

# SAHSSI Complaint Factsheet

*We aim to provide an efficient and effective service at all times. However if you would like to make a complaint about the service provided, please see the complaints procedure below or ask our staff for advice. No client will be victimised or penalised for making a complaint of any kind.*

<p><b>How to make a complaint</b></p>	<ul style="list-style-type: none"> <li>• Wherever possible, complaints are best resolved informally by the people involved (e.g. if your complaint is about another client then talk to your case manager or tenancy manager)</li> <li>• If you have any concerns about confidentiality you can discuss this with the person who is handling the complaint or ask to talk directly to the CEO</li> <li>• If you have a complaint regarding a staff member, please refer directly to our CEO in the first instance</li> </ul>
<p><b>Ways to lodge a complaint</b></p>	<p>You can lodge your complaint verbally or in writing. The Client Complaint Form on the back of this page will guide you with the detail that is required to lodge a complaint. Once you have gathered your information you can;</p> <p><b>Phone:</b> SAHSSI Head Office on (02) 4229 8523 to talk directly with a staff member involved or request to speak with our CEO (between 9.00 am and 5.00 pm, Monday to Friday).</p> <p><b>Fax:</b> SAHSSI Head Office at (02) 4226 3958</p> <p><b>Email:</b> <a href="mailto:complaints@sahssi.org.au">complaints@sahssi.org.au</a></p> <p><b>Online Form:</b> <a href="http://www.sahssi.org.au/complaints">www.sahssi.org.au/complaints</a></p> <p><b>Post:</b> Attention SAHSSI CEO, PO Box 1178, WOLLONGONG DC, NSW, 2500</p>
<p><b>Your rights under the complaints process</b></p>	<ul style="list-style-type: none"> <li>• You <b>can</b> seek assistance to make your complaint (either from our staff, or an external advocate or support person)</li> <li>• You <b>can</b> request assistance from an interpreter</li> <li>• You <b>can</b> expect the handling of your complaint to be conducted in a professional, efficient and fair manner</li> </ul>
<p><b>How SAHSSI will deal with the complaint</b></p>	<ul style="list-style-type: none"> <li>• <b>Process:</b> we will ensure your complaint is <b>acknowledged</b> within <b>14 days</b>.</li> <li>• <b>Investigate:</b> including keeping you informed of our progress</li> <li>• <b>Resolve:</b> in a prompt manner, usually not more than <b>28 days</b>, giving you reasons for our decisions</li> </ul>
<p><b>If you are not happy with the outcome of the complaint</b></p>	<ul style="list-style-type: none"> <li>• If you are not satisfied with your complaint outcome or if you would prefer to lodge your complaint directly with the board of SAHSSI, you can attention your complaint (marked <b>Private and Confidential</b>) to; Chairperson, SAHSSI Management Committee, PO Box 1178, WOLLONGONG DC, NSW, 2500</li> <li>• If you don't feel comfortable speaking or writing to us again about your complaint, you or a friend or support person can contact the NSW Ombudsman. The Ombudsman is an independent watchdog whose job it is to protect the rights of people using or accessing community service providers. You can discuss your complaint with them:             <ul style="list-style-type: none"> <li>- <b>NSW Ombudsman:</b> 1800 451 524 or 02 9286 1000 <a href="mailto:nswombo@ombo.nsw.gov.au">nswombo@ombo.nsw.gov.au</a> or <a href="http://www.ombo.nsw.gov.au">www.ombo.nsw.gov.au</a></li> <li>- <b>Registrar of Community Housing:</b> 1800 033 940</li> </ul> </li> </ul>

# SAHSSI Complaint Form

Date:

<b>Your details (client lodging the complaint):</b>	Full name:	
	Contact address:	
	Contact phone number:	
	Alternative contact number:	Email:
<b>Details of the complaint:</b>	Does your complaint relate to a specific incident: Yes / No	
	If applicable, what was the date of the incident: / /	
	Please provide details of complaint below:	
	<i>HELPFUL NOTE: Please attach any relevant supporting evidence</i>	
<b>Steps taken to try to resolve the complaint:</b>		
<b>Suggestion(s) for complaint resolution:</b>		

<b>Client signature:</b>		<b>Date:</b>	
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<b>Optional information</b> (if somebody such as a support person or advocate has been assisting you with this form, details can be provided here):			
<b>Support / advocate Name:</b>		<b>Ph:</b>	
<b>Support / advocate Signature:</b>		<b>Date:</b>	