

PEI LPN REGISTRATION BOARD
155 Belvedere Avenue, Suite 204
Charlottetown, PEI, C1A-2Y9
P: 902-566-1512
E: info@peilpnrb.ca

Complaint Form
A signed letter of complaint is required to initiate the complaint process. The PEILPNRB is unable to accept anonymous complaints. A copy of the letter of complaint will be provided to the LPN who is the subject of the complaint.

SUBMITTING A COMPLAINT:

To make a formal complaint against a Licensed Practical Nurse, you must do so in writing. Attach a letter of complaint to this form and clearly state you are making a complaint against a Licensed Practical Nurse.

Your letter must include:

- The full name of the LPN who is the subject of the complaint.
- Provide a detailed and clear description of the issue(s), with examples of specific incident(s) that support the complaint.
- The location, date and time of incident(s).
- Names of those involved or others who have direct knowledge of the incident(s).
- Identify specific standards, workplace policies, or procedures that were not met.

By submitting your complaint, you are consenting to the collection, use and disclosure of your personal information for the purposes of investigating a complaint. All information received is treated and considered as CONFIDENTIAL This includes the disclosure of your name and the details of the complaint to the LPN. This consent is effective from the date you submitted this form to the PEI LPN Registration Board.

YOUR CONTACT INFORMATION:

First Name: _____

Last Name: _____

Mailing Address: _____

Email Address _____

Home Phone: _____

Cell Phone: _____

LPN'S INFORMATION:

First Name: _____

Last Name: _____

Registration Number: _____

Signature: _____

Date: _____