

Appendix 2

Consumer Liaison Service

Sample complaint report

Client: (Name, DSC File No., D.O.B. contact details)

Complainant: (Name and contact details)

Date:

(Name of complainant) raised the following issues (eg. during a home visit, a telephone conversation) on _____ with (name of complaint coordinator)

Complaint Background:

(brief description of client's circumstances and situation leading to complaint)

Complaint Issues:

(list the issues in dot point)

Solutions Sought:

(in dot point list the solutions the complainant is seeking to each of the issues listed above)

Investigation/Action Taken:

(describe the actions taken to follow up the concerns)

Outcome/Resolution:

(briefly describe the outcome of the complaint and any improvements implemented as a result)

(Name of Complaint Coordinator)

(insert date)