

DAVIS Davis Behavioral Health CORPORATE COMPLIANCE REPORTING FORM

REPORT#

Reporting Information

Identifying information regarding the person reporting corporate compliance concerns is optional; any identifying information provided will be kept confidential to the fullest extent allowed under state and federal law.

| Person Reporting: | Job Title: |
|--|--|
| Building/Address: | Phone Number: |
| Date of Report: | Report Received: |
| Patient Information (if applicable or available) | |
| Patient ID#: | Patient's Primary Therapist or Worker: |
| Address: | Phone Number: |
| | |

Area of Concern

Please describe the nature of the concern:

Other Employees Involved

Provide names of other employees who man have had knowledge of the situation and could assist in investigating this concern:

> This form should be sent to Shelly Tanner, DBH Corporate Compliance Officer at shellyt@dbhutah.org, sent inter-office to the Kaysville Office, or mailed to Davis Behavioral Health c/o Shelly Tanner 934 S Main Street

Layton, UT 84041

Reports will also be taken by phone at 801.336.1828 or 801.652.8789.

Thank you for your cooperation.