

Compliments complaints and feedback - Template

Please tell us about your experience with us. We welcome and value your feedback as this helps us to improve our service, not only just to you but to every one of our valued participants and supports.

We take all complaints seriously and we do all we can to resolve any issues as soon as possible.

Is this a compliment? Is this feedback?

Is this a Complaint? Name Are you a participant with Disability Support NSW? If not, please state role or relationship Phone Email N/A Please rate your experience Agreed disagree Not sure Staff respect my opinions and decisions Staff listen to me I am being assisted and supported to identify and achieve my \square \square \square \square goals My privacy is respected I am provided with enough information I am being supported in my recovery My family or support network is involved in my planning (if applicable) Disability Support NSW is meeting my expectations \square \square If this is a complaint, please describe your complaint If this is a complement, please describe your complement

Other comments or feedback



If you need help giving us feedback or making a complaint, you can have someone help you with this such as a family member or support worker or support coordinator. You can also give us a verbal complaint or feedback and we will complete this form on your behalf.

If you are not happy with the provision of services and wish to make a complaint about your services, you can also talk to NDIA on 1800 800 110 or you can send an email to enquiries@ndis.gov.au.

If you are not satisfied or prefer an alternative, you can contact the National Disability Insurance Agency by calling 1800 800 110, visit one of their offices in person, or by visiting <u>ndis.gov.au</u> for further information.

Alternatively, you can contact a Disability Advocacy Service in your local area. <u>https://www.qld.gov.au/disability/legal-and-rights/advocacy</u>. Please ask us if you need help to find these services.

Office use only

Management response		
Admin/Management checklist	Yes	No
If this is a complaint, have you responded and finalised the complaint		
If there is a need for this to be escalated or reported elsewhere		
If this is a compliment or feedback, have you passed it on to the		
appropriate people		
Has this been documented in the appropriate register or file if		

Name	
Signature	
Date of completion	
Other Notes:	