

# Feedback and Compliant (Standard)

CI 02

(Continuous Improvement)

Date of Complaint: \_\_\_\_\_

Complaint Received By: \_\_\_\_\_

Complaint Made Via:  Telephone  Letter (Attached)  In person  
 Other \_\_\_\_\_

Subject of Complaint \_\_\_\_\_

Details of the complaint should be written on the next page. If there is insufficient space, attached extra sheets.

Name of Complainant: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

## Detail of Complaint

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## Comments

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# Complaints Record

(Manager / CEO to Complete)

## Action to be Taken

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## Outcome

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## Follow-Up

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Signed (Manager / CEO) \_\_\_\_\_ Date: \_\_\_\_\_

## Service User's Details *(If Different from the Complainant)*

Name of Complainant: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

## Carer/Representative's Details

Name of Complainant: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Relationship to Complaint: \_\_\_\_\_

## Advocate's Details

Name of Complainant: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Relationship to Complaint: \_\_\_\_\_