COMPLAINTS



Move & Grow Physiotherapy seek to resolve any dissatisfaction and complaints as quickly as possible whilst ensuring that the complaint is taken seriously and handled appropriately. How we respond to the receipt of a complaint is just as important as whether it is resolved. We aim to address each complaint in accordance with our values and privacy policy and in an equitable, objective and unbiased manner.

Complaints can be made in person, by email (to info@moveandgrowphysio.com.au) or by submitting the following form. We accept anonymous complaints and will carry out an investigation where there is enough information provided.

Upon receipt of a complaint, we will inform the complainant as soon as possible of the following:

- the complaints process;
- expected timeframes for our actions;
- progress of the complaint and reasons for any delay;
- their likely involvement in the process; and
- the possible or likely outcome of their complaint.

We will ensure that the person handling a complaint is different from any person whose conduct or service is being complained about. Where a complaint is made about management, we encourage complainants to feel comfortable in raising it with management who will engage external resources to manage the complaint in accordance with our complaints management process. If, however, a worker or complainant does not feel comfortable in doing so, contact the Australian Physiotherapy Association for further advice (of whom Move & Grow Physiotherapy is a member) or, where a complaint is from or on behalf of a participant of the NDIS, contact the NDIS Commission.

Should be we unable to deal with any part of the complaint, we will advise the complainant as soon as possible and provide advice about where such issues and/or complaints may be directed (if known and appropriate).

PRIVACY NOTICE

We will use the information collected on this form to resolve your complaint and access will only be provided to authorised representatives of Move & Grow Physiotherapy as required to adequately investigate your complaint.

PERSONAL DETAILS						
Title	MR	MRS	MS	MISS	OTHER	
Family Name				Given Name		
CONTACT DETAILS						
Residential Address						
Mailing Address (if different to residential address)						
Preferred Contact Number						
Email						
Preferred Contact Method	Phone			Email		Letter
COMPLAINT DETAILS						
Have you lodged a complaint about this issue before?		□ Yes		If yes, when:		
Have you lodged your complaint to any other agency?		□ Yes		If yes, to whom:		
COMPLAINT SUMMARY						
Employees or other persons engaged by Move & Grow Physiotherapy to provide services to patients are also required to declare all outside employment, external committee, board memberships, directorships, volunteering or other positions with any public or private organisation that may give rise to an actual, perceived or potential conflict of interest						
When it happened						
Where it happened						
Who was involved						

What happened	
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consider needs to be	
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taken to satisfactorily resolve this complaint?	<u> </u>
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MOVE & GROW PHYSIOTHERAPY USE				
Date Complaint Received	Complaint Received By			
Action Assigned To	Logged in Feedback & Complaints Register			
Acknowledgement of Complaint Received Issued (if complaint not anonymous)	Complaint Resolved			