Have Your Say

We value your feedback and are committed to responding positively and thoughtfully, striving to be responsive, empowering and supportive in any way we can.

baptistcare.org.au/haveyoursay
The BaptistCare Feedback Process

Your feedback provides us with the opportunity to celebrate individuals who have gone above and beyond, or to identify where things may have gone wrong, to address the matter and to take positive steps to prevent such an event from happening again. To be the best we can be, we need your help – and your feedback.

Who Can Give Feedback?

Anyone! We welcome feedback from our clients, their family members and friends, as well as our employees, volunteers, visitors and support partners.

We want your feedback so that we know when we are on track, or if we need to improve our service in some way.

Any feedback you give us will be treated confidentially and we will respect your privacy. You can choose to remain anonymous if you wish, but this may limit how we can respond to your feedback.

What Happens After I Give Feedback?

Your feedback will be recorded. It will be acknowledged in person, by phone, letter or email.

We are committed to being open and honest with our customers, allowing you to feel supported and encouraged to raise concerns if something has gone wrong.

If this happens we will address any immediate needs or concerns, apologise for what has happened, provide support and explain the steps we will take to prevent it from happening again.

If we receive an anonymous complaint, we will accept it, treat it seriously and seek to address any issues raised as best as we can.

Please be aware that we may decline to respond to feedback that is frivolous or malicious.

Who Will See My Feedback?

If you pass on a suggestion, compliment or complaint we ensure the items are actioned by the appropriate member of management and that the people involved receive your feedback, unless you have requested for this not to occur.

Need Assistance?

We are also here to help if you need assistance in giving us feedback. This may include the provision of an interpreter or it may be organising a time for us to discuss your feedback face to face.

What Happens If My Feedback Is Related To A Complaint And I’m Still Not Satisfied?

If you’re unhappy with the way we have handled your feedback, you can write to the General Manager or the Chief Executive Officer at BaptistCare NSW & ACT PO Box 7626 Baulkham Hills NSW 2153.

If the matter remains unresolved you can choose to contact the relevant external agency:

**Aged Care**

**Aged Care Quality and Safety Commission**  
GPO Box 9819, in your capital city  
T 1800 951 822  
W agedcarequality.gov.au

**Older Persons Advocacy Network**  
T 1800 700 600  
W opan.com.au

**Retirement Villages, Housing**

**Office of Fair Trading NSW**  
PO Box 972, Parramatta NSW 2124  
T 13 32 20

**Aboriginal Enquiry Officer**  
T 1800 500 330  
W fairtrading.nsw.gov.au

**Access Canberra ACT (Fair Trading)**  
GPO Box 158, Canberra ACT 2601  
T 13 22 81  
W accesscanberra.act.gov.au

**Disability**

**NDIS Quality and Safeguards Commission**  
PO Box 210, Penrith NSW 2750  
T 1800 035 544  
W ndiscommission.gov.au
How Do I Give Feedback?

We’ve made it easier than ever to share your comments with us. Choose any of these options to return the Have Your Say form back to us.

- Visit baptistcare.org.au/haveyoursay and complete the form online
- Return it directly to the Manager of the Service
- Place it into your local BaptistCare feedback/suggestion box
- Send your form in the post Attention: Feedback Officer BaptistCare PO Box 7626 Baulkham Hills NSW 2153
- Speak personally to the relevant BaptistCare General Manager 1300 275 227

My feedback is a

- Compliment
- Suggestion/Comment
- Complaint
- Verbal Feedback

I am a

- Client/Resident
- Relative
- Friend
- Supporter
- Volunteer
- Visitor
- Employee
- Medical / Allied Health
- Other (indicate)

Which service or site does your feedback relate to?

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Date / / /
Please provide details about your feedback (attach further information if required)  

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If complimenting a particular employee, please note their name here and the reason for the compliment:  

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If you would like a personal response to your feedback, please indicate the method of contact:  

☐ Email  ☐ Phone  ☐ Letter  ☐ In Person  ☐ No Thanks

Name __________________________________________________________

Address __________________________________________________________________________________

Phone ______________________________________  Email ____________________________


To be completed by a BaptistCare team member

Date entered into RiskMan: ____________________________

RiskMan ID Number: ________________  Entered by: ________________