**Important Information:**

The template Investigation Plan below is a useful guide for organisations covered by the Western Australia Reportable Conduct Scheme (**Scheme**). The template can be used by organisations to plan how their reportable conduct investigation will be conducted. Please note, use and submission of the template is not required and is intended to reflect a ‘best practice’ approach.

**Investigation Plan (Blank)**

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| **Investigation details** | | | | | | | | | |
| **Internal Reference** | | | | |  | | | | |
| **Organisation** | | | | |  | | | | |
| **Organisation contact name** | | | | |  | | | | |
| **Contact title/position** | | | | |  | | | | |
| **Contact phone number** | | | | |  | | | | |
| **Contact email** | | | | |  | | | | |
| **Expected timeframe for completion of investigation** | | | | |  | | | | |
| **Subject** **of allegation** | | | | | | | | | |
| **Name** | | | | |  | | | | |
| **Phone number** | | | | |  | | | | |
| **Email** | | | | |  | | | | |
| **Role in organisation** | | | | |  | | | | |
| **Date of birth** | | | | |  | | | | |
| **Working with Children Check number** | | | | |  | | | | |
| **Victim** | | | | | | | | | |
| **Name** | | | | |  | | | | |
| **Date of birth** | | | | |  | | | | |
| **ATSI status** | | | | |  | | | | |
| **Disability** | | | | |  | | | | |
| **Other information** | | | | |  | | | | |
| **Summary of allegation(s)** | | | | | | | | | |
| **Allegation** | **Details** | | | | | **Alleged Breach of Workplace Policy/**  **Procedure(s)** | | | **Reportable Conduct Allegation Category(ies)** |
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| **Investigation overview** | | | | | | | | | |
| **How did the allegation(s) arise** | | |  | | | | | | |
| **Risks** | | |  | | | | | | |
| **Conflicts of interest** | | |  | | | | | | |
| **Assigned Investigator** | | | | | | | | | |
| **Investigator name** | | |  | | | | | | |
| **Investigator title/position** | | |  | | | | | | |
| **Investigator organisation (if external)** | | |  | | | | | | |
| **Scope** **of investigation** | | | | | | | | | |
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| **Decision maker** | | | | | | | | | |
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| **Current information** | | | | | | | | | |
| **Item/Document(s)** | | **Source** | | **Relevance** | | | | | |
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| **Possible witness** | | | | | | | | | |
| **Name** | | **Role/Position** | | **Relevance** | | | | | |
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| **Possible evidence** | | | | | | | | | |
| **Item/Document(s)** | | **Source** | | **Relevance** | | | | | |
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| **Investigation Action Plan** | | | | | | | | | |
| **Action** | | | | | | | **Person to complete** | **Due date** | |
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|  | | | | | | |  |  | |
| **Date Investigation Plan completed** | | | | | | |  | | |
| **Person completing Investigation Plan** | | | | | | |  | | |
| **Signature** | | | | | | |  | | |