

INSTRUCTIONS

Thank you for taking the time to fill out a *Client Complaint* form.

Peel Valley Training and Employment appreciates any feedback concerning its operation and practices. Your complaint form will be treated with the utmost confidentiality.

Upon the receipt of your complaint, a PVTE staff member unrelated to the matter will be assigned to attend to your concerns.

This staff member will then contact you to discuss the matter in more detail – either over the phone or in person.

Should you wish to mediate, you will be invited to attend a meeting at PVTE offices in an attempt to resolve the matter. You may be accompanied by a friend, relative or advocate to provide you with support. In the majority of cases, a resolution which is acceptable to both parties is achieved. If agreement cannot be reached, the matter will be referred to the President, Board of Management for resolution. If the matter is still unable to be resolved it will be referred to the Complaints Resolution and Referral Service (CRRS). This service is operated by *People With Disabilities (NSW) Inc*, an independent non-government organisation funded by the Department of Family and Community Services.

You may exit at any time from the complaints process and seek assistance from an external agency (such as CRRS) to assist in the resolution of the dispute.

Please complete Section 1 of the Complaint form (which appears on the next page) and forward it to:

Document Controller
Peel Valley Training and Employment
PO Box 3718
WEST TAMWORTH NSW 2340

Alternatively, you may e-mail the form to pvte@peelvalley.com.au or fax it to our office on 6762 1600.

Please note that should you wish to make a request of a more informal or general nature you should use the *Suggestion Form* available on our website.

Should you wish to make a more specific request to improve a particular form, policy or procedure, you should use the *Improvement Request Form* also available on our website.

Thank you for taking the time to communicate your concerns to Peel Valley Training and Employment.

CLIENT COMPLAINT FORM

LOG No.



Section 1 – Complainant to Complete

1 **Date** _____

2 **Your Details**

Family Name _____ First Name _____

Address _____

Phone (home) _____ (work) _____ (mobile) _____

If applicable, name of person receiving complaint _____

3 **Are you a** (Please tick box)

Disabilities Client

Potential Client

PSP Client

Parent or Caregiver

Other

JPO Client

If applicable, do you require a guardian/advocate to assist or be present? Yes No

4 **Nature of Complaint** _____

5 **Immediate Action Taken** _____

6 Do you wish further action to be taken in relation to your complaint? Yes No

Please send this form to PO Box 3718, WEST TAMWORTH NSW 2340, or fax through on 6762 1600. A PVTE staff member will contact you within 5 working days to assist you.

Privacy Note: The information provided will be used by Peel Valley Training & Employment (PVTE) to follow up your allegation or complaint. The information may be provided to other Government and Statutory bodies who monitor services provided by PVTE or to the police for law enforcement purposes. The provision of this information is voluntary. It will be stored securely. You may correct any personal information provided at any time by contacting the Administrator at PVTE.