# Employer Feedback Form

# Deadline for directions:

You are receiving this form as [MyCSP/Cabinet Office] has dealt with a complaint under the IDR process. A copy of the response that was sent to the member is also included with this letter. Please read the full response and the feedback below, and take any actions detailed below.

|  |  |
| --- | --- |
| Member name |  |
| Employer |  |
| NINO/DOB |  |
| Complaint reference |  |
| Outcome and reasons |  |
| Directions for you to complete and deadline for completion |  |
| Instructions for completing directions  |  |
| Feedback |  |
| Actions you should consider to prevent future complaints |  |

**Who should I contact if I want to discuss this further or have questions about completing directions?**

You should speak to your Service Delivery Manager, who can then liaise with the complaints team if necessary.

When the actions have been completed, please confirm this by contacting the case handler as below:

Case handler:

Contact: