

Complaints Record

Name of Setting:

Start date of record:.....

End date of record:.....

Complaints Record

| | | | |
|---|--|--|--|
| Date of complaint | Name of Setting: | | |
| A: Source of complaint | | | |
| Parent Anonymous Ofsted Childminder Agency Other (Please State) | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Written (Including email) In Person Phone call | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| B: Nature of complaint (please tick all that apply) | | | |
| Safeguarding and Welfare requirements <ul style="list-style-type: none"> ▪ Child Protection ▪ Suitable People ▪ Staff qualifications, training, support and skills ▪ Health ▪ Managing behaviour ▪ Safety and suitability of premises, environment and equipment ▪ Special educational needs ▪ Information and records Assessment requirements | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Learning and development requirements <p>Areas of learning and development:</p> Prime Areas <ul style="list-style-type: none"> ▪ Communication and language ▪ Physical development ▪ Personal social and emotional development Specific Areas <ul style="list-style-type: none"> ▪ Literacy ▪ Mathematics ▪ Understanding the world ▪ Expressive arts and design | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| Details of the complaint | | | |

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|---|--|
| | |
| C: Who investigated the complaint | |
| Childminder <input type="checkbox"/> Ofsted <input type="checkbox"/> Childminder agency (please state) <input type="checkbox"/> Other (please state) <input type="checkbox"/> | |
| Give details of the investigation. (Attach any outcomes letter from Ofsted/Childminding agency or documents from other agencies) | |
| D: Actions and outcomes of the investigation | |
| Internal actions Actions agreed with Ofsted/Childminding agency Changes to conditions of registration Other action taken by Ofsted/Childminding agency No Action Actions imposed or agreed with other agencies | |
| Please give details of any changes you have made as a result of the complaint | |
| As a copy been shared with parents? Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Signature of childminder | Outcome notified to Parent (within 28 days) Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Date form completed | |