

COMPLAINTS, COMPLIMENTS & FEEDBACK FORM

Movement Solutions Physiotherapy is committed to providing the best possible service to our patients and carers. We value your feedback so we can improve the services we provide. Please let us know what we do well and where we can improve.

Let us know your response below:			
<input type="checkbox"/> Complaint		<input type="checkbox"/> Compliment	
		<input type="checkbox"/> Feedback	
Personal Details			
Do you wish to remain anonymous?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Name & relationship if completing on behalf of patient			
Mobile:		Email:	
Patient Name:		Patient DOB:	
Feedback Information			
Please share any feedback or concerns. Include what led to making the complaint, compliment and/or feedback, the approximate dates and who was involved?			
Have you had the chance to discuss your concerns with our Practice Manager or staff member for assistance with these concerns?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>If yes, please tell us with whom and what was the outcome?</i>			
What outcomes would you like because of providing your feedback?			
Privacy			
<p>Movement Solutions Physiotherapy is committed to protecting your privacy. We collect and handle personal information that you provide on this form for investigating and responding to your complaint, compliment and/or feedback.</p> <p>Movement Solutions Physiotherapy will only use your information in accordance with relevant privacy and other laws including NDIS Complaints Management & Resolution Rules 2018, The NDIS Code of Conduct Rules (2018) and The Privacy Act 1988. For us to provide the best possible service, we may need to register your complaint with relevant authorities. You also have the right to access your information and seek its correction under the Freedom of Information Act 1982.</p> <p>Please be advised that compliments may be used and published by Movement Solutions Physiotherapy to promote our services. No personal or identifying information will be used. If you do not want your compliment to be published, please let us know. If you choose to remain anonymous, Movement Solutions Physiotherapy may be unable to respond to your complaint, compliment and/or feedback.</p> <p>You can lodge this form via our Feedback Box at Reception, by email to our Practice Manager, Litsa Angeli, litsaa@movementsolutions.com.au or by post 246 Old Cleveland Road, Coorparoo Qld 4151.</p>			
Declaration <i>I declare the information I have provided is true and correct</i>			
Signature:		Date:	

Thank you for taking the time to provide feedback.