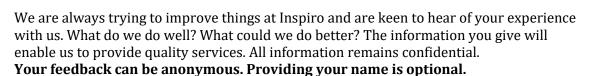
## **CONSUMER FEEDBACK FORM**





Title: Mr / Mrs / Ms / Miss / Dr (please circle)  Date:		
Name:		
Email:		
Phone:		
Are you (the person providing feedback) a:		
☐ Client ☐ Relative/Carer ☐ Community member ☐ Agency ☐ Staff Member ☐ Other		
Would you like to be contacted regarding your feedback? Yes No		
Is an interpreter needed? Yes No Preferred language:		
How did you hear about Inspiro? (please tick)		
☐ I have been to Inspiro before       ☐ Doctor/nurse         ☐ Website/social media       ☐ From a friend/family member         ☐ Newspaper advertising       ☐ Other		
Which Inspiro service did you use?		
Type of feedback:		
☐ Thank you/compliment		
Details of feedback (Please include date, time, staff member as relevant):		
(Please turn over for more space)		
What action would you like?		
(Please turn over for more space)		

Please place your feedback in the feedback box in our Reception, or mail to:
Karyn McPeake, CEO Email to:
Inspiro hello@inspiro.org.au

Reply Paid 86249 17 Clarke Street Lilydale Vic 3140

Additional space for feedback:		
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If you are not satisfied with our service, please contact us. We take complaints seriously and aim to resolve them quickly and fairly.

If you remain dissatisfied with our response, you may contact the Health Complaints Commissioner (HCC). The HCC responds to complaints about health services and the handling of health information in Victoria. Their service is free, confidential and impartial. To lodge a complaint with the HCC:

- Fill out a complaint form online at www.hcc.vic.gov.au or
- Phone 1300 582 113 between 9am and 5pm, Monday to Friday to discuss your complaint.

Thank you so much for your time.

Office use only		
Action	Date completed	
Feedback Register updated		
Manager/CEO copied		
Suggestions logged		
If complaint, Complaint Follow-Up and Action Form initiated		