



جامعة الإمارات العربية المتحدة United Arab Emirates University

# NATIONAL INSTITUTE FOR HEALTH SPECIALITIES

# **NIHS Accreditation Procedures Manual**

**Draft Version 1** 

12/11/2024

# Table of Contents

1.	INTRODUCTION TO NIHS ACCREDITATION SYSTEM:	4
1.1	ABOUT NIHS	4
1.	.2 GENERAL REQUIREMENTS FOR INSTITUTIONAL AND PROGRAM ACCREDITATION	4
1.	.3 THE ACCREDITATION CYCLE	
2. N	IIHS ACCREDITATION PROCESS:	5
	PPLICATION	
-		-
	.1 How to Apply for Institutional and Program Accreditation	
-	.2 REVIEW OF ACCREDITATION APPLICATION	
	.4 SELF-EVALUATION REPORT	
1 0	ONDUCTING SITE VISIT	
	.1 Site Visit Process:	
4.	4.2.1 NIHS Selection Criteria for Accreditation Surveyors Team:	
	4.2.2 Procedures for Registering Accreditation Surveyors Team:	
4	.3 SITE VISIT PREPARATION:	
5. SI	TE VISIT REPORTING	9
5.	.1 THE REPORT FORMAT:	9
	.2 Action Points	
5.	.3 REVIEWING THE REPORTS	10
6. A	CCREDITATION DECISIONS:	10
6	.1 Accreditation Decisions:	10
6	.2 REFUSAL, SUSPENSION OR WITHDRAWAL OF ACCREDITATION	10
6	.3 FREEZING ACCREDITATION	11
7	AFTER OBTAINING ACCREDITATION	11
7	1 MAINTAINING ACCREDITATION	11
	.2 CONTINUING ACCREDITATION PROCESS	
		11
8		
9		11
10	APPEALS	12
11	COMPLAINTS	12
APP	ENDIX 1: PROCEDURES	13
In	INSTITUTIONAL AND PROGRAM ACCREDITATION PROCEDURE	14
	EGISTRATION OF ACCREDITATION SURVEYORS PROCEDURE	
	IIHS Accreditation Site Visit Procedure	-
Ν	IIHS INSTITUTIONAL AND PROGRAM ACCREDITATION DECISION	16
	IIHS TRAINING CAPACITY MODIFICATION PROCEDURE	-
	IIHS Appeal Procedure	
Ν	IIHS COMPLAINTS PROCEDURE	21
APP	ENDIX 2: FORMS	22
А	ccreditation Surveyors Registration form	23
	urveyor's Assessment Form	

CONFLICT OF INTEREST DISCLOSURE FORM	27
TRAINING CAPACITY MODIFICATION FORM	28
APPEAL FORM	30
COMPLAINTS FORM	31

# **1.** Introduction to NIHS Accreditation System:

# 1.1 About NIHS

On July 17, 2014, the Cabinet issued Ministerial Decree No. (28) to establish the National Institute for Health Specialties (NIHS). According to Article (5), NIHS is entrusted with several key responsibilities:

- Developing standards for specialized health programs and accreditation criteria for health institutions dedicated to specialized training.
- Evaluating and approving healthcare institutions across the country to ensure they meet the standards for specialized training and advanced medical education.
- Promoting the quality of specialized medical education, training, and postgraduate studies by accrediting hospitals, medical centers, and specialized programs.
- Recognizing hospitals and medical centers that meet approved standards, allowing them to participate in specialized training programs.
- Approving the curriculum designed for specialized training in the country.

To fulfill its mission, NIHS has implemented a comprehensive accreditation system, establishing National Accreditation Standards to guide hospitals and health institutions in offering specialty programs that lead to postgraduate qualifications.

# 1.2 General Requirements for Institutional and Program Accreditation

NIHS sets standards for accrediting hospitals and health sponsoring institutions to ensure quality residency and fellowship programs. Accreditation is based on five key areas:

- Governance
- Training Environment
- Residents/Fellows
- Faculty
- Continuous Improvement and Innovation

The process includes an on-site evaluation of these areas to verify compliance. Accredited institutions must report regularly on program details, faculty, and trainee performance and register trainees on the NIHS website. They must also pay applicable fees, maintain communication with NIHS, and adhere to all accreditation requirements to retain their status.

# **1.3 The Accreditation Cycle**

NIHS awards a five-year accreditation to institutions that meet all established standards for residency and fellowship training. As the end of the accreditation period approaches, accredited institutions must apply for re-accreditation and undergo a full survey and assessment process to ensure they continue to meet NIHS standards. The re-accreditation process involves a comprehensive review by NIHS surveyors, who provide a technical report to the central accreditation committee. Based on this report, NIHS may:

**Renew Accreditation for Five Years**: If the institution continues to meet all standards, a full five-year re-accreditation is granted.

**Grant Conditional Accreditation**: If some standards need improvement, NIHS may award conditional accreditation for a shorter period, requiring the institution to fulfill an action plan within a specified timeframe to maintain accreditation.

**Freeze Accreditation**: If an institution fails to meet the standards, NIHS may freeze accreditation, suspending its ability to host residency and fellowship programs.

Institutions that are unsuccessful in gaining or maintaining accreditation have the right to appeal the decision through the NIHS appeals process, where they can present their case for reconsideration.

# 2. NIHS Accreditation Process:

The NIHS Central Accreditation Committee (CAC) has outlined a structured accreditation process, defining the roles and responsibilities of each party involved:

### **Central Accreditation Committee (CAC):**

Formed by the NIHS Secretary General, including members from Specialized Scientific Committees: Responsibilities:

- Establish and periodically review accreditation procedures.
- Review and evaluate accreditation applications and relevant documents.
- Recommend institutional site visits and select appropriate surveyors.
- Ensure sponsoring institutions meet NIHS standards.
- Provide accreditation status recommendations to the NIHS Secretary-General.

#### Accreditation Surveyors Team:

Conducts on-site visits to sponsoring institution and programs:

#### **Responsibilities:**

- Interview relevant staff, audit submitted documents and verify compliance with NIHS standards.
- Inspect facilities and verify the presence of necessary equipment, systems, and staff.
- Request additional information if needed and produce a detailed site visit report.
- Remain available for re-evaluation if necessary.

#### **NIHS Accreditation Unit**

Manages and coordinates the accreditation process.

#### **Responsibilities:**

- Counsel the sponsoring institutions on accreditation process.
- Review applications, coordinate site visits, and ensure all required data is collected.
- Present site visit findings to the CAC for final recommendations.
- Communicate accreditation decisions to the sponsoring institution.
- Follow up on semi-annual reporting and conduct auditing process.

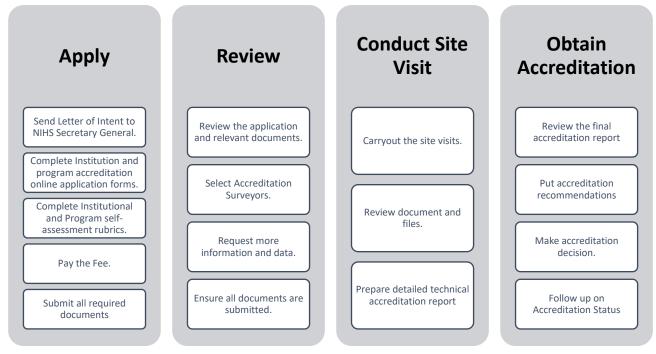
### Institution (Applicant)

• Complete the online application form with the required documents.

- Conduct a self-assessment and pay the necessary fees.
- Organize the site visit and ensure timely submission of data.
- Adhere to NIHS accreditation policies and procedures.
- Maintain the documentations and accreditation requirements

This collaborative approach ensures that all parties contribute to maintaining high standards in medical training and residency programs.

# NIHS Institutional and Program Accreditation Four Steps:



# **Accreditation Fees**

Institution must pay NIHS institution and Program accreditation fees prior obtaining the accreditation. All the information related to the fees will be provided by NIHS.

# 3. Application

# 3.1 How to apply for Institutional and Program Accreditation

Institutions seeking NIHS accreditation must complete and submit an online application through NIHS E-services. Along with the application, institutions need to provide supporting documents that demonstrate compliance with NIHS accreditation standards, such as policies, procedures, and systems in place.

Applicants must also complete a self-assessment rubric to evaluate their readiness, identify any gaps, and work on addressing them. The NIHS accreditation team will review only complete applications and may request additional information if anything is missing or unclear.

Institutions should carefully fill out each section of the application form. For any questions, they can reach out to the NIHS accreditation team. Supporting documents must be submitted in English, except official documents written in Arabic, which are acceptable in Arabic only. All pages of the application and supporting documents should be stamped and signed by an authorized person at the institution.

## 3.2 Review of Accreditation Application

Once an institution submits its application, the NIHS Accreditation Unit forwards it to the Central Accreditation Committee for technical review. The committee examines the application and supporting documents to decide whether it meets NIHS accreditation standards.

If additional information is needed, the committee may request it from the institution. If the application does not meet NIHS requirements, the Accreditation Unit will notify the institution of the rejection, and the application will be closed.

If the application meets the standards, the committee will appoint a team of accreditation surveyors to conduct a site visit. At this stage, the institution must pay the NIHS accreditation fee as per the regulations.

If an institution withdraws its application, it must wait one year before reapplying for accreditation.

## **3.3 Renewal of Accreditation Applications**

Accredited institutions must apply for re-accreditation every five years by completing the same application form, selecting the "renewal" option, and undergoing a full re-accreditation review. Six months before accreditation expires, the NIHS Accreditation Unit will contact the institution, providing instructions, a list of required documents, and details on fees.

Institutions should carefully complete all parts of the application form. Supporting documents must be in English, except official documents in Arabic, which may be submitted as-is. All pages should be stamped and signed by an authorized representative.

A re-accreditation review will only proceed if NIHS receives the complete application and payment by the specified deadline. If the institution does not complete the re-accreditation process before the current accreditation expires—and has not received an extension from NIHS—the accreditation will be withdrawn.

### 3.4 Self-Evaluation Report

Before the site visit, institutions must complete and submit a self-assessment rubric that evaluates their quality assurance practices against NIHS standards. This report, included with the accreditation application, should be completed in English and provide detailed responses with supporting evidence.

Accreditation surveyors will use the same rubric during their assessment, so it's essential for institutions to ensure they meet all the standards outlined in it.

# 4. Conducting Site Visit

### 4.1 Site Visit Process:

To gain new or renewed accreditation, institutions must complete a site visit assessment, conducted by independent, NIHS-approved surveyors chosen by the Central Accreditation Committee. The site visit ensures the institution meets NIHS standards and also allows surveyors to offer guidance for quality improvement.

Once the Central Accreditation Committee authorizes the site visit, the NIHS team will confirm the date with the institution and surveyors within three months. Virtual assessments may also be used if the institution is prepared for this format.

### 4.2 Selection of Accreditation Surveyors Team:

The accreditation surveyor's team are specialists formed by the NIHS for accrediting sponsoring institutions and programs.

## **4.2.1 NIHS Selection Criteria for Accreditation Surveyors Team:**

The following conditions must be met in any of the accreditation surveyors' team members:

# Conditions

- Complete NIHS introductory assessment and evaluation courses.
- Obtain consultant status in one of the health specialties or equivalent qualifications as relevant
- Obtain specialized training with at least 3 years of experience.
- Carry professional experience in medical education (medical and/or surgical specialties).
- Provide reference /recommendation letters from DIOs or Training Manager.
- Grant not less than 5 days yearly to conduct site visits.
- Provide evidence for prior professional development or training workshops on assessment.
- Continue developing their skills and take refreshment assessment and accreditation courses to maintain their membership with NIHS.
- Implement NIHS Accreditation Policies, Systems and Procedures.
- Sign Conflict of Interest Declaration form and protect confidentiality of data and documents.

### 4.2.2 Procedures for Registering Accreditation Surveyors Team:

Health professionals and consultants can apply to join the NIHS accreditation surveyors' community. Approved surveyors receive a membership certificate valid for two years. To apply, visit NIHS E-services on the NIHS website. For detailed steps, see *Page 23*.

### 4.3 Site Visit Preparation:

The NIHS Accreditation team will coordinate the site visit and send the institution written confirmation with the visit dates, names of the surveyors, and a list of documents to prepare. The institution should inform its staff about the visit, be ready for interviews, and respond to any questions from the surveyors. NIHS will provide the site visit schedule in advance.

At the end of the visit, the surveyors will create a detailed report with their findings and recommendations. Additional evidence may be requested during the visit to support the accreditation process. The institution is expected to be fully prepared with all required information and documentation.

It is expected from the institution to provide the following:



During the visit, the accreditation surveyors are authorized to inspect all relevant sites and buildings and to speak with administration, trainers, trainees, employees, and other related personnel. The institution is expected to fully cooperate in this process.

#### 5. Site Visit Reporting

At the end of the site visit, the surveyors will each prepare their reports, then meet to discuss findings and agree on judgments and action points. The team leader will compile these into a final accreditation report, signed by all surveyors involved, and submit it to the Central Accreditation Committee through the accreditation unit team for review.

#### 5.1 The Report Format:

The accreditation surveyors will submit their report using the institutional and program accreditation rubrics, which include:

- General Information: Basic details about the institution or program.
- Standards Compliance: An assessment of how well the institution meets each standard, rated as "Met," "Partially Met," or "Not Met."
- **Overall Assessment with Action Points**: A summary of findings with recommended actions.

### **5.2 Action Points**

The accreditation surveyors will include feedback and action points in the site visit report, which the Central Accreditation Committee will consider when reviewing the application. The institution will be given a set period to review, respond, and address these action points to secure or maintain accreditation.

### **5.3 Reviewing the Reports**

The Central Accreditation Committee will review the site visit report during a meeting and may contact the surveyors for additional information or clarification. Once the review is complete, the committee will submit their recommendations to the NIHS Secretary General.

# 6. Accreditation Decisions:

### **6.1 Accreditation Decisions:**

The Central Accreditation Committee reviews the report from the accreditation surveyors and may meet with them for further clarification. If needed, the committee can arrange for a second site visit by a reconstituted surveyor team to address any remaining issues. The committee will submit its recommendations within two months of receiving the completed report.

Based on these recommendations, the NIHS Secretary-General will make the final decision, with the option to request further review by the committee if necessary. The Secretary-General may choose one of the following actions:



# 6.2 Refusal, Suspension or Withdrawal of Accreditation

The Central Accreditation Committee may recommend refusing, suspending, or withdrawing accreditation if the site visit report shows that the institution does not meet or maintain required

standards. The NIHS accreditation team will inform the institution of the committee's recommendation, with a clear explanation provided in the report. The institution has the right to appeal the decision.

### 6.3 Freezing Accreditation

If an institution fails to meet accreditation standards, the Central Accreditation Committee may recommend freezing its accreditation. The institution will be given an eight-month grace period to address the issues, along with a warning letter detailing the required actions. During this freezing period, the institution cannot accept new trainees.

If the institution meets all requirements within the grace period, the committee will recommend restoring full accreditation, allowing the institution to resume enrolling trainees. If the requirements are not met, the committee may recommend canceling the accreditation, and NIHS will arrange for current trainees to transfer to another accredited institution. NIHS will inform the institution of the final decision before the grace period ends.

# 7 After Obtaining Accreditation

# 7.1 Maintaining Accreditation

Accredited institutions must uphold NIHS standards and comply with all relevant laws and regulations related to accreditation, fully cooperating with NIHS to maintain their status.

# 7.2 Continuing Accreditation Process

NIHS accreditation is typically granted for five years, although the Central Accreditation Committee may recommend a shorter period based on the site visit report. To remain accredited, institutions must apply for continuing accreditation and complete a full site visit before their current accreditation expires. Failure to submit the application on time will result in the withdrawal of accreditation.

# 8 Awarding Accreditation Certificates

Institutions that meet accreditation requirements will receive two types of certificates: one for institutional accreditation and another for residency and fellowship program accreditation by specialty. Both certificates will be issued and signed by the NIHS Secretary General.

# 9 Training Capacity Modification

Accredited institutions may request to modify their training capacity, provided the request is made at least three months before new trainee admissions. To apply, institutions should complete the NIHS Training Capacity form (available on the NIHS website) and email it to the NIHS accreditation unit. The Central Accreditation Committee will review the request within two months, potentially requesting additional information. Approval for capacity modification depends on the institution's internal resources. Full procedures are detailed on *Page 28*.

# **10** Appeals

If NIHS decides to refuse or withdraw accreditation, the institution may appeal by completing the NIHS Appeal form, available on the NIHS website. The form, along with supporting details, should be submitted to the accreditation team. The Central Accreditation Committee will review the appeal and respond to the institution within one month. Full appeal procedures are outlined on **Page 30**.

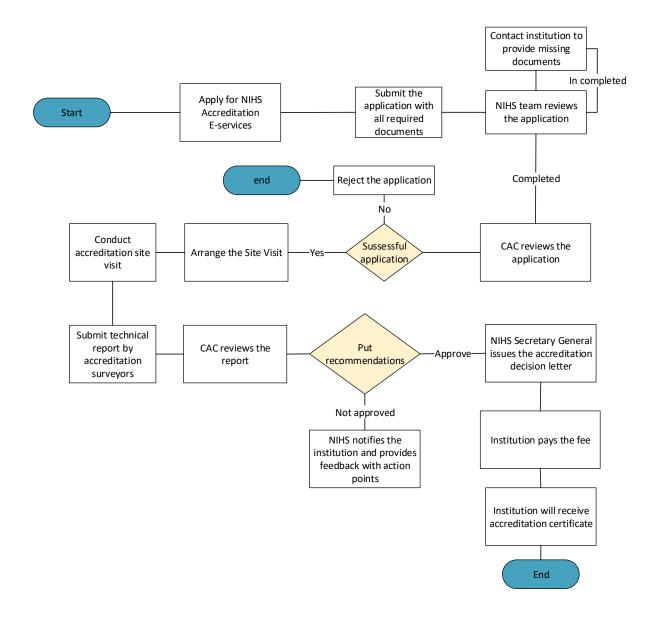
# **11 Complaints**

If an institution has a complaint about the accreditation process, it can submit the NIHS Complaint Form, available on the NIHS website, with relevant details to the NIHS accreditation team. The team will investigate and report to the NIHS Secretary General, who will issue a written resolution within five working days. For technical complaints, the Secretary General may refer the issue to the appropriate committee for corrective action.

Verbal complaints are also accepted, but the institution will need to follow up with a written complaint. The NIHS accreditation team will inform the institution of the decision. Full complaint procedures are on **Page 31**.

Appendix 1: Procedures

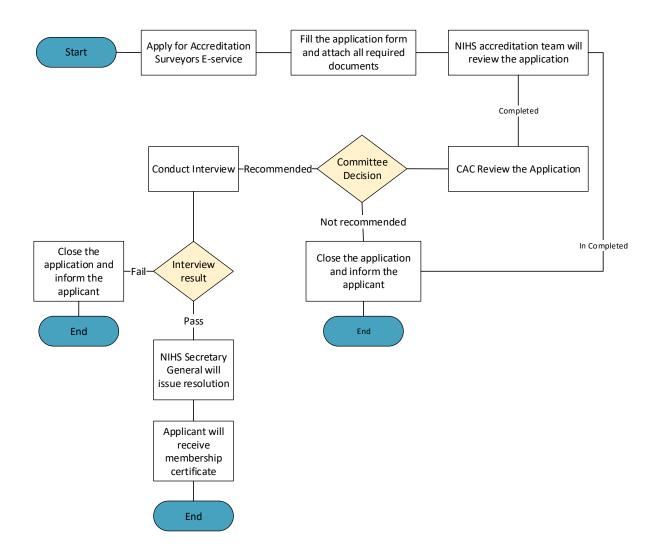
# Institutional and Program Accreditation Procedure



Institutional Accreditation E-service link: https://nihs.uaeu.ac.ae/en/institutional\_accreditation\_service/index.shtml

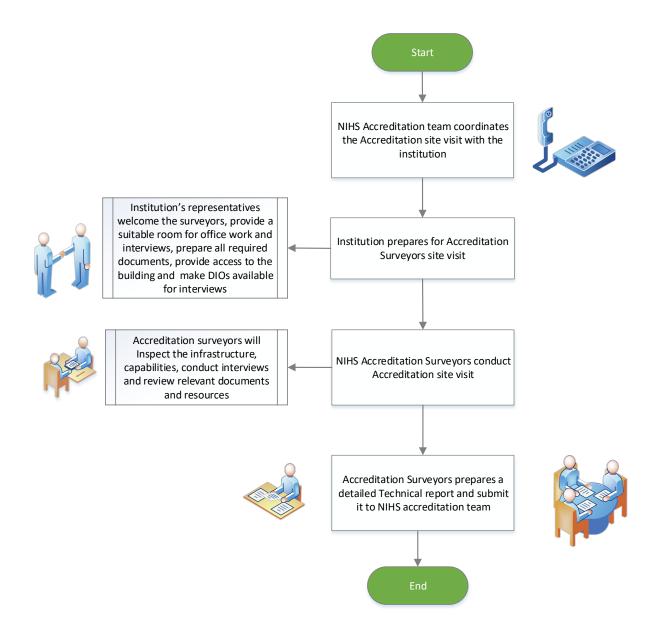
Program Accreditation E-service link: https://nihs.uaeu.ac.ae/en/program\_accreditation\_service/

# **Registration of Accreditation Surveyors Procedure**

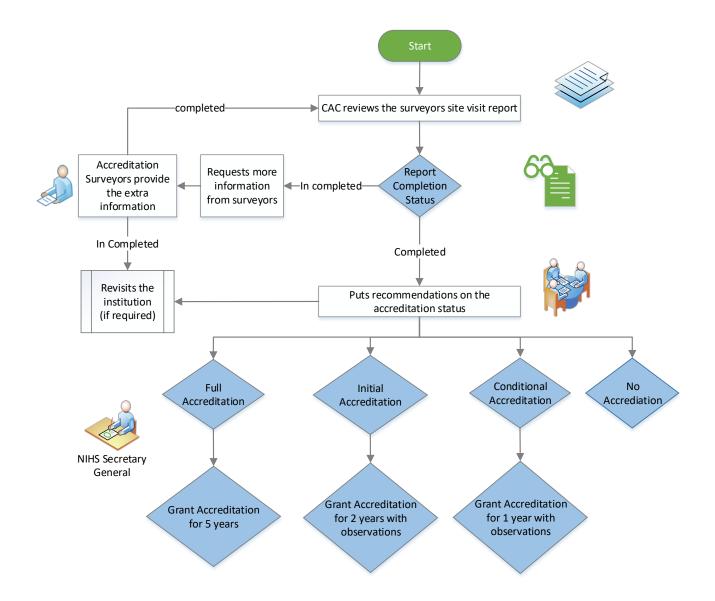


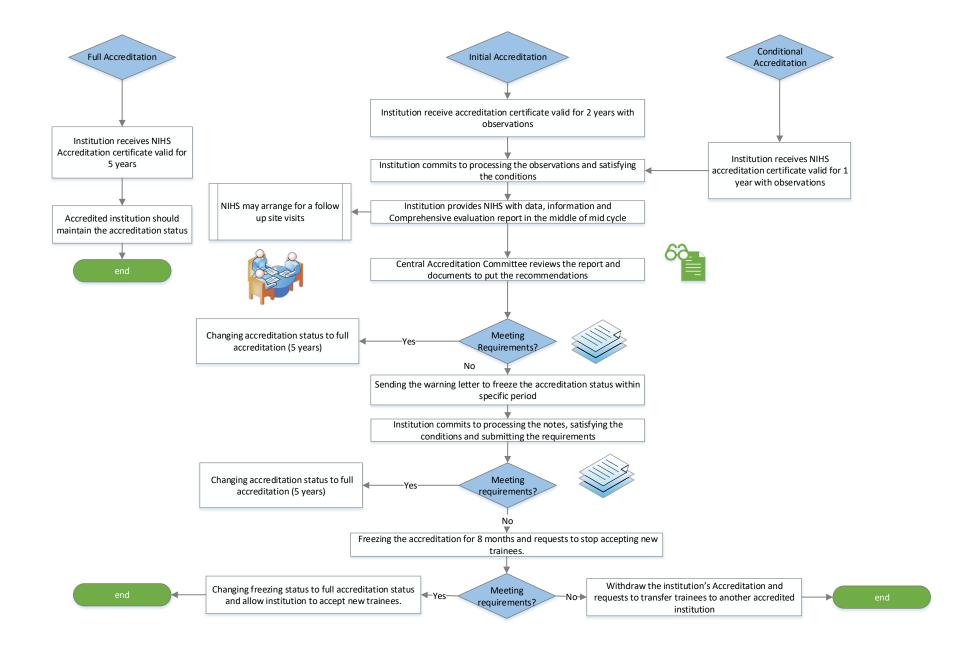
Registration of Accreditation Surveyors E-service link: https://nihs.uaeu.ac.ae/en/registration\_accreditation\_surveyors/

# **NIHS Accreditation Site Visit Procedure**

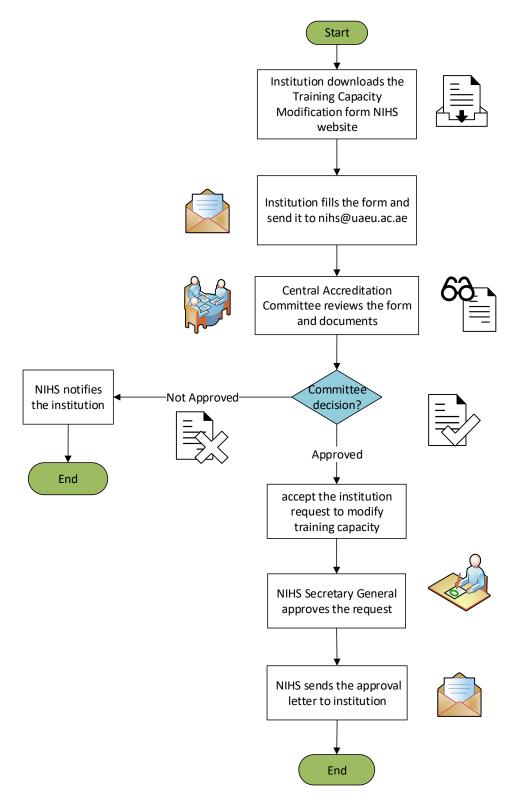


# **NIHS Institutional and Program Accreditation Decision**



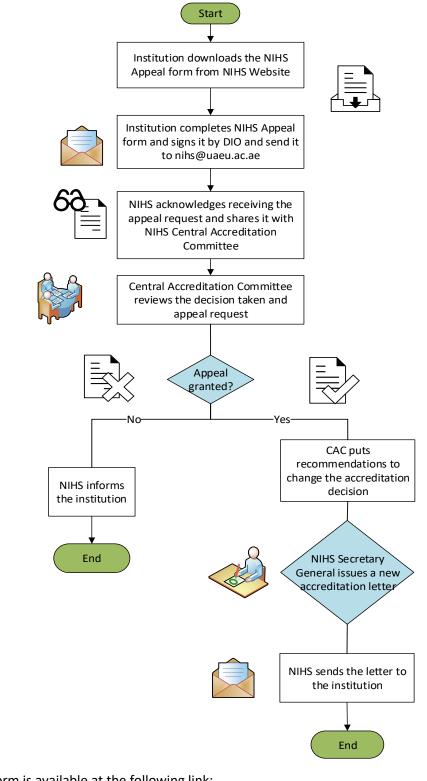


# **NIHS Training Capacity Modification Procedure**



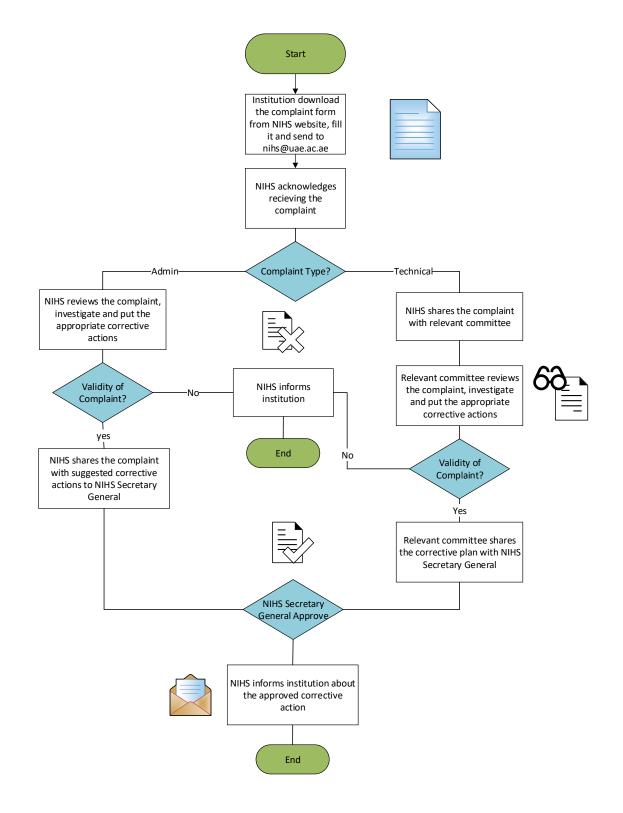
NIHS training capacity modification form is available at the following link: <u>https://nihs.uaeu.ac.ae/en/accred\_guide\_forms.shtml</u>

# **NIHS Appeal Procedure**



NIHS Appeal form is available at the following link: <u>https://nihs.uaeu.ac.ae/en/accred\_guide\_forms.shtml</u>

# **NIHS Complaints Procedure**



NIHS complaint form is available at the following link: <u>https://nihs.uaeu.ac.ae/en/accred\_guide\_forms.shtml</u> Appendix 2: Forms



# National Institute for Health Specialties Accreditation Surveyors Registration form

## GENERAL INSTRUCTION

Before you begin completing your application

- 1. Gather the required information so that you can complete the application without interruption.
- 2. Have a copy of your CV ready in PDF (.pdf) format to upload in step (i). Maximum file size 1000kb.
- 3. Have a current photo ready in gif or jpg format (.gif, .jpg) to upload in step (I). Your photo size should be approximately (200 pixels x 300 pixels). Maximum file size 500kb.
- 4. All the information you entered here will be treated with high confidentiality.

#### GENERAL INFORMATION

1 Personal Information				
Full Name				
Nationality				
Date of Birth				
Gender				
Mobile Number				
Email				
City				
Hospital Name				
2 Education				
The field of Speciality practice				
General specialty				
Sub Speciality				
Years of experience (as a consultant or equivalent)				
Have you ever participated in accreditation evaluation visits	□ Yes	□ No		
Attending the Faculty development workshop	□ Yes	🗆 No		

Number of times participating in visits					
DOCUMENTS					
Curriculum Vitae		Attachment			
Practice License		Attachment			
Recommendation letter from DIO (or relevant)		Attachment			
Have a current photo ready in gif or jpg format		Attachment			
Statement letter to expl interest	ain his or her	Attachment			
SIGNATURE OF APPLIC	ANT				
Declaration by the Appl	licant				
I hereby declare that the information I have provided in this application form and attached as supporting evidence are true. I understand that for this application to be successful, I must comply with the registration requirements set out by <i>National Institute for Health Specialties Accreditation Rules</i> . I understand that my application may be refused or cancelled if I do not provide the necessary evidence or fail to provide true and correct information in this application. If my application is accepted by NIHS, I commit to provide minimum of five days per year for conducting accreditation site					
visits.					
Name					
Signature					
Date					



# National Institute for Health Specialties

Surveyor's Assessment Form

GENERAL INFORMATION					
1 Applicant's Portfolio					
Name					
Telephone No.					
Email					
Nationality					
Facility					
Emirate					
2 Qualifications/Experience					
	□ Surgical	□ Medical			
Specialty:	Specify:				
Years of experience in medical education:					
Current clinical/academic position:					
Participation in previous accreditation process:	□ Yes	□ No			
	Specify:	·			
NIHS STANDARD CRITERIA ITEMS/REQUIREMENTS:					
Successful completion of accreditation courses:	□ Yes	□ No			
Committed to provide at least 5 days/year for accreditation site visits:	□ Yes	□ No			
DOCUMENTS					
Curriculum of vitae submitted	□ Yes	□ No			

Areas of strength					
Comments if any:					
Statement letter submitted		□ Yes		□ No	
Recommendation/reference letter submitted		□ Yes		🗆 No	
Comments if any:					
Scholarly activity participation					
Overall Rating					
□ Agree		□ Disagree		□ Recommend for Interview	
General Observations:					



# National Institute for Health Specialties Conflict of Interest Disclosure form

#### GENERAL INSTRUCTION

#### Before you begin:

- 1. You must read NIHS Conflict of Interest Policy.
- 2. Submit the signed form to NIHS Accreditation Unit.

### NIHS CONFLICT OF INTEREST POLICY FOR REGISTERED ACCREDITATION SURVEYORS

#### Terms and conditions:

- Accreditation Surveyors registered by NIHS are not allowed to participate in a work or activity that competes with the NIHS role in the UAE.
- Accreditation Surveyors registered by NIHS are not allowed to undertake any private or direct transactions with NIHS clients related to institutional and program accreditation process without prior approval from NIHS.
- Accreditation Surveyors registered by NIHS must refrain from disclosing information related to the assessment results to the concerned entities.
- Accreditation Surveyors registered by NIHS must refrain from disclosing any public or private information related to any transaction that take place through NIHS or use any of that information to achieve personal gain or interests.
- Accreditation Surveyors registered by NIHS should not evaluate the entity in which he or she works. In addition, should
  inform NIHS in advance in case of any conflict of interest (board membership, advisory role, etc.) with any party for which
  NIHS wishes to conduct an evaluation.
- Accreditation Surveyors registered by NIHS must refrain from accepting gifts from parties dealing with NIHS that would lead to wasting or harming NIHS's interests.
- Accreditation surveyors registered by NIHS must declare any form of conflict of interest that relates to a family member (financial or not) in relation to instances of work undertaken.

#### SIGNATURE OF APPLICANT

Declaration by the Accreditation Surveyors

I acknowledged that I have read and understood the National Institute for Heath Specialties' conflict of interest policy. Accordingly, I agree, abide by and acknowledge by all terms mentioned in this policy.

Name	
Position	
Signature	
Date	



# National Institute for Health Specialties

Training Capacity Modification form

1. GENERAL INFORMATION						
A. Program and Sponsoring Institution Inform	A. Program and Sponsoring Institution Information					
Name of Program:						
Name of Sponsoring Institution:						
Start date:						
Training years:						
Number of resident positions:						
Type of program:	<ul> <li>Residency</li> <li>Fellowship</li> </ul>					
B. Key Contacts						
Program Director						
Title						
Full Name						
Position						
Telephone						
Email						
2. TRAINING CAPACITY MOIDFICATION	2. TRAINING CAPACITY MOIDFICATION					
A. Increment						
B. Decrement						
C. Current Training Capacity:						
Total No. of Residents	No. of Residency training years	No. of Residents per Year				
D. Requested Training Capacity:	1					
Total No. of Residents	No. of Residency training years	No. of Residents per Year				
	· · · · · · · · · · · · · · · · · · ·					
E. Justification for the changes on training capacity:						
What is the justification for modifying the training capacity?						

3. CINICAL SERVICE INFORMATION								
Institution	Specialty Department	Number of general physicians	Number of specialist physicians	Number of consultant physicians	Number of beds	Number of inpatient admission/ months	Number of outpatient visits/month	Description / Additional Information
Institution # 1								
Institution # 2								
Institution # 3								
4. SUPPORTED DOCUMENTS								
List and attach all supportive documents for the application								
5. SIGNATURE OF PROGRAM DIRECTOR AND DIO								
To be completed by the Program Director and DIO of entity applying for Training Capacity Modification Request								
Program Director Signature								
Date								
DIO Signature:								
Date	Date							



# National Institute for Health Specialties

# Appeal form

1. GENERAL INFORMATION					
1 Institution Information					
Entity name					
Telephone					
Email					
Specialty program title	Specialty program title				
2 Key contacts	2 Key contacts				
Designated Institutional Officer					
Title					
Full Name					
Position					
Telephone					
Email					
2. APPREAL DETAILS:					
Reasons for the Appeal:					

### 3. EVIDENCE TO SUPPORT YOUR APPEAL REQUEST

List all documents supporting the appeal request and attach them to the application

#### 4. SIGNATURE OF DIO

To be completed by the Designated Institutional Official of entity applying for Appeal Request

DIO Signature

Date



# National Institute for Health Specialties Complaints form

1. GENERAL INFORMATION					
1 Institution Information					
Entity name					
Telephone					
Email					
Specialty program title					
2 Key contacts					
Designated Institutional Officer person					
Title					
Full Name					
Position					
Telephone					
Email					
2. COMPLAINT DETAILS					
Date and time of Incident:					
Location of Incident:					
Describe the incident in detail:					
Do you have any suggestions for resolv	ing the complaint? If so, please explain.				
Do you have any additional information or complaints? If so, please explain					
3. EVIDENCE TO SUPPORT YOUR COMPLAINT REQUEST					
List all the documents to support the complaint and attach them to the request:					

4. SIGNATURE OF DIO	
To be completed by the Designated Institutional Official of entity applying for Complaint Request	
DIO Signature	
Date	