Board	Quarterly and on incident
Annual complaints and feedback report	Executive Director	Board	Annual
Community feedback and scorecard results	MEAL	Executive Director	Per cycle

Table 21. Reporting matrix.

8.4 Internal Review and Audit

Compliance is checked through review of the register against the time standards, community feedback on the procedure itself, and KTN's wider audit and safeguarding-audit arrangements. Reporting is honest, including about matters not handled well, because an organisation that hides its complaints is not learning from them.

8.5 Accountability to Communities

KTN closes the loop with the people who raise matters, shares with communities what has been raised and changed, and seeks feedback actively through community meetings and scorecards run with Child Protection Committees and local structures, so that accountability is something people can see and feel.

8.6 Records, Audit Trail and Retention

A procedure that cannot be audited cannot be relied on, and a community that is told its complaint was handled is entitled to a record that shows it. Every step this procedure requires leaves a record, made at the time, protected from alteration, and disposed of on a schedule rather than at anyone's discretion. This section sets the audit trail, the retention periods and the disposal rule that apply to everything done under it.

The audit trail

Recorded when it happens. Every complaint and every item of feedback is entered in the register at Annex D on the day it is received, under a case reference, whether or not it proceeds and whether or not the person gave a name. No matter exists only in a person's memory, a private message or a field notebook.

Every decision, with its reason. Each decision in the Chapter 6 process is recorded with its date, the person who took it and the reason for it. That includes a decision that a matter falls outside this procedure and a decision to close without further action, which are the two an auditor and a community representative will ask about first.

The answer given, in the words it was given in. The response made to the person, the language it was given in and the route it went by are recorded, so that KTN can show not only that it replied but what it actually said.

Routed matters leave a trace, not a copy. Where a matter is routed to the Child Safeguarding, PSEA, Whistleblowing or Human Resources process, the register records that it was routed, to whom and when. The substance then lives in that process's own confidential file and is not duplicated here.

No silent edits. Records are not altered after the fact. A correction is made as a dated addition that leaves the original entry legible, so that what was known, and when, can be reconstructed.

Systems keep their own log. Where the register or case information is held electronically, the system records who opened, added to or changed each record and when. That access log is retained and reviewed under this section in the same way as the records themselves.

Retention periods

The periods below are minimums. Where a donor agreement, an open investigation, a police or court process, or a direction of the Board requires a record to be kept longer, the longer period applies. Nothing is destroyed while a matter it relates to is live.

Record	Minimum retention	Held by
Complaint case file, including the assessment, the response and the closure	7 years from closure	Complaints Focal Person

Record	Minimum retention	Held by
Case file for a matter routed to safeguarding, PSEA or whistleblowing	On that policy's schedule, which is longer and prevails	The focal person for that policy
The complaints and feedback register at Annex D	Permanent	Complaints Focal Person
Anonymous complaints and the record of what was done with them	7 years from closure	Complaints Focal Person
Records of retaliation against a complainant and their outcome	10 years from closure	Executive Director
Community feedback sessions, minutes and the response given	5 years	Programme managers
Monitoring indicators, satisfaction data and trend analysis	5 years	Complaints Focal Person
Reports to the Board, published summaries and audit reports	Permanent	Board Secretary
Training registers and induction records for this procedure	7 years	Executive Director
System access logs for the register	12 months, with the last 3 months immediately retrievable	Executive Director

Table 22. Minimum retention periods. The periods are proposals until the Board adopts them, and are read with the Records Management and Retention Policy where the two meet.

Protection, review and disposal

Protected while held. Paper records are held under lock by the Complaints Focal Person; electronic records are held in the controlled register with access by named role. Complaint records are never filed with personnel records, and a complainant's identity is never shared beyond those handling the matter without their consent.

Reviewed once a year. The Complaints Focal Person reviews the register annually against this schedule, lists what has fallen due for disposal, and obtains the Executive Director's written approval before anything is destroyed.

Disposed of so it cannot be recovered. Paper is shredded and electronic records are deleted from live systems and from backups on their next cycle. Each disposal is logged with the date, what was destroyed, and who authorised it, and that log is itself kept permanently.

9

CHAPTER NINE

ENFORCEMENT, IMPROVEMENT AND REVIEW

What happens when this policy is broken, how lessons become changes, and the review that keeps it current.

9 Enforcement, Improvement and Review

How breaches of this procedure are categorised, enforced and corrected, and how those who raise matters are protected.

9.1 Breach Categories

Category	Examples	Severity
Minor	A late acknowledgement or response, promptly corrected	Low: guidance and correction
Serious	Obstructing the procedure; failing to record or route a matter	High: disciplinary action
Safeguarding	Failing to route a child-safety matter to the DSL (PR-009)	Critical: immediate action and review
Retaliation	Penalising or denying help to someone who raised a matter	Critical: serious misconduct

Table 23. Breach categories and severity.

9.2 Enforcement and Consequences

Breaches are handled fairly, proportionately and consistently, under the Code of Conduct and the Human Resources Policy.

Who	Breach	Consequence	Authority
Representative	Minor	Guidance and prompt correction	Manager / CFFP
Representative	Serious (obstruction)	Disciplinary action up to dismissal	ED
Anyone	Failure to route a safeguarding matter	Immediate action; safeguarding review	DSL / ED
Anyone	Retaliation against a complainant	Treated as serious misconduct	ED / Board

Table 24. Enforcement matrix.

Conduct that is a criminal offence is reported to the authorities irrespective of any internal process. The same standard applies to everyone, whatever their role or seniority.

9.3 Protection of Those Who Raise Matters

PROTECTION FROM RETALIATION

No child, family member, community member or representative who raises a complaint or gives feedback in good faith shall be penalised, treated worse, or denied KTN's help for doing so. Retaliation is itself a serious breach and is treated as misconduct. Confidentiality is maintained as far as possible, with particular care for children and sensitive matters.

9.4 Corrective Action and Records

Where a concern is upheld, KTN puts right what should be put right, takes proportionate action, and where a pattern is found, improves the work. Records of complaints and their handling are kept securely so that KTN keeps a complete and honest picture over time.

9.5 Sources of Learning

Source	What it informs
Patterns in the complaints and feedback register	Recurring problems and weak points, by site and theme
Community scorecards and meetings	How the work and the procedure are experienced
Feedback on the procedure itself	Whether it is easy to use and trusted
Safeguarding matters routed from complaints	Where protection needs strengthening
Benchmarking against peer organisations	How KTN compares with recognised practice

Table 25. Sources of learning for continuous improvement.

9.6 Community Participation

KTN does not wait for complaints to arrive. It seeks feedback actively through community meetings and tools such as community scorecards run with Child Protection Committees and local structures, and feeds what communities say into how it plans and improves its work.

9.7 Capability Building

KTN builds the capability the procedure depends on, including the ability of field focal points to receive matters in Nga’Karamojong, to put children and community members at ease, and to recognise and route sensitive matters.

9.8 Review Schedule and Triggers

This procedure is a living governance instrument, reviewed at least once every two years, with the next scheduled review in May 2029, and earlier where a trigger requires it. Children, families and communities are asked whether the procedure is easy to use and whether they trust it, and their answers shape the review.

Trigger	Action
Scheduled review date reached	Full review by the custodian
The procedure is not working for the people it serves	Targeted review and redesign
Change in Ugandan law or a donor requirement	Targeted review and amendment
A serious safeguarding or accountability incident	Review of the relevant controls
An audit or evaluation finding	Review and corrective amendment

Table 26. Review triggers and the action each requires.

9.9 Amendment Procedure

Amendments are prepared by the Complaints and Feedback Focal Point with the Executive Director, in consultation with the Designated Safeguarding Lead where relevant, and approved by the Board. Until an amendment is approved, the current version stands and everyone within scope applies it.

9.10 Version Control

Every amendment is recorded in the Document Control and Amendment History records at the front of this document. The current approved version is the one held by the custodian and published on the KTN website.

An organisation that does not listen to the people it serves cannot serve them well.

KARAMOJA TUMAINI NETWORK

10

CHAPTER TEN

ANNEXES

The working tools: forms, registers and checklists for daily use.

10 Annexes

The working tools that support this procedure: the complaint form, the community information page, the routing guide, the register and the glossary.

Annex A: Complaint and Feedback Form

Helps record a complaint or feedback. It can be filled in by the person, or by a KTN representative on their behalf, including for someone who does not read or write or who prefers to speak. You do not have to give your name.

Field	To complete
Date received	
Received by (KTN representative), if any	
Name of the person (may be left blank)	
Are they a child, family member, community member, partner or other?	
How they wish to be contacted, if at all	
What they wish to tell us (complaint, concern, suggestion, question or positive feedback)	
What they would like to happen	
Does this appear to involve a child's safety, sexual abuse, or fraud? (if yes, route at once under Section 4.3)	

For office use by the Complaints and Feedback Focal Point: category and seriousness; acknowledged (date); routed to (if sensitive); action taken; response given (date and how); date closed.

Annex B: Community Information Page

For the community. Shared in plain language and explained in Nga'Karamojong, read aloud or talked through for anyone who does not read. KTN completes it with current names, places and numbers.

Your voice matters to KTN. If something is wrong, if you have an idea, a question, or something good to share, please tell us. It is free, it is safe, and you will never lose KTN's help for speaking up. You can give your name or stay anonymous.

1. Speak to any KTN staff member or volunteer, or to our Complaints and Feedback Focal Point: _____.
2. Call us on: _____.
3. Put a note in the feedback box at: _____.
4. Tell us at a community meeting, or through your Child Protection Committee or local leader.

We will let you know we have received your message, look into it, and tell you what we have done. Children are welcome to talk to us too, and we will listen with care.

Annex C: Handling and Routing at a Glance

A quick reference for representatives, so that every matter goes to the right place at the right speed.

The matter is about	Where it goes	How quickly
General complaint, suggestion, question or feedback	Complaints and Feedback Focal Point	Acknowledge within 5 working days; respond within 20
A child's safety or possible harm	Designated Safeguarding Lead (Child Safeguarding Policy)	At once, the same day
Sexual exploitation or abuse	PSEA Focal Point (PSEA Policy)	At once, the same day
Fraud, theft or misuse of funds	Finance and Anti-Fraud and Whistleblowing routes	Without delay
Serious wrongdoing	Whistleblowing Officer (Whistleblowing Policy)	Without delay
A staff member's own employment	Human Resources (grievance)	Per the HR Policy

Annex D: Complaints and Feedback Register

Records what KTN receives and how it was handled, while protecting the identity of those involved. Held in confidence and reviewed for patterns and lessons.

Reference and date	What was raised and category	Action, outcome and date closed

Annex E: Glossary of Key Terms

Term	Meaning
Complaint	An expression that KTN did something, or failed to do something, that was wrong, unfair or harmful.
Feedback	Any view shared with KTN about its work, including suggestions, questions and positive comments.
Downward accountability	Being answerable to the children and communities an organisation serves, not only to funders and government.
Closing the loop	Telling the person who raised a matter what came of it.
Child Protection Committee	A community structure that helps protect children and can help people raise concerns to KTN.
Complaints and Feedback Focal Point	The person KTN appoints to receive and coordinate the handling of complaints and feedback.



SHIELDING PASTORALIST CHILDREN · BUILDING FUTURES · LEADING CHANGE

Behind every number is a child with a name.

A complaint is not a threat to KTN's work. It is the clearest evidence that someone still expects better of it. This procedure exists so that the expectation is met with an answer, and no one punished for raising it.

Karamoja Tumaini Network

Hope · Heal · Empower

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COMPLAINTS AND COMMUNITY FEEDBACK PROCEDURE · VERSION 1.0 · EFFECTIVE MAY 2026