

# Community Comment Tracking Form

Each step must be taken in the correct order to ensure a timely and effective response to your concerns. Advancing to an inappropriate step or person in charge will only slow the process as it must be documented that each step was appropriately followed. This form will help you to complete the process and insure that you have a record of who has been spoken to and what has been accomplished. Please feel free to attach additional appropriate documents that help to explain what has been accomplished.

*Staff persons receiving a complaint should sign all complaints as having been made aware of the problem. A signature does not mean that you agree or disagree with the complaint. After recording the suggested solution, action or recommendation given, make a copy and place it in the family file.*

## Step 1

Date incident or problem occurred: \_\_\_\_\_

Describe the nature of your comment, concern or complaint: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Suggested solution, action, or recommendation given: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Person submitting comment or complaint: \_\_\_\_\_  
(Signature                      Relationship to child                      Today's Date)

Staff Person receiving the comment or complaint. \_\_\_\_\_  
(Signature                      Position      Date action taken)

Attach a written explanation of action taken. \_\_\_\_\_  
(number of pages attached)

## Step 2 (If Necessary)

If resolution is not achieved at Step 1, the individual may submit a written description of the concern to the appropriate management staff person

Describe additional concern or failure to resolve the issue. (Written by family member) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Management Staff receiving the comment or complaint: \_\_\_\_\_  
(Signature                      Position                      Date action taken)

Attach a copy of written response and explanation of action taken. \_\_\_\_\_  
(number of pages attached)

**The management staff person receiving this comment or complaint will mail a written response within 24 hours acknowledging the receipt of the concern. The management staff person will meet with all parties involved within 3 working days of receiving the individual's written concern. If the concern is resolved, no further action is necessary.**

**Step 3 – Take the concern to the Site Committee**

Location or name of Site: \_\_\_\_\_

Describe any additional information about your concern, so that it can be placed on the meeting agenda. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Name of Site Chairperson: \_\_\_\_\_  
Signature Date received Date of meeting

Attach notes about the discussion at the meeting/minutes of the meeting when they become available \_\_\_\_\_  
(number of pages attached)

**Step 4 – Take the concern to the Head Start Executive Director**

Individual Parent Concern - If the concern remains unresolved following the meeting outlined in Step 3, the individual may within 3 working days make a written request to meet with the Head Start Executive Director.

The Head Start Executive Director will meet with all parties involved within 3 working days of the written request. If a resolution to the concern is agreed upon, no further action is necessary. Within 5 working days following the meeting, the Head Start Executive Director or will provide the individual with a written summary of the action proposed to resolve the concern.

Today's Date: \_\_\_\_\_

Describe any change or unresolved portion of the problem. \_\_\_\_\_

\_\_\_\_\_  
Date Head Start Director received complaint: \_\_\_\_\_

Attach response: \_\_\_\_\_  
(number of pages)

**Step 5 – Take the concern to the Policy Council**

If the concern remains unresolved following the meeting outlined in Step 4, the concern should be taken to the Policy Council. The concern should be presented in writing to the Policy Council Chairperson with a request to have the concern placed on the agenda of the next regularly scheduled Policy Council meeting.

Describe any change or unresolved portion of the problem. \_\_\_\_\_

\_\_\_\_\_

Chairperson receiving documentation from parent and/or Head Start Director: \_\_\_\_\_  
(Signature Date)

Attach description of action or resolution passed to correct the problem or submit to the Governing Board \_\_\_\_\_  
(number of pages)

**Step 6 – Take the concern to the Executive Officers of Head Start Consortium Board**