

COMPLAINT MANAGEMENT INVESTIGATION REPORT FORM

Person completing this form:

Name:

Position:

1. DETAILS OF COMPLAINT

Date of complaint:

Time:

How complaint was reported e.g. letter:

Name of person:

Contact details:

Status:

Name of parent/carer (if under 18):

Others involved:

In the space below, please give a brief account of the nature of the complaint:

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2. RELEVANT BACKGROUND INFORMATION (if any).

3. DETAILS OF CAUSE

4. DETAILS OF RESPONSE

Person responding:

Date of response:

Method of response:

Response:

5. DETAILS OF ACTION PLAN

Please describe what additional action has been introduced following the complaint to prevent any further occurrence and any follow-up action, by whom and when:

Name:

Signature:

Date: