MINISTRY OF HEALTH

REPUBLIC OF KENYA

NATIONAL QUALITY CONTROL LABORATORY

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GRIEVANCE REDRESS MECHANISM

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ABBREVIATIONS AND ACRONYMS

E&S	Environmental and Social
ESCP	Environmental and Social Commitment Plan
ESF	Environment and Social Framework
ESIA	Environmental and Social Impact Assessment
ESMF	Environmental and Social Management Framework
ESMP	Environment and Social Management Plan
ESS	Environmental Social Standards
GBV	Gender Based Violence
GBVIMS	Gender Based Violence Information Management System
GM	Grievance Mechanism
GRC	Grievance Redress Committee
GRM	Grievance Redress Mechanism
HEPRR	Health Emergency Preparedness, Response and Resilience
NQCL	National Quality Control Laboratory
PCT	Project Coordinating Team
RP	Responsible Party
SEA	Sexual Exploitation & Abuse

SEP	Stakeholder Engagement Plan
SESP	Social and Environmental Screening Procedure
SH	Sexual Harassment
SMS	Short Message Service
SRM	Stakeholder Response Mechanism
VAC	Violence Against Children
WB	World Bank

EXECUTIVE SUMMARY

The National Quality Control Laboratory (NQCL) has established a Grievance Redress Mechanism (GRM) to provide a structured, transparent, and accessible process for receiving, managing, and resolving concerns and complaints arising from its project activities, institutional operations, and interactions with stakeholders.

NQCL plays a critical role in ensuring the quality, safety, and efficacy of health products through laboratory testing and related quality assurance services. In implementing its mandate and undertaking various projects and institutional activities, the Laboratory interacts with a wide range of stakeholders, including employees, project workers, contractors, consultants, suppliers, service providers, Government agencies, development partners, visitors, and surrounding communities. These interactions may occasionally give rise to concerns or grievances that require timely and appropriate resolution.

The GRM serves as a formal platform through which stakeholders may raise concerns related to environmental and social issues, labour and working conditions, occupational safety and health, project implementation, service delivery, workplace conduct, and other institutional or operational matters. The mechanism is designed to ensure that grievances are received, assessed, and addressed in a timely, fair, transparent, and effective manner while promoting accountability and continuous improvement within the Laboratory.

The GRM is guided by the principles of accessibility, confidentiality, fairness, responsiveness, impartiality, transparency, and protection against retaliation. Stakeholders may submit grievances through established channels, including email, written submissions, telephone communication, suggestion boxes, or direct reporting to designated focal persons. All grievances received are appropriately documented, reviewed, investigated where necessary, and resolved within defined timelines, with feedback provided to the complainant throughout the process.

The implementation of the GRM is expected to strengthen stakeholder engagement, promote trust and accountability, facilitate the early identification and resolution of concerns, reduce potential conflicts, and support continuous improvement in the delivery of NQCL's mandate and project activities. Through this mechanism, the National Quality Control Laboratory demonstrates its commitment to responsible institutional governance, effective stakeholder engagement, and the fair and timely management of concerns and grievances, thereby contributing to the achievement of sustainable institutional and project outcomes.

1.0 INTRODUCTION

The Republic of Kenya (the Borrower), through the Ministry of Health (MOH), is implementing the Health Emergency Preparedness, Response and Resilience Project for Eastern and Southern Africa (HEPRR Project) under Phase I of the Multiphase Programmatic Approach. The Project is implemented with the involvement of the Kenya BioVax Institute Limited (KBI), National Public Health Institute (NPHI), Pharmacy and Poisons Board (PPB), and the National Quality Control Laboratory (NQCL), as set out in the Financing Agreement.

The National Quality Control Laboratory (NQCL), as an implementing agency under the Project, is undertaking activities aimed at strengthening its institutional and technical capacity to support the quality assurance of health products and contribute to enhanced health emergency preparedness and resilience. In the implementation of its Project activities, NQCL engages and interacts with a wide range of stakeholders, including government agencies, employees and project workers, contractors, consultants, suppliers, service providers, development partners, visitors, surrounding communities, and the general public. Project implementation may occasionally give rise to concerns, complaints, or grievances related to environmental and social matters, labour and working conditions, occupational health and safety, procurement, project activities, and other operational issues.

A Grievance Redress Mechanism (GRM) has therefore been established to provide a structured, transparent, and accessible process for receiving, recording, assessing, addressing, and resolving grievances in a timely, fair, and effective manner. The GRM serves as an important accountability and risk management tool that promotes transparency, strengthens stakeholder engagement, builds trust, and supports the effective implementation of Project activities.

This GRM is aligned with the HEPRR Project's enhanced Grievance Redress Mechanism and is consistent with the requirements of the World Bank Environmental and Social Framework (ESF). The mechanism shall be implemented throughout the Project cycle and will provide accessible channels through which stakeholders can raise concerns and receive appropriate feedback and resolution.

The GRM does not replace judicial or administrative remedies. Complainants retain the right to access formal legal, judicial, or administrative channels at any stage of the grievance redress process.

2.0 SCOPE, OBJECTIVES AND GUIDING PRINCIPLES

2.1 Scope

The GRM applies to all activities undertaken by NQCL under the Health Emergency Preparedness, Response and Resilience Project. It covers all stakeholders who may be affected by, or have an interest in, NQCL's Project activities, including project-affected communities and local residents, NQCL employees and project workers, contractors, consultants, suppliers and service providers, government agencies, development and technical partners, civil society organizations, community leaders, vulnerable and marginalized groups, and members of the public. The GRM provides all stakeholders, regardless of their role or level of engagement, with access to a fair, transparent, confidential, and accessible process for raising and addressing grievances.

2.2 Objectives

The main objective of the GRM is to provide a structured and effective mechanism for receiving, recording, assessing, investigating, and resolving grievances arising from NQCL's implementation of the HEPRR Project. It covers concerns relating to environmental and social impacts, community health and safety, labour and working conditions, occupational health and safety, procurement and governance, stakeholder engagement, workplace conduct, and other Project-related matters, including concerns involving gender-based violence, sexual exploitation and abuse, and sexual harassment. The GRM promotes timely resolution of concerns, accountability, stakeholder confidence, and continuous improvement in Project implementation, while ensuring that complainants are treated fairly and protected from retaliation.

The specific objectives of the GRM are to:

i. Provide accessible, inclusive, and transparent channels for stakeholders to raise concerns, complaints, and feedback related to project activities.
ii. Ensure timely, fair, and consistent resolution of grievances while protecting complainants from retaliation or discrimination.
iii. Promote accountability and transparency in project implementation through proper documentation, tracking, and reporting of grievances and their resolution.
iv. Strengthen stakeholder engagement and trust by facilitating effective communication between project implementers and affected stakeholders, including vulnerable and marginalized groups.
v. Improve project performance and risk management by identifying recurring issues, preventing escalation of disputes, and ensuring compliance with applicable World Bank requirements, national & international regulations, and institutional policies.

2.3 Guiding Principles

The guiding principles for GRM are the following:

i. **Legitimate:** Enabling trust from the stakeholder groups for whose use they are intended, and being accountable for the fair conduct of grievance processes.

ii. **Accessible and inclusive:** Being known to all stakeholder groups for whose use they are intended and providing adequate assistance for those who may face barriers to access.

iii. **Predictable:** Providing a clear and known procedure with an indicative timeframe for each stage, and clarity on the types of process and outcome available and means of monitoring implementation.

iv. **Equitable:** Seeking to ensure that aggrieved parties have reasonable access to sources of information, advice and expertise necessary to engage in a grievance process on fair, informed and respectful terms.

v. **Confidential:** Commitment to protect the identity, personal information and details shared by individuals who submit grievances

vi. **Transparent:** Keeping parties to a grievance informed about its progress and providing sufficient information about the mechanism's performance to build confidence in its effectiveness and meet any public interest at stake.

vii. **Rights compatible:** Outcomes are consistent with applicable national and internationally recognized rights.

viii. **Efficient:** This GRM will have the ability to handle and resolve grievances in a timely, organized and resource efficient manner while ensuring fair and quality outcomes.

ix. **Feedback:** This GRM is obliged to keep complainants informed throughout the grievance handling process, communicate outcomes clearly and respectfully.

3.0 ROLES AND RESPONSIBILITIES

Implementation of the GRM will be the responsibility of the E&S focal person who shall be the chairperson of the GRC, and will be supported by the NQCL leadership and other resource persons. The various roles and responsibilities are as tabulated below:

Table 1: GRM Roles and Responsibilities

Responsible Officer	Roles and Responsibilities
E&S Focal Person	i. Act as the GRC chairperson. ii. Coordinate the GRM procedure, management system and recording as per the steps described in the procedure. iii. Providing guidance on solutions to complaints and grievances in consultation with the relevant departments and ensure consistency of redress for all grievances received in relation to the Project. iv. Coordinate the work of investigation of the GRC. v. Promote awareness about the GRM to all stakeholders in the Project. vi. Coordinate with the PCT & WB in the investigation of grievances and the agreement of redress that were directly received or referred.
NQCL Management	i. Provide support to the GRC and the E&S focal person in handling and addressing grievances.

Responsible Officer	Roles and Responsibilities
	ii. Review GRM reports before submission to the PCT.
Social Media Manager	i. Identify grievances through social media pages, filter and channel each to the responsible party. ii. Participate as a member of the GRC. iii. Provide feedback on handling and resolution of the matters through social media pages.
Customer Relations Officer	i. Receive and record grievances reported through email, phone call or walk-in complainants and channel to the E&S focal person. ii. Participate as a member of the GRC. iii. Provide feedback on handling and resolution of the matters through similar channels as received.
Human Resource Officer	i. Participate as a member of the GRC. ii. Handle complaints through appropriate channels including Government procedures.
Grievance Redress Committee	i. Provide summary reports to the PCT (both those received by the implementation level GRM and directly by WB) with any recommended actions. ii. Disclose the GRM's work (including case registry, summary reports on individual cases, reports on trends or patterns, and actions taken in response to trends and

Responsible Officer	Roles and Responsibilities
	patterns) to the PCT and to project stakeholders, through periodic reporting (quarterly).
All Responsible Partners and Contractors	i. Receive and acknowledge any issue, concern, complaint or grievance from the community, verbally or in writing. They will record the issue and report it to the E&S focal person in compliance with the GRM. ii. Involvement in the investigation of grievances as required depending on the nature and severity of the grievance and as directed by the GRM.
Project Coordinating Team	i. Ensure that this GRM procedure is applied through the Project and its Responsible Partners and Contractors' operations and activities. ii. Apply necessary controls to minimise risks that could result in stakeholder grievances. iii. Review complaints received by the GRM and their outcomes, work with the E&S focal person to identify successes, lessons learned, challenges and trends, and report its assessments to the management. iv. Receive quarterly reports on complaints from the Project implementation level of the GRM, and collaborate with NQCL to identify successes,

Responsible Officer	Roles and Responsibilities
	challenges, trends and lessons learned in responding to complaints.

4.0 CATEGORIES OF COMPLAINTS, DISCLOSURE AND AWARENESS

4.1 Categories and Eligibility

The management of complaints will follow different paths depending on the type of complaint. There are different categories of complaints, including:

i. Employment and Labour Issues;
ii. Occupational Safety and Health Complaints;
iii. Sexual Exploitation;
iv. Community Health and Safety Concerns;
v. Environmental Complaints;
vi. Contractor and Supplier Complaints;
vii. Stakeholder Engagement and Communication Issues;
viii. Security Related Complaints;
ix. Corruption and Fraud Allegation;
x. Discrimination and Human Rights Issues;
xi. Administrative and Service Delivery Issues;
xii. Product Complaints.

GBV/SEA/SH complaints relate to sexual exploitation and abuse (SEA/SH), sexual violence and violence against children. For this category of complaints, users need to be assured that they will be handled confidentially and without risk to themselves. In these cases, a special handling procedure is reserved to preserve the confidentiality of data processing.

4.2 Disclosure and Awareness

NQCL shall implement a structured communication strategy to ensure that the GRM is widely known, easily understood, and accessible to all stakeholders throughout the project lifecycle as stipulated in the Stakeholder Engagement Plan (SEP). Information about the GRM will be disclosed through multiple channels to reach diverse stakeholder groups. Printed materials such as posters will be displayed at strategic locations including the project site and other public areas. In addition, the GRM details will be published on the NQCL website and shared through digital platforms where applicable.

To ensure inclusiveness, GRM information will be communicated in languages that are easily understood by all stakeholders. In case the Project involves vulnerable and marginalized groups, special attention will be given to ensuring that they are adequately reached through tailored communication approaches.

All project workers, including contractors and subcontractors, will be sensitized on the GRM during induction to ensure they understand how to report grievances and their responsibilities within the mechanism.

The effectiveness of GRM awareness activities will be periodically assessed through stakeholder feedback and monitoring of grievance uptake levels, and improvements will be made where necessary.

5.0 GRIEVANCE REDRESS PROCESS

5.1 Overview of the GRM Process

The GRM for the Project shall operate at two levels;

i. Project Coordination Team (PCT) level, which shall provide oversight, review, and escalation support for grievances that are not satisfactorily resolved at the Project Management level. The PCT shall also monitor the effectiveness of the GRM, identify recurring issues, and ensure that corrective actions are implemented to prevent future occurrences.
ii. Project Implementing level, under the overall direction and oversight of the Chief Executive Officer (CEO) of NQCL. This level shall be responsible for receiving, recording, assessing, and resolving grievances raised by stakeholders in relation to project activities, contractors, workers, and community interactions.

As a result of this two-tier grievance management structure, complainants may raise grievances at any time through the following channels:

i. The PCT, particularly in cases requiring escalation, review, or additional intervention.
ii. The Project GRM managed by NQCL or the Ministry of Health (MoH).

5.2 Process of the General Complaint – GRM

The following process will be followed to address and resolve a grievance:

Step 1 – Receiving and Registering Grievance

Grievances shall be received at NQCL and shall be forwarded to the E&S focal person. Grievances will be submitted through the following addresses:

National Quality Control Laboratory,
Hospital Road, KNH Complex, School of Pharmacy Second Floor,
P.O. Box 29726 – 00202,
Nairobi.
Email: documentation@nqcl.go.ke; info@nqcl.go.ke
Phone: +254 703 311 563
LinkedIn: National Quality Control Laboratory
X: @NQCLKenya
Website: www.nqcl.go.ke

All grievances shall be logged using the Grievance Form below:

Table 2: Grievance record (to be filled by/on behalf of the complainant)

Grievance Record			
Reference No: (Official Use Only)			
Anonymous	□ Yes	□ No	
Full Name			
Gender	□ Male	□ Female	□ Other

Age			
Contact Information:	Area of Residence		
	Telephone:		
	Email:		
Preferred contact method	□ Letter	□ Telephone	□ Email
Preferred language for communication			
Grievance Description			
Description of Grievance or Incident *(What happened? Where did it happen? Who did it happen to? What is the result of the problem?)*			
Date of Incident/ Grievance			
Nature of Incident/ Grievance (tick one and include date)	□ One time incident/ grievance (Date________________)		
	□ Incident/ grievance happened more than once (Date________________)		
	□ On-going incident/ grievance (Date________________)		

What would you like to see happen to resolve the problem?	
Additional Comments:	

The GRM focal person will log, document and track all responses received within the secure grievances database below. Grievances shall be assigned a case number and records of communication/consultation shall all be attached with the relevant entry and filed. The database shall be monitored regularly for recurring responses so that appropriate mitigation can be developed. As a minimum, the following information shall be recorded:

i. Case number;
ii. Complainant's name and contact details;
iii. Date of complaint;
iv. Details of complaint;
v. Resolutions discussed and agreed with the party(ies) in question;
vi. Actions implemented (including dates); and

Outcome of the actions implemented.

Table 3: Grievance database (Ms Excel sheet to be maintained at NQCL)

Case Number	Date of Complaint	Recipient	Complainant (Name and Contacts)	Description of Grievance	Resolutions Discussed	Actions Implemented (with dates)	Person Responsible	Status (open/closed)-Outcome of actions	Findings	Resolution	Date of Sign-off	Resolution Turnaround Time	Is the Complainant Satisfied with the Resolution	Additional Comments / Follow-up

Step 2 – Acknowledging, Assessing and Assigning Grievance

(i) Acknowledgement of the grievance

The E&S focal person shall acknowledge receipt of any grievance as soon as possible, but within 48 hrs from the date it was submitted. Once received and acknowledged the grievances will be categorized based on the available categories. The complainant whose address is known shall be informed about the timeframe in which a response can be expected. A Response Receipt Form below shall be signed and a copy provided to the complainant.

Table 4: Grievance Receipt Acknowledgement Form *(To be sent/delivered to complainant to acknowledge grievance received)*

Grievance Receipt Form	
Grievance Number:	
Date Submitted:	
Target Date for initial meeting to address grievance:	
Name:	
Address and Contact Details:	
Grievance Received by:	
Name of Grievance Responsible Person	
Contact Details of Grievance Responsible Person	Telephone: Email: Address:
Comments	

Additional considerations on acknowledging grievances: Literacy levels should be taken into consideration when providing the complainant with the acknowledgement of receipt, and verbal acknowledgement should accompany a written acknowledgement.

(ii) Assigning grievances

The GRC chairperson will convene a Grievance Redress Committee which shall be composed of the Project focal person, E&S focal person, Human Resource personnel and any other person that is deemed necessary. The team will assign organisational responsibility for formulating a response. The E&S focal person has the responsibility for coordinating the Project's response to a grievance.

Table 5: Grievance Responsibility Assignment

Grievance Record (Official Use)	
Grievance Number	
Date Submitted	
Target Date for Resolution	
Full Name:	
Address and contact details:	
Grievance received by:	

Name of Grievance Responsible Person:		
Description of Grievance:		
Assessment of Grievance Level:		
Assign Responsibility		
Notification to PCT	□ Yes	□ No

The progress on process should be logged in the Grievance Database.

Step 3 – Investigation and Development of Resolutions

The Grievance Management Committee will obtain as much information as possible from the person who received the complaint, as well as from the complainant, to gain a first-hand understanding of the grievance:

The committee will:

i. Analyze the problem;
ii. Conduct necessary investigations and evaluations;
iii. Undertake a site visit, if required, to clarify the parties and issues involved;
iv. Gather the views of other stakeholders, including project employees, if necessary and identify initial options for settlement that parties have considered.

If the grievance concerns physical damage (e.g., crops, house, community asset) take a photograph of the damage and record the exact location as accurately as possible.

The GRC will explore potential solutions and mobilize additional resource persons as necessary to propose a resolution to the grievance. The Chairperson to the GRC will be responsible for coordinating the process and convening meetings.

Step 4 – Communicating and Seeking Agreement

The E&S focal person shall draft a proposed solution and communicate it to all parties involved, including a written response to the complainant. E&S focal person will submit a proposed resolution not later than 28 days after receipt of the complaint.

Upon receipt of the proposed resolution, the complainant will be asked to approve or disapprove the suggested actions, so that the complaint can be closed or considered for further investigation/mediation.

The response shall be in writing, in language that is easily accessible to the complainant. The E&S focal person may also contact the complainant by telephone or set up a meeting to review and discuss the proposed response.

The proposed response shall include:

i. A clear restatement of the complainants' concerns;
ii. A detailed description of the proposed response, with an explanation of why it has been proposed so;
iii. A listing of the complainant's choices, given the proposed response. (Those choices may include, among others: agreement to proceed; a referral decision,

or a plan for compliance review; further dialogue on a proposed action; or participation in a proposed assessment and engagement process or any other);

iv. The expected timeframe for resolution aiming to resolve any grievances within 28 days.

The following template is populated by the E&S focal person and sent to the complainant to seek agreement and continue with resolution.

Table 6: Grievance Resolution Response Form

Grievance Resolution Response	
Grievance Number:	
Date of Communication:	
Name of Complainant:	
Restatement of Grievance/ Concern	
Proposed Solution/Response	Proposed Solution:

	Explanation:
List of choices for moving forward	1. Agreement to proceed with above solution. 2. Request for a review of a decision, 3. A referral decision, or 4. A plan for compliance review. 5. Further dialogue on a proposed action. 6. Request participation in a proposed assessment and engagement process 7. Other to be suggested by complainant
Target Date for Resolution	*(28 days from receipt of grievance)*
Grievance Received by:	

Name of Grievance Responsible Person	
Contact Details of Grievance Responsible	Telephone: Email: Address:

Step 5 – Implementing Response

The complainant may or may not agree with the proposed response. If there is agreement, then the E&S focal person will proceed with the proposed response. Actions agreed upon during mediation will be implemented in a timely manner.

The progress shall be logged in the Grievance Database ***Table 3***. E&S focal person is responsible for overseeing the implementation of agreed actions to resolve the complaint.

Step 6 – Reviewing Resolution

The E&S focal person and the stakeholders shall monitor implementation jointly. Where implementation of agreements reached is a multi-step process, and there is some implementation risk, the E&S focal person shall seek commitments from all stakeholders to "come back to the table" when needed to deal with challenges during implementation.

The E&S focal person shall populate the template below, in line with agreed response on a given grievance and monitor progress.

Table 7: Grievances Actions Form

Actions to Resolve Grievance (Official Use)			
Delegated to:			
Action	Who	When	Completed (Y/N)
Strategy to communicate response:			
Response/ Resolution:			
Sign-Off:			
Date:			

Step 7 – Closing Out or Referring Request

If the response is successfully implemented, the E&S focal person shall document the satisfactory resolution. In cases where there have been major risks, impacts and/or negative publicity, it may be appropriate to include written documentation from the complainant indicating satisfaction with the response. In others, the E&S focal person shall note the action taken and that the response was satisfactory to the complainant and the organization. Once sign-off has occurred, this shall be recorded in the Grievance database Log.

If the grievance has not been resolved, the E&S focal person shall document steps taken, communication with the complainant (and other stakeholders if there has been substantial effort to initiate or complete a multi-stakeholder process), and refer the grievance to the PCT. The E&S focal person shall document the outcome of the discussions with the complainant in a way that makes clear what options were offered through the GRM and why the complainant chose not to pursue them.

In cases where the complainant is not satisfied with the GRM resolution provided by the Project up to the PCT level, they are at liberty to proceed with a legal redress of the matter.

Table 8: Grievances Close-out Form *(To be completed by the E&S focal person once all actions agreed upon have been completed)*

Conclusion					
Is complainant Satisfied?	□ Yes	□ No	Comments from GRC Chairperson:		
Is Grievance Closed?	□ Yes	□ No	Grievance Resubmitted?	□ Yes	□ No

Time Taken	☐ Within 28 Days	☐ Beyond 28 Days	Comments	
Signature of GRC Chairperson			Date:	
New Grievance Number:			Date:	

The table and flowchart below provide a summary of the grievance redress process and applicable time limits.

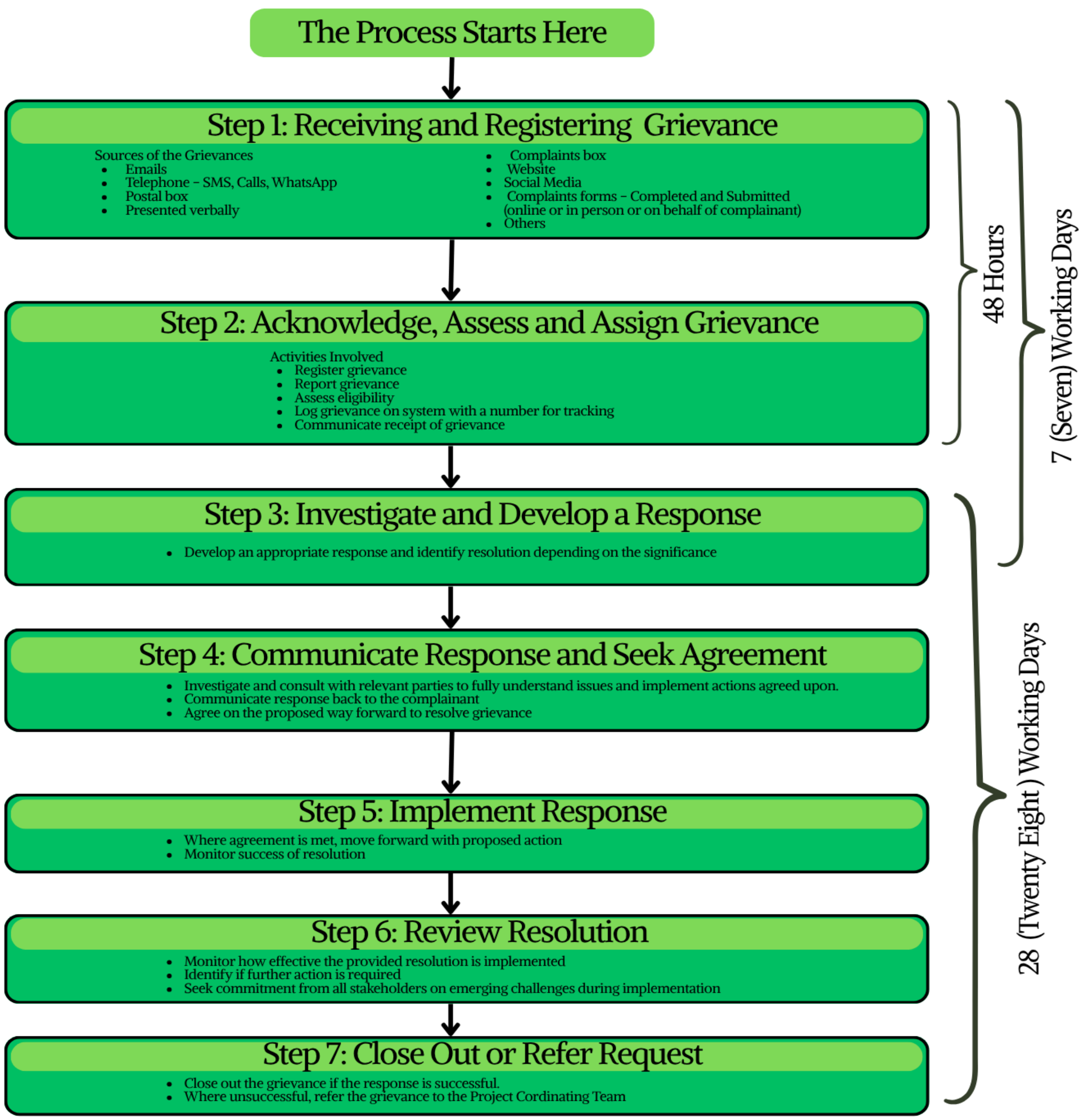
Table 9: Grievance Redress Process and Time Limits

Process	Description	Time Limit
Step 1: Receive grievance	i. Emails ii. Telephone- SMS, Calls, WhatsApp iii. Postal box iv. Presented verbally v. Complaints box vi. Website vii. Social Media	7 working days

Process	Description	Time Limit
	viii. Completed and Submitted Complaint Form (online or in person or on behalf of complainant) ix. Others	
Step 2: Acknowledge, Assess and Assign Grievance Significance	i. Register grievance ii. Report grievance iii. Assess eligibility iv. Log grievance on system with a number for tracking v. Communicate receipt of grievance	
Step 3: Develop a Response	i. Develop an appropriate response and identify resolution depending on the significance	
Step 4: Communicate Response and Seek Agreement	i. Investigate and consult with relevant parties to fully understand issues and implement actions agreed upon ii. Communicate response back to the complainant iii. Agree on the proposed way forward to resolve grievance	28 Days from acknowledgement of receipt

Process	Description	Time Limit
Step 5: Implement Response	i. Where agreement is met, move forward with proposed action ii. Monitor success of resolution	
Step 6: Review Resolution	i. Monitor how effectively the provided resolution is implemented ii. Identify if further action is required iii. Seek commitment from stakeholders on emerging challenges during implementation.	
Step 7: Close Out or Refer Request	i. Close out the grievance if the response is successful ii. Where unsuccessful, refer the grievance to the PCT, and close it out at the GRC level.	

Grievance Handling Process



5.3 Gender-Based Violence (GBV), Sexual Exploitation and Abuse/Sexual Harassment (SEA/SH), and Violence Against Children (VAC) Complaints Management Procedure

NQCL recognizes that Gender-Based Violence (GBV), including Sexual Exploitation and Abuse (SEA), Sexual Harassment (SH), and Violence Against Children (VAC), are serious violations of human rights that require a specialized, confidential, and survivor-centered response. In line with World Bank requirements, all GBV/SEA/SH and VAC-related complaints shall be handled through a dedicated and sensitive process that prioritizes the safety, dignity, confidentiality, and well-being of survivors.

NQCL shall provide information to employees, contracted workers, surrounding communities, and all relevant stakeholders on how to report cases of GBV, SEA/SH, and VAC through the established Grievance Mechanism (GM). This information shall be disseminated through appropriate communication channels during stakeholder engagement meetings, worker inductions, posters and other awareness activities. The communication materials shall clearly indicate the available reporting channels, designated focal persons, and referral pathways for survivors.

To ensure that survivors feel safe and comfortable reporting incidents, complaints may be submitted through confidential channels including: (i) Telephone calls or SMS, (ii) Face-to-face reporting to designated focal persons, and (iii) written communication such as letters or emails. Anonymous reporting shall also be permitted where necessary to protect the survivor.

Upon receipt of a complaint, the case shall be immediately recorded in a separate confidential register using minimal information necessary to protect the survivor and uphold the survivor-centered approach. Only essential information shall be recorded which includes; the nature of the complaint as reported, age and gender of the survivor where voluntarily disclosed, and whether the incident is linked to the project. An acknowledgment of receipt shall be provided to the complainant within 48 hours of filing the complaint, provided this does not compromise the survivor's safety.

All GBV/SEA/SH and VAC complaints shall be managed with the support of specialized service providers responsible for social protection, medical care, psychosocial support, legal assistance, and child protection services where applicable. Immediate referral of survivors to appropriate support services shall be prioritized, based on the survivor's informed consent.

The GRC Committee or a designated focal person shall serve as the primary focal point for receiving complaints, facilitating referrals, monitoring case handling, and ensuring that survivor support services are provided. All prevention and response actions shall follow a survivor-centered approach, ensuring that the survivor's safety, confidentiality, choices, dignity, and well-being remain the highest priority while also respecting due process.

The grievance mechanism shall also protect the rights of the alleged perpetrator, including confidentiality and fair treatment during any subsequent administrative or legal processes. Handling of sensitive complaints shall be undertaken in close collaboration with relevant specialized institutions, legal advisors, employers where applicable, and law enforcement agencies where required by law and with the survivor's consent.

The Project Grievance Mechanism shall not conduct investigations into GBV/SEA/SH or VAC cases directly. Its primary role shall be limited to safe receipt of complaints, confidential registration, referral to appropriate service providers, and follow-up to ensure the complaint has been properly handled and closed. Investigations and formal case management shall be undertaken only by authorized specialized institutions.

In accordance with World Bank requirements, the Project shall notify the World Bank through the PC within 48 hours of becoming aware of any GBV, SEA, SH, or VAC incident that is directly linked to project activities, while maintaining strict confidentiality and without disclosing personally identifiable information.

All stakeholders involved in the grievance process shall maintain strict confidentiality regarding both survivors and alleged perpetrators, except where disclosure is necessary to prevent serious harm or where disclosure is required by law. This confidentiality is critical to protecting the dignity, safety, and rights of all parties involved and to maintaining trust in the GM.

A verification process form shall be used by the verification committee to review available information about the GBV/SEA/SH claim in question, the nature of the claim, and whether there is a link with the project. The committee will also make its recommendations to the alleged perpetrator's employer or manager for appropriate disciplinary sanctions.

The objective of the verification process will be to examine only whether there is a link between the project and the reported GBV/SEA/SH incident and to assure accountability in recommending appropriate disciplinary measures. The verification process establishes neither the innocence nor the guilt of the alleged perpetrator as only the judicial system has that capacity and responsibility. In addition, all final decisions regarding disciplinary actions will rest solely with the employer of the alleged perpetrator; the verification committee will only make its recommendations.

SEA/SH complaint verification Form

Section A:

Has the survivor provided his/her informed consent to access the grievance mechanism?

Yes ☐ No ☐

IF YES, please complete the form in its entirety.

IF NO, please share

1) the type of incident reported

2) the date and area of the incident,

3) the alleged perpetrator's connection to the project (if known), and

4) the age and gender of the survivor.

(Explain that this information will only be used by the project for the purpose of gathering information on the risks created by the project to the safety and well-being of men, women and children in their communities and to take steps to mitigate these risks. No data specific to the incident in question, including the identity of the victim, specific location, etc., will be shared outside the provider)

Has the survivor provided his/her informed consent to share the above-mentioned information?

Yes ☐ No ☐

If YES, please fill out below only Section B.2; B.2; B.3

If NO, please do not fill out the rest of the form.

Section B:

1. INFORMATION RELATED TO THE COMPLAINANT/GBV SURVIVOR

Survivor Code:

Age and sex of the GBV survivor:

Girl (<18) ☐

Woman (>=18) ☐

Boy (<18) ☐

Man (>=18) ☐

2. INFORMATION RELATED TO THE SEA/SH ALLEGATION:

Time, area and date of incident reported by the survivor:

GBV Type (classification GBVIMS):

i. Rape ☐

ii. Sexual aggression ☐

Please specify:

i. Sexual exploitation and abuse ☐

ii. Sexual harassment ☐
iii. Physical aggression ☐
iv. Emotional and psychological violence ☐
v. Forced marriage ☐
vi. Denial of resources and opportunities ☐

Has the survivor received any services? Yes ☐ No☐

If yes, please specify:

i. Medical ☐
ii. Psychosocial ☐
iii. Legal ☐
iv. Security/protection: ☐
v. Other ☐ please specify:

3. INFORMATION REGARDING THE LINK TO THE PROJECT:

This section aims to determine whether the incident is linked to the project and if the alleged perpetrator is hired or is associated to the project

Is the alleged perpetrator linked to the project? Yes☐ No☐ Do not know ☐

Name of the alleged perpetrator (if known): Role of the alleged perpetrator (if known):

i. Public Officer ☐

ii. NGO staff ☐

iii. Parent/Guardian ☐

iv. Police ☐

v. Soldier ☐

vi. Security official ☐

vii. Religious/community leader ☐

viii. Any other individual associated with the project ☐

ix. Not known ☐

Has the incident been confirmed as credible after verification? Yes☐No ☐ Verification ongoing ☐

End date of the verification process: Decision taken:

i. No action/sanction ☐

ii. Informal warning ☐

iii. Formal warning ☐

iv. Additional training ☐

v. Loss of salary ☐

vi. Suspension of employment ☐

vii. Layoff with notice ☐

viii. Layoff without notice ☐

ix. Report to the police if warranted ☐

x. Fines ☐

xi. Other actions ☐ Please specify:

Date of notification to the perpetrator's employer/contractor:

Date of notification to the GBV survivor:

Notification of the implementation of the decisions/sanctions: yes □ No □

Notification to the PCT yes □ No □

Time reported to the PCT and Word Bank Within 48 hrs □ After 48hrs □

Notification to the World bank (*the verification structure needs only share the nature of the case, the age and sex of the complainant -if known-, whether there is a link with the project, and whether the survivor has been referred for services)* yes □ No

Note below any follow-up communication with the survivor:

For example: When/if a verification has begun, or the allegation has been determined to have an insufficient basis to continue. It may also include concerns raised by the victim through the verification process.

Name of the representative and signature

…………………………………………

…………………………………………

5.4 Appeal and Escalation Process

The (GRM) provides complainants with the right to appeal or escalate their grievance where they are not satisfied with the response provided at the Project Implementation level, or where they believe that the grievance has not been handled fairly, adequately, or within the established timelines. The appeal process ensures transparency, accountability, and fairness while providing complainants with additional avenues for redress.

Level 1 – Internal Appeal at Project Implementation Level

Where a complainant is dissatisfied with the initial response, proposed resolution, or outcome of the grievance, they may submit an appeal at the Project Implementation level for review. The appeal shall clearly state the reasons for dissatisfaction and may provide additional information or evidence to support reconsideration of the complaint.

Upon receipt of the appeal, the E&S focal person shall review the case together with the GRC and relevant departments to reassess the grievance and determine whether further action, investigation, or adjustment of the proposed resolution is necessary. The complainant shall be informed of the outcome of the appeal within a reasonable timeframe, not exceeding fourteen (14) working days.

Level 2 – Escalation to PCT

If the complainant remains dissatisfied after the internal appeal at the Project Implementation level, the grievance may be escalated to the PCT. The PCT shall serve as the second level of review and provide independent oversight of the grievance handling process.

The PCT shall review all documentation related to the grievance, assess whether due process was followed, and determine whether the response provided was fair, reasonable, and in compliance with project procedures and applicable safeguards requirements. The PCT may engage with the complainant, project management, contractors, and other relevant stakeholders to facilitate resolution. Where necessary, the PCT may recommend corrective actions, mediation, additional investigations, or referral to specialized bodies depending on the nature of the complaint.

Level 3 – Escalation to the World bank Group

Complainants who are not satisfied with the outcome of the Project Implementation GRM and the Project Coordination Team review, or who are concerned about an adverse response, may further escalate their complaint to the World Bank Group through the World Bank's corporate grievance mechanisms.

Complaints may be submitted to the World Bank Grievance Redress Service (GRS), which ensures that project-related complaints are promptly reviewed and addressed by the World Bank. The GRS provides an avenue for communities and individuals who believe they are adversely affected by a World Bank-supported project to raise their concerns directly with the Bank.

Complainants may also submit their concerns to the World Bank for people who believe they have been or are likely to be adversely affected by a World Bank-funded project due to non-compliance with the operational policies and procedures. Complaints submitted to the World Bank Group shall be handled in accordance with the Bank's established procedures, policies, and timelines. Submission of a complaint to the World Bank does not prevent the complainant from pursuing available national legal or administrative remedies.

Principles of the Appeal Process

The appeal and escalation process shall be guided by the principles of fairness, confidentiality, transparency, non-retaliation, and accessibility. All complainants shall be informed of their right to appeal and the available escalation channels at every stage of grievance handling. The process shall ensure that no complainant is disadvantaged or victimized for seeking further review of their grievance.

6.0 DATA PROTECTION AND CONFIDENTIALITY

NQCL recognizes the importance of protecting personal and sensitive information collected and processed through the GRM. All grievance-related information shall be handled with strict confidentiality and in accordance with applicable laws and regulatory requirements, including the Kenya Data Protection Act, 2019, as well as relevant NQCL policies and procedures.

Personal information collected during the grievance process, including names, contact details, and information relating to the complaint, shall be collected and used only for purposes related to receiving, assessing, investigating, resolving, monitoring, and reporting on grievances. Such information shall not be disclosed to unauthorized persons without the consent of the complainant, except where disclosure is required or permitted by law.

All grievance records shall be securely maintained in electronic and, where applicable, physical formats. Access to grievance information shall be restricted to authorized personnel with a legitimate role in the grievance process, including the designated Environmental and Social (E&S) Focal Person and relevant members of the GRC. Appropriate safeguards, including password protection, controlled access, secure storage, and other appropriate information security measures, shall be applied to prevent unauthorized access, loss, alteration, disclosure, or misuse of grievance information.

Additional confidentiality and protection measures shall apply to sensitive grievances, particularly complaints relating to GBV, SEA and SH. Information concerning such cases shall be handled strictly on a need-to-know basis and in a manner that protects the dignity, privacy, safety, and rights of the complainant or survivor.

For purposes of GRM monitoring, evaluation, and reporting, information shall be anonymized and presented in aggregated form wherever possible to ensure that individual complainants cannot be identified. Reports shall focus on grievance trends, categories, resolution status, and corrective actions without unnecessarily disclosing personal or identifying information.

7.0 MONITORING AND EVALUATION

NQCL will monitor grievances routinely as part of the broader management of the Project. The main objective of monitoring and evaluation will be to ensure the GRM process is effective, the grievances are resolved in time, the outcomes are effective, the actions taken prevent recurrence, and the complainants are satisfied.

Monitoring will involve discussions with the complainant to confirm that a relatively straightforward response has been fully implemented. This will be documented in the Grievance Close-Out Form (Table 8 afore) and logged in the Grievance Database (Table 3 afore).

Grievance records will be always made available to the PCT. Quarterly internal reports will be compiled by the E&S focal person and forwarded to the NQCL management team. These grievance reports will also be included in the quarterly progress reports and will include:

i. The number of grievances logged;
ii. The number of grievances of the same or similar issue;
iii. Number and percentage of complaints resolved within the stipulated time frame;
iv. Number and percentage of complainants satisfied with complaint handling process and the outcome.

These reports and other records will be made available for external review if and when required. Grievance reporting will be part of the annual Project reporting.

8.0 BUDGET

Planned GRM Activities	Quantity	Frequency	Unit Cost (Ksh)	Total Cost (Ksh)
Stakeholder engagement meetings	Three (UON/KNH Leadership/KNH Police Post); Contractors and Consultants	Once for each team	Assorted	200,000.00
GRM Internal Training	3	Once	Assorted	425,000.00
Multimedia engagement and awareness	20 large posters	Once	1000.00	20,000.00
Website publication	Assorted	Continuous updates	Non-monetary	Non-monetary
Social media publication	Assorted	Continuous updates	Non-monetary	Non-monetary
Meetings to review complaints	Continuous	At every complaint receipt; and quarterly for	Non-monetary	Non-monetary

		report preparation		