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](mailto:info@culturaldiversity.com.au)

**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](http://www.culturaldiversity.com.au/service-providers/practice-guides)
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](https://www.agedcarequality.gov.au/resources/translated-charter-aged-care-rights-template-signing)
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](https://www.agedcarequality.gov.au/resources/do-you-have-concern-brochure)

**Formulario para enviar comentarios**

***Feedback Form***

[SERVICE NAME AND LOGO]

**Agradecemos sus comentarios**

***We welcome your feedback***

Usted tiene derecho a completar este formulario en su idioma de preferencia o a tener un intérprete que lo(a) ayude. Si necesita un intérprete, puede solicitarle a una persona que trabaja en la organización o marcar el casillero que figura a continuación y mostrárselo.

*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.*

Necesito un intérprete □

*I need an interpreter*

**Esto es una:** □ Felicitación □ Queja □ Sugerencia

***This is a:*** *Compliment Complaint Suggestion*

**Soy:** □ Cliente□ Miembro de la familia □ Representante/cuidador(a) □ Otro

***I am a:*** *Client**Family member Representative/carer Other*

**Mi comentario se refiere a:**

***My feedback is about a:***

□ Personal□ Residente □ Servicio que estoy recibiendo □ Otro

*Staff member**Resident* *Service I am receiving**Other*

**Sus comentarios. (Puede escribirlos en su idioma de preferencia. Si necesita más espacio para escribirlos, puede agregar una página o escribir al dorso de esta página).  
*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)***

**¿Qué le gustaría que sucediera como resultado de sus comentarios?**

**(Puede escribirlos en su idioma de preferencia. Si necesita más espacio para escribirlos, puede agregar una página o escribir al dorso de esta página).**

***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)***

Si desea que sus comentarios sean anónimos, puede colocarlos en una urna para sugerencias que está en el servicio o enviarlos por correo a:

*If you want your feedback to be anonymous you can place it into a suggestion box at the service or post it to:*

……………………………………………

**Seguimiento (opcional)**

***Follow up (optional)***

Proporcione sus datos si desea que nos comuniquemos con usted para recibir sus comentarios. Todos los comentarios son confidenciales.

*Provide your details if you would us to contact you about your feedback. All feedback is confidential.*

Nombre: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
*Name*

Teléfono:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Phone*

Correo electrónico: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Email*

**Esto es lo que se puede esperar después de que envíe sus comentarios al servicio:**

***Here is what to expect after your feedback is given to the service:***

1. Sus comentarios se reciben y se toman en cuenta.

*Your feedback is received and acknowledged*

1. Si es necesario, alguien del servicio se pondrá en contacto con usted para conversar más detalladamente.

*If required, someone from the service will contact you to discuss further*

1. El servicio utilizará sus comentarios para saber cómo puede mejorar.

*The service will use your feedback to learn how it can improve*

### Si no puede resolver el problema mencionado en sus comentarios con el prestador de servicios, puede ponerse en contacto con la Comisión de Calidad y Seguridad para Adultos Mayores (Aged Care Quality and Safety Commission) al 1800 951 822. Si necesita un intérprete, llame a TIS National (Servicio de Traducción e Interpretación) al 131 450.

### *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 131 450 (Translating and Interpreting Service - TIS National).*

**Gracias por tomarse el tiempo para enviar comentarios sobre nuestro servicio.**

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