

# Feedback and Resolution Form

## Your Details (person completing form)

Name	
Postal Address	
Email	
Phone	

If you wish to remain anonymous, please keep the above information blank. Richmind WA welcomes all feedback however if you wish to remain anonymous, we will not be able to provide you with further information in relation to this feedback.

Preferred Method of Contact				
Postal Address (written correspondence)	Phone			
Email	Other:			
Do you require an interpreter				
Yes	No			
Your relationship to Richmind WA				
Consumer	Service Provider			
Carer	External Stakeholder			
Family, Friends or Significant other	Member of Public			
Guardian	Richmind WA W Staff Member, student			
Other:	or volunteer			
Which area of Richmind WA does your feedback relate to				
Head Office/ Administration Staff	NDIS Support Coordination			
Residential Services	Training and Education			
Outreach Services	Diversity and Inclusion Practice			
MH Connext / WAPHA Services	Property and Maintenance			
NDIS	Other:			

Type of Feedback:				
General Feedback	Comment			
Complaint	Concern			
Other:				

### Your Feedback

Please tell us about yourfeedback so we can understand what you would like to tell us. Please provide details of who/what the feedback or complaint is about, what happened, when it happened, who was involved, and any decisions made. Please attached any further documentation you may have to support yourfeedback.

#### What is the outcome you are seeking?

Access a Service	Disciplinary Action
Access to information	Explanation
Access to information	Alternative or Corrective Treatment
Apology	Training or Education to be provided
Change in Policy or Procedure	
Other:	

## **Further Information**

Have you contacted another service provider or agency regarding your feedback? If so, please provide details of the person or agency and attach any correspondence (if you are willing to share this information with Richmind WA).

Person	Agency			
Email	Phone			
Postal Address				
Brief description of Information provided:				

### **Supporting Information**

#### Please attach any supporting documentation or information you may have.

Please tick this box to consent to Richmind WA making contact, or sharing this information, with a third party to support the resolution or outcome sought from this feedback raised.

### **Demographics**

Your personal information will be kept confidential and used on a need-to-know basis. We may be required by legislation to provide this information to regulatory authorities, our insurers, and any necessary service providers in investigating or taking appropriate remedial action.

The demographic information can also help us know if we are missing feedback from some groups of people. It also tells us if some groups of people have a better or worse experience than others.

These questions are optional.

Age Range				
Under 18		45 - 54		
18 - 24		55 - 64		
25 - 34		65 years and over		
35 - 44				
Do you identify as Aboriginal or Torres Strait Islander?				
Yes - Aboriginal		No		
Yes - Torres Strait Islander		Prefer not to say		
Yes - Aboriginal and Torres Strait Islander				
Do you identify as Culturally and Linguistically Diverse (CaLD)?				
Yes	Yes No		Prefer not to say	
Do you identify as LGBTQIA+?				
Yes	No		Prefer not to say	
Which gender do you identify as?				
Female		Self-identify		
Male	Prefer not to say			
Non-Binary				

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# Thank You for Your Feedback

## Please submit this form to:



### Mail

Richmind WA, Feedback and Complaints, PO Box 982 Bentley, WA 6982



### Email

feedbackandcomplaints@rw.org.au



### **In Person**

Please hand this form to a Richmind WA staff member, or hand deliver to our reception at 29 Manning Road, Cannington, WA 6107



### Phone

If you would like to provide verbal feedback, please discuss this with a Richmind WA staff member

### Privacy

In submitting this Feedback form, Richmind WA is collecting your personal information.

The information you provide will assist us to investigate and resolve the matter and to comply with legal requirements, including those in the Privacy Act. If you wish to remain anonymous or use a pseudonym, or do not wish to provide the other requested personal information, we may be limited in our ability to investigate the complaint, to take appropriate action to resolve the issue including taking remedial action or mediation, and to discuss with you our findings and proposed outcomes. Your personal information will be kept confidential and used on a need-to-know basis. We may be required by legislation to provide this information to regulatory authorities, our insurers, and any necessary service providers in investigating or taking appropriate remedial action.

Our Privacy Policy is accessible via our website: rw.org.au/privacy-statement/