

Purpose

This policy ensures that Men's Health Trust NZ's complaints are handled promptly, fairly, and confidentially, providing clear processes for resolution and escalation. It demonstrates the organisation's commitment to continuous improvement and upholding the rights of all parties involved.

Scope

This policy applies to all clients, personnel, volunteers, contractors, service delivery partners and stakeholders who wish to raise a complaint regarding the organisation's services, personnel conduct, or operational practices.

1. Policy Statement**1.1 Commitment to Complaint Resolution**

- The organisation is committed to addressing complaints promptly and constructively.
- All complaints will be handled in accordance with legal, ethical, and professional standards.

1.2 Safeguards

- Confidentiality will be maintained for all parties involved.
- Complainants will be protected from retaliation or harm.
- Support will be provided to complainants and respondents throughout the process.

2. Complaint Handling Procedures**2.1 Receiving Complaints**

- Complaints can be submitted:
 - Verbally, in writing, or anonymously.
 - Via email, online forms, or in-person.
- Complaints should include:
 - The nature of the issue.
 - Relevant dates, locations, and individuals involved.

2.2 Acknowledging Complaints

- Acknowledge receipt of the complaint within 5 business days.
- Provide the complainant with:
 - A summary of their complaint.
 - An overview of the process and expected timeframes.

2.3 Investigating Complaints

- Investigate and respond to complaints within 20 business days.
- Steps include:
 - Reviewing the complaint and gathering relevant information.
 - Conducting interviews with involved parties (if required).
 - Documenting findings and conclusions.

2.4 Responding to Complaints

- Provide the complainant with a written response detailing:
 - Findings of the investigation.
 - Actions taken or proposed resolutions.
- If additional time is required, update the complainant with progress and revised timeframes.

3. Safeguards

3.1 Protecting Complainants

- Ensure no retaliation or discrimination occurs as a result of raising a complaint.
- Offer access to support services, such as counseling or advocacy.

3.2 Maintaining Confidentiality

- Limit access to complaint information to authorised personnel only.
- Store complaint records securely in compliance with privacy regulations.

3.3 Supporting Respondents

- Inform respondents of the complaint against them.
- Provide them with an opportunity to respond and access support if required.

4. Escalation Pathways

4.1 Internal Escalation

- If dissatisfied with the initial response, the complainant may:
 - Request a review by senior management.
 - Request mediation or facilitated resolution.

4.2 External Escalation

- If unresolved internally, the complainant may escalate to:
 - The Ombudsman.
 - Relevant regulatory authorities (e.g., Disputes Tribunal, Human Rights Commission).
- Provide contact details for external bodies in the final response.

5. Timeframes

Step	Timeframe
Acknowledge complaint	Within 1 business day
Investigate complaint	Within 5 business days
Provide final response	Within 10 business days (or updated timeframe)

6. Monitoring and Improvement

6.1 Record-Keeping

- Maintain detailed records of all complaints, including:
 - Complaint details.
 - Investigation findings.
 - Resolutions and actions taken.

6.2 Continuous Improvement

- Analyse complaint trends to identify systemic issues.
- Use findings to improve policies, services, and practices.

7. Training

- Provide personnel with training on:
 - Complaint handling procedures.
 - Safeguards and confidentiality requirements.
 - Communication skills for resolving complaints.

Policy Review Schedule

This policy will be reviewed annually, or more frequently if significant legislative or organisational changes occur, to ensure ongoing compliance and relevance. Below is the policy review schedule.

Version: 20-03-26 [The latest policy version is identified by the most recent review date]

Last Review Date: 20 March 2026. Reviewed by CEO

Board Approved Date: 23 March 2026

Next review date: By 31 March 2027, aligned with the Annual Plan cycle.

Any enquiries can be directed to:

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