

LANDMARK RELIEF INTERNATIONAL

Foundational Governance Policy

Complaints and Feedback Policy

Aligned with Canadian law (federal and Ontario)
and United Nations and international humanitarian standards
Effective date: October 7, 2026

About this policy

This document sets out the Complaints and Feedback Policy of Landmark Relief International (the "Organization"). It is one of three foundational governance policies, together with the Safeguarding Policy and the Partner Due Diligence Policy. Each policy is self contained and is adopted, versioned, and reviewed separately by the Board of Directors. Together they form the core of the Organization's accountability and risk management framework and are designed to satisfy the expectations of institutional donors and to align with the legal requirements of Canada, where the Organization is incorporated (at the federal level and in Ontario), as well as recognized United Nations and international humanitarian standards.

The legal instruments and standards this policy relies on are named at the end of the policy and listed in the References appendix, with enough citation detail for independent verification.

Complaints and Feedback Policy

Policy owner	Accountability / MEAL Lead
Approved by	Board of Directors, Landmark Relief International
Version	1.1
Effective date	October 7, 2026
Review cycle	Every two years, or sooner as needed
Applies to	Affected communities, personnel, volunteers, partners, and members of the public

1. Purpose

Landmark Relief International is accountable to the people and communities it serves. This policy establishes safe, accessible, and effective ways for anyone to raise concerns, complaints, and feedback, and to have them addressed fairly and promptly. It gives effect to Commitment 5 of the Core Humanitarian Standard on Quality and Accountability (2024 Edition): people and communities can safely report concerns and complaints and get them addressed.

2. Scope

This policy covers complaints and feedback from affected communities and their members, personnel, volunteers, partners, suppliers, and the public. It covers both non-sensitive complaints (for example, about the quality, targeting, or timeliness of assistance) and sensitive complaints (for example, sexual exploitation and abuse, safeguarding concerns, fraud, corruption, or serious breaches of the Code of Conduct), which follow a confidential, restricted pathway.

3. Definitions

- **Complaint:** a specific grievance about something the Organization did or failed to do, including the conduct of its personnel or partners.
- **Feedback:** any comment, suggestion, question, or appreciation about the Organization's work, whether positive or negative.
- **Sensitive complaint:** a complaint alleging sexual exploitation and abuse, other safeguarding harm, fraud, corruption, or serious misconduct, requiring confidential handling and restricted access.
- **Complaints and feedback mechanism (CFM):** the combined channels, procedures, and records through which complaints and feedback are received, handled, and closed.

4. Principles

- **Safety:** people can report without fear of retaliation, loss of assistance, or harm.
- **Accessibility and inclusion:** multiple channels are provided so that all groups, including women, children, older people, people with disabilities, and marginalized groups, can use them.
- **Confidentiality:** information is shared only on a need-to-know basis; sensitive complaints are tightly restricted.
- **Transparency and responsiveness:** communities are told how to complain, what to expect, and how their complaint was handled.
- **Fairness and no retaliation:** complaints are handled impartially, and both complainants and respondents are treated fairly.

5. Channels and community information

The Organization provides several complaint and feedback channels appropriate to each context, which may include a telephone hotline, a dedicated email address, a web form, suggestion boxes or help desks at activity sites, and named focal points. At the start of every activity, communities are informed, in accessible language and formats, of what the Organization commits to, what behavior to expect from personnel (including that assistance is always free and never conditional on any favor), and how to raise a concern or complaint and how it will be addressed. This reflects requirements 5.1 to 5.3 of the Core Humanitarian Standard (2024).

6. Categorization and routing

- **Non-sensitive complaints and feedback:** logged and handled by the relevant program or operations team, with trends reviewed to improve delivery.
- **Sensitive complaints:** immediately and confidentially referred to the Designated Safeguarding Lead (for safeguarding and SEA) or to the appropriate authority (for fraud or corruption), handled under the Organization's Safeguarding Policy and anti-fraud arrangements, and never investigated by the person complained about or their line manager.

7. Process and indicative timelines

The following indicative timelines apply and are adjusted for safety and context:

- **Acknowledge:** within 5 working days of receipt (immediately for sensitive complaints).
- **Assess and categorize** within 10 working days, routing sensitive complaints on the day they are identified.
- **Investigate or refer, and respond:** aim to resolve non-sensitive complaints within 30 working days; sensitive complaints follow the safeguarding or investigation process and its confidentiality requirements.
- **Close and record:** record the outcome, inform the complainant where safe and possible, and offer an appeal or escalation route.

These steps give effect to requirement 5.4 of the Core Humanitarian Standard (2024): manage, investigate, address, and appropriately refer complaints in line with recognized good practice.

8. Whistleblower protection and anti-retaliation

Personnel, volunteers, partners, and community members who report a concern in good faith are protected from retaliation, dismissal, or detriment. Any act of retaliation is itself a disciplinary matter. Reports may be made anonymously, and the Organization will handle them as fully as the available information allows.

9. Data protection

Complaint and feedback data, including personal and sensitive information, is collected, stored, and shared lawfully and securely, consistent with PIPEDA (Canada) and other applicable privacy requirements, and retained only as long as necessary.

10. Roles and responsibilities

- **Board of Directors** oversees accountability performance and reviews complaint trends and serious cases.
- **Accountability / MEAL Lead:** maintains the mechanism, the complaints log, and reporting, and drives learning.
- **Designated Safeguarding Lead:** handles sensitive safeguarding and SEA complaints under the Safeguarding Policy.

- **Program and field teams:** inform communities, receive complaints and feedback, and act on non-sensitive items.

11. Monitoring and learning

The Organization keeps a complaints and feedback log, analyses trends, and uses the results to adapt and improve programs, in line with Commitment 7 of the Core Humanitarian Standard (2024) on learning and improvement. It regularly checks that communities understand how to report and how complaints are addressed (requirement 5.3), and reports anonymized data and learning to the Board at least annually.

12. Legal and standards basis

This policy is grounded in: the Core Humanitarian Standard on Quality and Accountability (2024 Edition), in particular Commitment 5 and requirements 5.1 to 5.5, and Commitment 7; the IASC commitments on Accountability to Affected Populations and PSEA; and PIPEDA (Canada). Full citations are in the References appendix.

13. Review

This policy is reviewed at least every two years and after any significant incident or change in applicable standards or law.

References: legal and standards basis

The instruments below are the basis for this policy. They are current as of September 2026 and are checked against the official source at each review of this policy.

United Nations and international humanitarian standards

- Core Humanitarian Standard on Quality and Accountability, 2024 Edition (CHS Alliance, Sphere, and Groupe URD; launched 21 March 2024), in particular Commitment 5 and requirements 5.1 to 5.5, and Commitment 7.
- Inter-Agency Standing Committee (IASC), Commitments on Accountability to Affected People and Protection from Sexual Exploitation and Abuse (revised 2017).

Canada (federal and Ontario)

- Personal Information Protection and Electronic Documents Act (PIPEDA), S.C. 2000, c. 5.