# HCSS Complaints Reporting Template

|  |  |
| --- | --- |
| **Organisation Name** |  |
| **DHB Region** |  |
| **Reporting Period** |
| □ **Quarter 1 (July-Sept)**  | □ **Quarter 2 (Oct – Dec)** | □ **Quarter 3 (Jan –Mar)** | □ **Quarter 4 (April – June)** |

|  |  |
| --- | --- |
| **Complaint Categorisation** | **Number of complaints received & closed** |
| **SAC4** | **SAC3** | **SAC2** | **SAC1** |
| ***Attitude*** |  |  |  |  |
| ***Discrimination & Harm*** |  |  |  |  |
| ***Service Delivery*** |  |  |  |  |
| ***Communication*** |  |  |  |  |
| ***Advocacy*** |  |  |  |  |
| ***TOTAL*** |  |  |  |  |
| **SAC1 & SAC2 Reporting Summary***If you have recorded SAC1 & SAC2 events in the reporting period, please provide details so the DHB funder can cross reference this. If you have received more than one SAC1 or SAC2 complaint,* ***please copy and add rows as required.*** |
| **Date reported to funder** |  |
| **Reported by** |  |
| **Person reported to at DHB** |  |
| **Narrative report for any complaint open for longer than 6 months** |  |



**TeWhatuOra.govt.nz**

PO Box 2307

Wellington 6140

Waea pūkoro: +64 4 801 2430