

PRIVACY COMPLAINT INTAKE FORM

The following form can be used to document a report of an alleged privacy or security violation of practice policies.

1. Date, Name, job title, and phone number of individual reporting the Violation.
2. Name and department of staff alleged to have committed a privacy breach.
3. Who reported the incident? What did the individual reporting the violation say? What happened and why do they think staff committed a violation.
4. Describe the health information disclosed/involved in the violation:
5. Provide any other relevant details of the issue; attach any relevant documents.
6. Date manager interviewed employee interviewed and their input. Has HR been notified? What is the appropriate disciplinary action taken?
7. Plans to prevent reoccurrence. (Re-education, staff memo, change in procedure, etc.)
8. Any further follow up needed?

Your signature and date _____