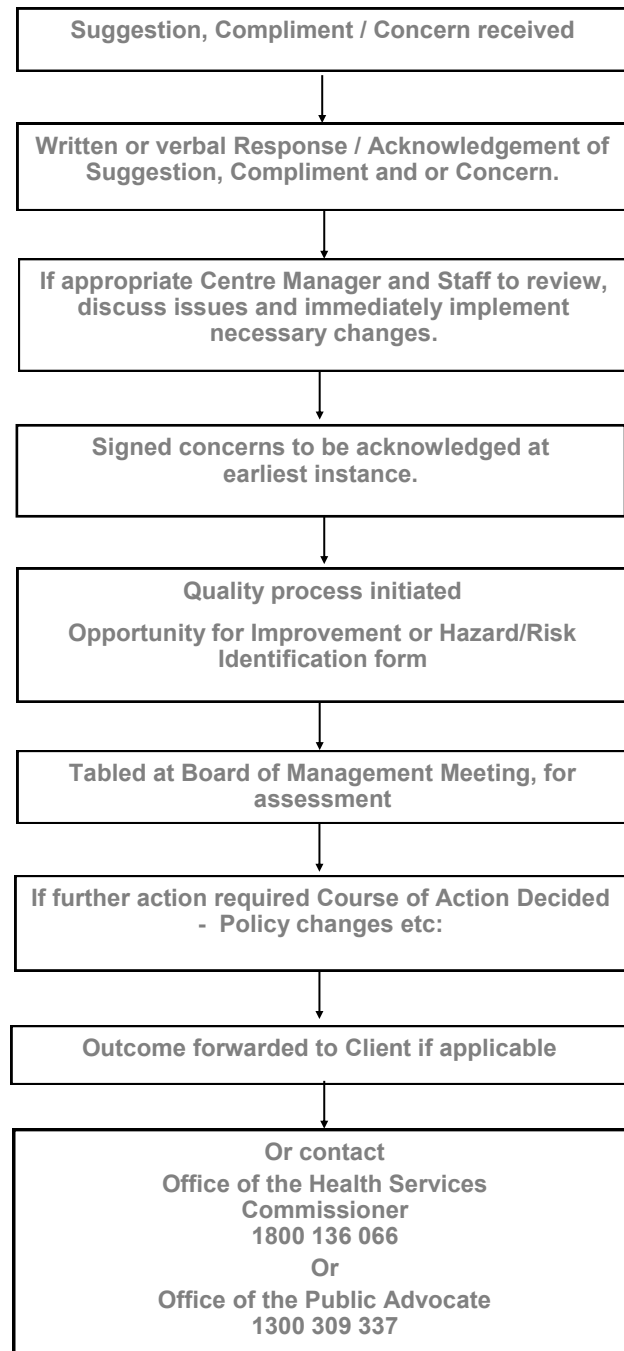


Process for Suggestions, Compliments and Concerns



Suggestions, Compliments and Concerns

Our Vision is to provide communities with services
which promote health and wellbeing.



**ELMHURST BUSH NURSING CENTRE INC.
SUGGESTIONS, COMPLIMENTS OR CONCERNS**

We value your feedback.

PLEASE share your thoughts on our service and quality of care.

Elmhurst Bush Nursing Centre is committed to providing quality care and service to our clients, visitors and community members.

To help us improve our service and assess whether we have met your expectations, we ask that you complete the section opposite.

Your assistance is appreciated and your feedback genuinely valued.

Thank you.

SUGGESTIONS, COMPLIMENT OR CONCERN

Client Visitor Staff Community member Volunteer

(Please indicate by marking the appropriate person)

Details: _____

Date of suggestion / compliment / concern:

Place of suggestion / compliment / concern:

If you have a concern, what could the improvement be?

(How do we stop it happening again?)

If you wish to remain anonymous, leave this section blank.

Name _____

Address _____

Contact Number _____

WHEN COMPLETED, this form can be:

- Placed in the suggestion box
- Handed to a Staff Member
- Mailed to Elmhurst Bush Nursing Centre

Initial acknowledgement: YES / NO

When: Who

Outcome result forwarded: YES / NO

How: Who

Outcome review process: