

Spectrum Centre Complaint Report Form

Spectrum Centre welcomes feedback, including complaints. Feedback is an opportunity to understand the experiences of our clients, workers, and other stakeholders to learn how our services can be improved.

All information provided in this form is confidential.

If you like assistance completing this form please contact feedback@spectrumcentre.com.au or Claire Paterson (Spectrum Centre Director) on 0499 930 811.

Details of the person completing the form:

| | | | | |
|--|--|--------------|--------------------------------------|---------------------------------|
| Name: | | Telephone: | | |
| Address: | | Role/Source: | <input type="checkbox"/> Participant | <input type="checkbox"/> Worker |
| Email: | | | <input type="checkbox"/> NDIS | <input type="checkbox"/> Other: |
| Please provide the details of anyone you would like to assist you in making this complaint (e.g., advocate, support person, authorised representative: | | | | |

Complete next section if the complaint is on behalf of someone else:

| | | | |
|------------------|--|---|---|
| Name of person: | | Your relationship to the person: | |
| Contact details: | | Is the person aware you are making this complaint?: | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure |
| | | Has the person consent to you giving this complaint?: | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure |

Complaint Details:

What is your complaint about? Provide details to help us understand your concerns. You can include what happened, where it happened and who was involved.

Did someone witness the incident? Would they be willing to be contacted regarding your complaint? If so, provide the name and contact details. Please inform the witness that they may be contacted by us to discuss the matter.

How can we help to fix or improve this problem or complaint?

Signature:

Name:

Date:

Please return this completed form to feedback@spectrumcentre.com.au