



Office Use Only:

Date received:

By

Comment/Complaint lodged  In person  Telephone  Post  Email

Complaint Resolution (describe agreed outcome):

---

---

---

---

---

---

---

---

---

---

Action to be taken:

---

---

---

---

---

Complainant Informed  In person  Telephone  Post  Email

Describe corrective action:

---

---

---

---

Quality Improvement document updated

Procedure updated

Signed:

Date Closed: