

Privacy Inquiries and Complaints Notification

This form should be used by OCINet Participants to notify other participants of an inquiry or complaint involving OCINet systems that requires their awareness and participation to investigate and address. OCINet anticipates that the participant who receives the inquiry or complaint from the individual will lead the investigation and response including coordination and communication with other participants.

PLEASE DO NOT INCLUDE PHI IN THE FORM BELOW

Section A: Contact Information for the Reporting Participant (Privacy Contact)	
Name:	Title:
Phone:	Email:
Organization Name:	
Section B: Inquiry/Complaint Details	
Date/Time Inquiry/Complaint was Received:	
Type of Complaint:	
<input type="checkbox"/> Inquiry <input type="checkbox"/> Complaint	
Description of the Inquiry/Complaint:	
Section C: Inquiry/Complaint Response	
Has the receipt of the Inquiry/Complaint been acknowledged?:	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
What, if any, steps have been taken to investigate the Inquiry/Complaint and formulate a response?:	
Section D: Requested Support	
What support is required from impacted Participants?:	

Section E: Next Steps

What are anticipated next steps for investigation and response?