

Consumer feedback form

**Guidelines for Providers**

This document can be used by service providers to provide an easy and accessible way for consumers, family members, representatives and others to provide feedback to the service.

The document is mostly non-editable however it is editable in the relevant areas where you can place your logo and address. The form is intended to be used as a printed version however if you want to embed it into your feedback systems, the text can be copied and pasted but its content cannot be edited.

It has been development by the Centre for Cultural Diversity in Ageing. Contact the Centre if you have any questions at [info@culturaldiversity.com.au](about:blank)

**Key considerations for obtaining feedback from older people from diverse cultural backgrounds:**

1. People should have the opportunity to provide their feedback in their preferred language. If they choose to fill out the form in a language other than English the service will need to engage a NAATI accredited translation service to translate it back into English.
2. Ask the person if they need or would like another person to help support them with giving feedback such as a carer, family member or someone they trust.
3. Consider diversity in the way in which older people may connect with the concept of feedback based on their life experiences. For more information visit the Centre for Cultural Diversity in Ageing Practice guide: Culturally Inclusive Feedback at: [Centre for Cultural Diversity in Ageing Practice Guides](about:blank)
4. Inform the person of their right to privacy and offer them the Aged Care Charter of Rights in their preferred language. Direct them in how they can put the form into a suggestion box or through a mailing address. Translated versions of the Aged Care Charter of rights can be found at: [Aged Care Charter of Rights](about:blank)
5. Inform the person on how your service handles personal information and inform them of the privacy policy and how their personal information will be used.
6. Inform the person on how the service will follow up on their feedback to support them to feel respected and safe in relation to the process that will follow after they give their feedback.
7. Give the person a copy of the Aged Care Quality and Safety Commission “Do you have a concern?” brochure in their preferred language. It is available in 25 languages and can be found at: [Do you have a concern? brochures](about:blank)

प्रतिक्रिया फारम

***Feedback Form***

[SERVICE NAME AND LOGO]

हामी तपाईंको प्रतिक्रिया स्वागत गर्दछौं।

***We welcome your feedback***

यो फारम तपाईंको मनपर्ने भाषामा भर्ने वा तपाईंलाई सहयोग गर्न एक दोभाषे पाउने अधिकार छ। यदि तपाईंलाई दोभाषे चाहिन्छ भने संगठनमा काम गर्ने कर्मचारीलाई भन्न सक्नुहुन्छ वा तलको बाकसमा टिक गरेर देखाउन सक्नुहुन्छ।

*You have the right to complete this form in your preferred language or have an interpreter to support you. You can ask a person who works at the organisation if you need an interpreter or tick the box below and show them.*

मलाई दोभाषे चाहिन्छ □  
I need an interpreter

**यो के होः**  □ प्रशंसा □ गुनासो □ सुझाव  
***This is a:*** *Compliment Complaint Suggestion*

**म को हुँ:** □ ग्राहक□ परिवारका सदस्य □ प्रतिनिधि / हेरचाहकर्ता □ अन्य  
***I am a:*** *Client**Family member Representative/carer Other*

**मेरो प्रतिक्रिया**को बिषय**:** □ कर्मचारी सदस्य□ निवासी□ मैले प्राप्त गर्ने सेवाहरू ***My feedback is about a:*** *Staff member**Resident* *Service I am receiving*

□ अन्य

*Other*

**तपाईंको प्रतिक्रिया (तपाईं आफ्नो मनपर्ने भाषामा लेख्न सक्नुहुन्छ। यदि तपाईं आफ्नो टिप्पणीहरू लेख्न थप ठाउँ चाहिन्छ भने तपाईंले पृष्ठ थप्न सक्नुहुन्छ वा यो पृष्ठको पछाडि लेख्न सक्नुहुन्छ)  
*Your Feedback (you can write in your preferred language. If you need more space to write your comments, you can add a page or write at the back of this page)***

तपाईंले दिएको प्रतिक्रियाको परिणाम स्वरूप तपाईं के भएको हेर्न चाहनुहुन्छ? (तपाईं आफ्नो मनपर्ने भाषामा लेख्न सक्नुहुन्छ। यदि तपाईं आफ्नो टिप्पणीहरू लेख्न थप ठाउँ चाहिन्छ भने तपाईंले पृष्ठ थप्न सक्नुहुन्छ वा यो पृष्ठको पछाडि लेख्न सक्नुहुन्छ)  
*What would you like to see happen as a result of your feedback? (you can write in your preferred language. If you need more space to write your comments, you can add a page or write at the back of this page)*

यदि तपाईं तपाईंको प्रतिक्रिया अज्ञात राख्न चाहनुहुन्छ भने तपाईं यसलाई सेवा स्थलमा रहेको सुझाव बाकसमा खसाल्न सक्नुहुन्छ वा यसलाई हुलाकबाट निम्न ठेगानामा पठाउन सक्नुहुन्छ:   
*If you want your feedback to be anonymous you can place it into a suggestion box at the service or post it to:*

………………………………………………

**ताकेता** **(फलो अप** **)(स्वैच्छिक)**  
***Follow up (optional)***

यदि तपाईंको प्रतिक्रियाको बारे तपाईंलाई हामीले सम्पर्क गराउन चाहनुहुन्छ भने तपाईंको विवरण प्रदान गर्नुहोस्। सबै प्रतिक्रिया गोप्य रहनेछन्।  
*Provide your details if you would like us to contact you about your feedback. All feedback is confidential.*

नाम: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
*Name*

फोनः\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
*Phone*

ईमेल \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
*Email*

सेवा केन्द्रलाई तपाईंले प्रतिक्रिया दिईसकेपछि तपाईंले निम्न कुराहरूको आपेक्षा गर्न सक्नुहुनेछ:  
*Here is what to expect after your feedback is given to the service:*

1. तपाईंको प्रतिक्रिया प्राप्त हुनेछ र स्वीकार गरिन्छ।  
   *Your feedback is received and acknowledged*
2. यदि आवश्यक भएमा थप छलफल गर्न सेवा केन्द्रबाट कसैले तपाईंलाई सम्पर्क गर्नेछ   
   *If required, someone from the service will contact you to discuss further*
3. यो सेवा केन्द्र कसरी सुधार गर्न सकिन्छ भन्नेबारे जान्नको लागि तपाईंको प्रतिक्रिया उपयोग गर्नेछ  
   *The service will use your feedback to learn how it can improve*

### यदि सेवा प्रदायकसँग तपाईंको प्रतिक्रिया समाधान गर्न सक्नुहुन्न भने तपाईं वृद्ध हेरचाह गुणस्तर र सुरक्षा आयोग (Aged Care Quality and Safety Commission) लाई 1800 951 822 मा सम्पर्क गर्न सक्नुहुन्छ। यदि तपाईंलाई दोभाषे चाहिन्छ भने 131 450 मा TIS National (अनुवाद र दोभाषे सेवा) लाई फोन गर्नुहोस्। *If you cannot resolve your feedback with the service provider, you can contact the Aged Care Quality and Safety Commission on 1800 951 822. If you need an interpreter, call TIS National (Translating and Interpreting Service) on 131 450.*

हाम्रो सेवाको बारेमा प्रतिक्रिया दिनको लागि समय दिनुभएकोमा धन्यवाद।

*Thank you for taking the time to provide feedback about our service.*