## **Official Complaints Procedure**

## **Complaint Monitoring Form**

Please provide this information for monitoring purposes and return this form to Secretarial Support.

Complaint No.		
Details of Complaint:		
Service Area/ Head of Service:		
Upheld/partially/not uph	held – please highlight	
Remedy or compensati	ion offered (if any)	
Has the situation compl	plained about now been resolved? Yes No	
If 'no', what is the times	scale for resolution, if this can be assessed?	
Approximate time spent	nt investigating and responding to this complaint	

Resultant action taken and any improvements made to the service as a result of this complaint

Was the complaint as a result of inequality of service? (please  $\sqrt{}$ )

Age	Disability	Gender	Race	Sexuality	Other – please specify
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Any recommendations for the Council as a result of the complaint?