

Incidents, Complaints and Compliments Reporting Form (ICCF)

This form is to be used for formally reporting all incidents, complaints or compliments relating to any staff or representatives of EFRA and/or any adults and children associated with ERFA projects. Please forward completed form via email to awryan@edmundrice.org or via post: Attention: Chief Executive Office, PO Box 596, Virginia BC QLD, 4014

Incident	Complaint	Compliment
Report Date:	Date incident occurred:	Time incident occurred:
Location where incident occurred:		
Does this relate to child welfare:	Yes / No	
Name and/or description of Person affected by incident:		D.O.B. or estimated age of person affected:
Other persons involved and their involvement, include any witnesses and phone number if possible (attach separate pages if more space required):	Name and/or description: Phone:	Involvement:
	Name and/or description:	Involvement:
	Phone:	
Description of incident:	Provide as much specific detail as possible of what has occurred and how it has been dealt with to date. If you require more space please use and attach additional pages.	
Has this incident been reported or anyone else notified of the occurrence? Yes / No		
If yes, who?		
Name: Phor	ne: Position/Relation	onship:
Name of person lodging report:		Signature:
Phone:		
Email:		_
For Office Use: Ensure this is logged in El	RFA ICC Register	
Date received:	ICC Reference numbe	r:
Description of actions taken:		
Details of outcome:		
Report deemed closed when signed. Name of authorised ERFA person:		
Signature:	Position:	Date: