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| --- | --- |
|  | Action/Date |
| Title/Status- | Issues and Concerns Reporting Form |
| New document or revised | Revised |
| Responsible Head of Service | Liz Perfect |
| Date review | July 2020 |
| Date SMT approved. |  |

# Issues and Concerns Reporting Form

**Issues and Concerns Reporting Form**

**This is a standardised form that is to be used with all placements and will be completed by CSW, IRO, Case Worker, Professional, YP’s, Provider or Parent (as appropriate).**

**Any concerns raised should be responded to within 10 working days unless an earlier response is required.**

**Once completed please send to the LCC Commissioning Placements Team:** [**FamilyPlacementTeam@leics.gov.uk**](mailto:FamilyPlacementTeam@leics.gov.uk)

|  |  |
| --- | --- |
| **Pre-Report Information** | |
| **Name of Provider(s):** |  |
| **Name of Carer(s):** |  |
| **Name of Young Person(s) in Placement:** |  |
| **Date** | Click to enter a date. |
| **Date form completed:** | Click to enter a date. |
| **Form completed by:** |  |
| **Summary of Issues** | |
| Please detail your concerns and any actions you require. | |
| **Any further issues/concerns raised by others:** | |
|  | |
| **Date sent to Provider:** | Click to enter a date. |
| **Provider Response** | |
| Please detail your response addressing issues/concerns raised. | |
| **Date response received and sent to SW:** | Click to enter a date. |
| **Outcome of Complaint** | |
|  | |
| **Actions/By Whom:** | |
|  | |
| **Review of any actions:** | |
|  | |