

If you wish to remain anonymous, leave this section blank

Mr/Mrs/Ms/Miss

Address

.....

.....

Telephone Home

Business

If you wish to have an Advocate assist you or act on your behalf in making a complaint, please contact the following organisation:

Health Service Commission (State)

Ph: 1800 136 066.

Complaints Investigation Scheme

(Commonwealth Aged Care)

Ph: 1800 550 552 or (03) 9665 8888.

When completed, this form can be:

- Left at Reception or the Nurse's Station
- Handed to a member of staff
- Mailed back to us using the Reply Paid envelope

If you require any additional information or if you have any further queries please contact the Chief Executive Officer at the St. Arnaud Campus:

EAST WIMMERA HEALTH SERVICE

Birchip Campus	Charlton Campus	Donald Campus	St. Arnaud Campus	Wycheproof Campus
26 Duncan St., Birchip, Vic. 3483. Ph: 5477 7100	4-8 Menzies St., Charlton, Vic. 3525. Ph: 5477 6800	Aitken Ave., Donald, Vic. 3480. Ph: 5478 6200	52 North Western Rd., St. Arnaud, Vic. 3478. Ph: 5477 2100	19 Grandview St., Wycheproof, Vic. 3527. Ph: 5478 0700



East
Wimmera
Health
Service

Compliments, Concerns
or Complaints

For use by Patients, Residents, Clients,
Visitors, Contractors or Suppliers

*Help us Evaluate
and improve the
Quality of our Services*



East
Wimmera
Health
Service

East Wimmera Health Service is committed to:

"Providing quality care and services to all patients, residents and clients."

To help us evaluate our performance and assess whether we have met your expectations, we ask that you complete the section opposite.

Alternatively, you may wish to contact the Chief Executive Officer at the St. Arnaud Campus.

Contact details are located on the last page.

Your assistance is appreciated and your feedback genuinely valued.

Rob Bulmer

Chief Executive Officer

Please Circle:

Compliment

Concern

Complaint

Patient

Resident

Client

Visitor

Contractor

Supplier

Please indicate by ticking the appropriate box.

Please write your Compliment, Concern or Complaint comments

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Alternatively, record your telephone number here and you will be contacted as soon as possible

Telephone Business

A/H.....

Date of Incident/Event / /

Place of Incident/Event

If you have a concern or complaint, what could the improvement be? How do we stop it from happening again?

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