

# DECISION AND OUTCOME RELATING TO A BREACH OF POLICY OR RULE FORM

ORIGINAL COMPLAINT REFERENCE NO.:

NAME OF POLICY OR RULE BREACHED:

DATE OF ALLEGED BREACH:

## PANEL COMPLETE:

PANEL RECEIVED FORM DATE:

PANEL MEMBER NAMES:

*(Please list)*

PANEL INVESTIGATION DATES:

*(within the timescales as per Section 4B of  
RESPECT: A Process for Managing a Complaint  
Relating to a Breach of Policy or Rule)*

COMPLAINT DECISION:

*(as per Section 5A of RESPECT: A Process for  
Managing a Complaint Relating to a Breach of  
Policy or Rule)*

**COMPLAINT OUTCOME**

Please select from:

Operational change

Mediation

Education

Disciplinary Action

Sanctions

**DECISION RETURNED TO COMPLAINTS  
OFFICER:**