

PART 1 – STAGE 1: LOCAL RESOLUTION

Complainant's Details:			
Name:		Connection to SCA:	
Date Received:		Time Received:	

Nature of Complaint:					
Complaint by Type:		Written (Y/N):		Verbal (Y/N):	
<i>Mark with an "x" as appropriate</i>					
1. Access		8. Accountability			
2. Dignity & Respect		9. Other			
3. Safe & Effective Care		10. Clinical Judgement			
4. Communication & Information		11. Vexatious Complaint			
5. Participation		12. Residential / Short Break Care			
6. Privacy		13. Trust in Care			
7. Improving Health		14. Children's First			

Detail of Complaint Being Made: <i>(Brief note)</i>

Response to Complaint:			
Who Received the Complaint:			
Resolved at Point of Contact (Y/N):		Outcome:	
Referred to Line Manager (Y/N):		Outcome:	
Date of Response:		Complainant Satisfied (Y/N):	

PART 2 – STAGE 2: INFORMAL RESOLUTION / LOCAL INVESTIGATION

**To Be Completed By Line Manager (if referred on)**

**Details of Further Interactions; (Meetings, Written, Verbal, etc.)**

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Was the Complaint Resolved (Y/N):		Date of Resolution:	
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Outcome of Resolution:
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Complainant Satisfied (Y/N):	
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**To Be Completed By Complaints Officer (if referred on)**

**Details of Further Interactions; (Meetings, Written, Verbal, etc.)**

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Was the Complaint Resolved (Y/N):		Date of Resolution:	
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Outcome of Resolution:
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Complainant Satisfied (Y/N):	
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