

Attachment 1

NORTH CAROLINA LOCAL HEALTH DEPARTMENT ACCREDITATION BOARD
Program Policy and Procedures

Comments, Complaints & Resolution Form

Timely response and resolution to complaints regarding the NCLHDA program and processes is a top priority for the NCLHDA Board and staff. All complaints will be reviewed by the Accreditation Administrator, and where indicated, action will be taken to resolve the issue. All complaints are private and will only be shared with staff and the NCLHDA Board.

Date of complaint _____

Name of complainant _____

Contact Info/Telephone Number _____

Complaint Received and Documented By _____

Action Taken _____

Resolved? _____ Further Action _____

Signature of AA _____ Date _____