



CLIENT FEEDBACK AND COMPLAINTS FORM

Clients using Midland Women's Health Care Place, their family and advocates and interested parties have a fundamental right to voice suggestions, compliments and complaints about our service and it is the responsibility of staff to report any suggestions, compliments and complaints to management, and for them to respond appropriately and constructively to this input.

We welcome your feedback at any time, which will be treated with strict confidentiality. Have you experienced any difficulty with the services you have or have not received?

COMPLIMENTS & IDEAS

Please provide your compliment and ideas on any aspect of our services here:

COMPLAINTS

Date of Incident:

Date of Complaint:

Complaint Details – Please provide as much information and reasons for your difficulty as possible here:

What would you like to happen now?

Who would you like to contact about this matter?

Chief Executive Officer

Chairperson (if the complaint relates to the CEO)

If you want us to contact you please provide your contact details:

Name:

Phone:

By email: (your email address):

(or in writing): Your address:

Suburb:

Postcode: