Complaints and Incidents Overview

Please use this form to outline any complaints or incidents you have experienced whilst working for Thornbury Nursing/The Guild. This can be used as part of the Revalidation Process which requires you to collect five pieces of practice related feedback. Please ensure that the record refers to a complaint or incident which occurred during your current revalidation period.

Please complete all fields below to ensure you have a sufficient record:

1. Your name: __________________________________________________________

2. Incident/feedback: __________________________________________________

3. Outcome: __________________________________________________________

4. Reflection: _________________________________________________________

5. Learning/how this will change my future practice: ______________________
