

## INITIAL CONTACT PROFORMA

The following proforma should be completed during the initial contact with the complainant. Once the issues have been discussed and the plan for addressing those issues agreed an action plan should be completed. This form can be completed electronically and added to throughout the complaints process to provide a clear audit trail. Essentially, this sheet includes the principles of the legislation.

Maintain good communication with the complainant throughout the investigation process. If a complainant is requesting an update or there is going to be a delay it is essential to keep them informed. Following experience, we have found that if this is not done it can often inflame the situation and causes a breakdown in relationship between the complainant and the Trust.

Reference number:
Complainant's name (include title): On behalf of (where appropriate):
Hospital number: Date of birth:
Details of any additional needs relative to equality and diversity (E.g. Disabilities, special needs, Interpreter, large print, Braille, etc) (The Disability Discrimination Act (DDA) defines a disabled person as someone who has a physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day to day activities.)
Contact details: Telephone: Mobile: Email: Preferred method and time of contact:
Name of staff member who made contact.
Date of contact:
Summary of discussion:

It was agreed that the following issues would be investigated:

1.

2.

3.

4.

Outcome the client is seeking (i.e. apology, explanation, acknowledgement of responsibility, new appointment, remedial action, reimbursement):

Agreed timescale for response:

Agreed feedback following investigation:

Please tick

Meeting

Phone call

Letter (please state who the letter will be sent by)

Client informed about seAp?

Client informed about any other support agencies? If yes please state which: