



Feedback -

Your feedback plays an important role in helping us to improve our service

Thank you for taking the time to provide our team with feedback

Do you have a:

Compliment

Suggestion

Complaint

Your name (optional):

Phone (optional):

Please tick as appropriate:

Today's Date:

Please call me so I can give you more information

I would like a response to my feedback

I need an interpreter or help to provide feedback

Are you:

Patient

Family or Carer

Service provider or someone else

Which program is your feedback about?

Nursing

Supportive Care

Other Staff

Volunteers

Loan Equipment

Other

What would you like to tell us?

How would you like this responded to or actioned?

Give this form to any staff member or you can post or email it to us

Post: PO Box 96 Ballarat Vic 3353 **Email:** admin@ballarathospicecare.org.au