

COMPLAINT FORM (Private and Confidential)



We highly encourage you to complete this form to make formalise your complaint. This will allow us to respond to your complaint in a timely manner with a fair and consistent approach.

Firstchance F&C Register ID:		ADHC FCML ID:	
Type of Complaint:	<input type="checkbox"/> Feedback <input type="checkbox"/> Formal <input type="checkbox"/> Informal		
Name of Person who completed this form:		<input type="checkbox"/> Client/Family <input type="checkbox"/> Assisting Person <input type="checkbox"/> Staff Member <input type="checkbox"/> Other—please specify	
Complaint Details			
Personal Details of the Person Making the Complaint			
First Name :		Surname:	
Address:		Suburb/Postcode:	
Email:		Phone:	
Type of Complainant:	<input type="checkbox"/> Family/carer, relationship _____ <input type="checkbox"/> Community Member <input type="checkbox"/> Advocate <input type="checkbox"/> Anonymous <input type="checkbox"/> Other Agency, which Agency _____ <input type="checkbox"/> Other _____		
Details of Person Assisting You (only fill in this section if someone assisted you to fill in this form to lodge your complaint)			
Last Name:		Given Name/s:	
Organisation:	(If Applicable)		
Address:		Suburb/Postcode:	
Email:		Phone:	
Details of the Complaint			
What happened? <small>(give as much details as you can of what you say happened)</small>			
Where did it happen?		When did it happen?	
Who was involved?			
How has this incident/issue affected you and/or your child/family?			
What outcome are you seeking?	<input type="checkbox"/> Acknowledgement of your complaint <input type="checkbox"/> Answer or explanation <input type="checkbox"/> Action taken, please give details _____ _____ <input type="checkbox"/> An apology <input type="checkbox"/> Other, please give details _____ _____ _____		
Action already taken? <small>(Outline any steps you have taken so far to resolve your complaint. It helps us to know what actions, if any, you may have taken already to try and deal with your concern or complaint. You can still make this complaint if you have not been able to raise it with the staff at the service you attend.)</small>			
Signature:		Date:	

Once this page is completed (take a copy for your records) please forward it to the Program Manager or the General Manager. Please turn over to see what happens next....

Where to From Here....

Thank you for taking the time to advise us of your concerns. Once we receive your complaint, we will follow our Complaints Resolution Procedure and will work to resolve your concern/s in a timely manner.

You will receive a written letter (emailed or posted) from us, advising that we have received your complaint and the timeframe we propose for investigating and/or resolving your concern/s. We will also provide you with the details of who to contact if you have any questions or concerns during the resolution process.

We will also notify you in writing as to any updates or progress along the way.

You will receive final notification in writing, detailing the reasons for the decision and the details of the appeals process.

If you change your mind about making the complaint, please let us know at any time during the process.

Firstchance promises that all staff will deal with your complaint fairly and with respect and you will not be disadvantaged in any way. If you feel you are not being treated with respect at any time while your complaint is being followed up or afterwards, please contact the General Manager straight away on 4910 3130 so immediate action can be taken.