

SRI LANKA CLIMATE FUND

MINISTRY OF ENVIRONMENT,
SOBADAM PIYASA,
NO. 416/C/1,
ROBERT GUNAWARDANA MAWATHA,
BATTARAMULLA,
SRI LANKA.

Procedure for Handling Complaints

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Issue No	: 02
Doc No	: SLCF-GHG-PRO-014
Date of Issue	: 25.04.2022
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Title: Procedure for Handling Complaints	Doc. No: SLCF-GHG-PRO-014
Issue No:02	Date of Issue: 25.04.2022
Rev. No: 02	Date of Rev: 01.11.2024
Prepared by: Manager- Project & Quality Management/ GHG Validation & Verification	Reviewed and approved by: CEO

REVISION HISTORY

Revision No	Date of Revision	Amendment/Change
00	25.04.2022	Included the ISO 14065:2020 requirements in to the document
01	20.11.2023	Company address change, SLCF Organization Structure change etc,
02	01.11.2024	SLCF Organization Structure change etc,

ABBREVIATIONS

CEO	Chief Executive Officer
GHG	Greenhouse Gases
ISO	The International Organization for Standardization
IEC	The International Electrotechnical Commission
MOU	Memorandum of Understanding
MR	Management Review
VB	Verification Body
SLCF	Sri Lanka Climate Fund
TOR	Terms of Reference
Manager	Project & Quality Management/ GHG Validation & Verification
Assistant Managers	Project & Quality Management/ GHG Validation & Verification

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1. PURPOSE

The purpose of this procedure is to ensure all complaints concerning the organization and product level GHG verifications, provided under the SLCF's accredited verification scope, are handled consistently and effectively.

2. SCOPE

The scope of this procedure applies to the following:

- Complaints received from clients and any other stakeholders concerning the GHG verification service for organization and product, provided under the SLCF's accredited verification scope of ISO 14064-1: 2018/ ISO 14067:2018

3. RESPONSIBILITY

A Board member who is representing professional in the relevant field (Hereinafter refers to as Board Director-Sector Expert (BDSE)) has ultimate responsibility to ensure that complaints are handled correctly while reviewing and taking necessary corrective actions of the complaints handling process. The Manager- Project & Quality Management/ GHG Validation & Verification is responsible for informing such complaints to the expert representing the board of directors.

4. DEFINITIONS

“Complaint” means a formal (written) and/or informal (verbal) expressions of dissatisfaction regarding the performance of SLCF in relation to its GHG projects, from any source, such as the client's organization , the general public or its representatives, government bodies, NGOs, etc.

“Dispute” means a disagreement between SLCF and the project participant regarding SLCF' recommendation and/or opinions/decisions made at various stages during the verification functions.

“Appeal” Request by the client or responsible party to the verification body for reconsideration of a decision it has made relating to the verification

5. PROCEDURE FOR HANDLING COMPLAINTS

5.1. General

5.1.1. Manager- Project & Quality Management/ GHG Validation & Verification is responsible for ensuring appropriate “notes” are entered into the client file and to the complaints/disputes/appeals

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file, upon origination of any of the actions noted below. The notes to be included need not be detailed, but shall be sufficient to make an individual aware of the existence of actions.

5.1.2 Complaints/Disputes may be documented on Complaint Form where this has been identified as a result of the investigation/ review process.

5.1.3 Copies of any written communication are retained as part of the Complaint/Dispute file.

5.1.4 The Complaint/Dispute file is kept in a secure and retrievable location, only accessible by authorized SLCF employees whilst ensuring confidentiality requirements are met.

5.1.5 The Manager- Project & Quality Management/ GHG Validation & Verification and Technical Team of supporting affiliates are responsible to ensure that the information necessary to the review of the complaint as required by BDSE within 7 working days.

5.1.6 Upon completion of Complaints and Dispute actions, a copy of the finalized records shall be placed in the pertinent Job File and/or maintained on SLCF's complaints/disputes/ file.

5.1.7 The SLCF's complaints/disputes/appeals file includes codes to be assigned to each Complaint and Dispute which allow sorting and trending of these issues.

5.1.8 The Complaints process is publicly available.

5.2 Complaints

5.2.1 All Complaints are passed to the BDSE, who shall ensure that:

- The complainant was informed that SLCF's received the complaint
- The nature of the complaint is confirmed with the complainant
- Sufficient information is gathered from involved parties (internal and external)
- All necessary information is verified for evaluating the validity of the complaint
- Appropriate investigation of the complaint is carried out
- Details of the complaint be gathered and recorded in the complaints file.
- Making recommendation Manager- Project & Quality Management/ GHG Validation & Verification on required appropriate correction and corrective action (through the use of a non-compliance form including root cause analysis) to close out the complaint & by whom.
- BDSE shall ensure that decision reached on appeals do not result in any discriminatory results

The information recorded includes the following:

- Complaint file based on actions listed under 5.3.1

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- Date received and by whom.
- Description of the Complaint
- Recommended appropriate correction and corrective action to close out complaint and by whom.
- Proposed Date to implement the corrective action.

5.2.2 Board of Directors may delegate all of the actions listed under 5.2.1 to the BDSE who is familiar with the GHG Verification activities.

5.2.3 The complainant is contacted to determine the full nature and extent of the complaint and any additional information is added to the complaints/dispute file.

5.2.4 The responsible person as per 5.2.1 shall respond to the complainant and initiate action within 30 days of the receipt of the complaint and provide the complainant a progress report where feasible.

5.2.6 The criteria for determining the validity of complaints are as follows:

- Delays in delivery of services
- Audit coverage or Interpretation
- Customer Service contact & response
- Auditor competence & consistency

5.2.7 The individual assigned to investigate the complaint may consider it necessary to consult other sources (such as clients and files) that may have been affected by related problems and initiate further corrective/remedial action, as necessary.

5.2.8 The investigation of a complaint may require an unscheduled internal quality audit to determine the action required. The investigation may also result in changes to procedures and/or additional training/supervision for individuals concerned. Any such training (and follow-up to ensure effectiveness), shall be documented for inclusion with the complaint documentation and on a Complaint Form (Complaints/Disputes).

5.2.9. Should the investigation indicate misconduct on the part of SLCF Personnel or failure to exhibit the attributes required of SLCF auditors, suitable disciplinary action shall be taken (and documented) by the appropriate manager in addition to any further training/supervision, as noted above.

5.2.10. Complaints are tracked using the SLCF Complaints/Dispute file, including results of investigation, follow-up and closure.

5.2.11. The Manager- Project & Quality Management/ GHG Validation & Verification shall summarize all complaints and their progress and resolution at management review meetings; during which, appropriateness of correction and corrective action are discussed and assessed.

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5.2.12 Manager- Project & Quality Management/ GHG Validation & Verification or BDSE notifies the client, in writing, of the outcome of the investigation and the final notice of the end of the complaints handling process.

5.2.13. The details of the complaint are given to the team leader assigned to the next scheduled verification, by the Manager- Project & Quality Management/ GHG Validation & Verification, if relevant. The team leader is responsible for following up and reporting to Manager- Project & Quality Management/ GHG Validation & Verification on the appropriateness of the corrective action.

5.2.14. The outcome of the assessment is documented in accordance with normal procedures, and a note is added to indicate the results of the complaint follow-up.

5.3 Review of complaints

5.3.1 Management Reviews include coverage of complaints.

5.3.2 Any corrective and preventive action further to that already taken, or of a more general nature, may be delegated to appropriate individuals. Actions are followed-up at subsequent Management Meetings and/or Advisory Board/Impartiality Committee Meetings.

6. DISPUTES

6.1 Initial handling of disputes

6.1.1 When there is a dispute SLCF officers shall:

- Report the dispute to Manager- Project & Quality Management/ GHG Validation & Verification
 - Manager- Project & Quality Management/ GHG Validation & Verification will evaluate the dispute
- If the dispute relates to non-fulfillment of a clear requirement, the dispute shall not be considered as dispute.
 - If the dispute relates to the interpretation of a requirement, the dispute shall be forwarded to the expert representing-Board of directors
 - If the dispute concerns a party that has no contract with SLCF, it should be considered if it is valid
 - The Manager- Project & Quality Management/ GHG Validation & Verification is responsible for informing such dispute to the expert representing-Board of directors.

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6.1.2 If the counterpart does not accept SLCF's response, she/he shall be advised of the complaints procedure if the matter is related to SLCF's actions or directions regarding the verification activities.

7. CORRECTION

7.1 Corrective Action

7.1.1 The Manager- Project & Quality Management/ GHG Validation & Verification, in consultation with Chief Executive Officer, shall review the outcome of all complaints and disputes where appropriate, initiate action to prevent repetition and achieve improvements.

8. REFERENCE DOCUMENTS

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| 1. | Complaint Form | SLCF-GHG-PRO-014-01 |
| 2. | Summary- Complaints/Disputes/Appeals | SLCF-GHG-PRO-007-02 |
| 3. | Client's Feedback Form | SLCF-GHG-PRO-007-03 |