

# West Gippsland Healthcare Group likes to get your feedback

Please tell us if you have had a good experience or if you would like to complain about anything.

You don't have to write it down.

You can...

- Talk to any of our staff
- Send us an email
- Use our online form at [www.wghg.com.au](http://www.wghg.com.au)

## Our contact details

WGHG Feedback Line: 5623 0615

Email: [feedback@wghg.com.au](mailto:feedback@wghg.com.au)

Website: [www.wghg.com.au](http://www.wghg.com.au)

Address:

West Gippsland Healthcare Group  
Feedback Team

41 Landsborough Street  
WARRAGUL VIC 3820



## Who else can you talk to?

The Health Complaints Commissioner:  
Call 1300 582 113

Kids Helpline:  
Call 1800 55 1800 or email:  
[counsellor@kidshelpline.com.au](mailto:counsellor@kidshelpline.com.au)

Headspace:  
Go to the website [headspace.org.au](http://headspace.org.au)

Information about Children's Rights:  
Go to the website:  
[childsafef.humanrights.gov.au](http://childsafef.humanrights.gov.au)

Advice for parents:  
Go to the website: [parentline.com.au](http://parentline.com.au)

Help for non-English speaking people:  
Go to the website: [tisonational.gov.au](http://tisonational.gov.au)



WEST GIPPSLAND  
HEALTHCARE GROUP  
*Caring for our Community*

## Children's and Young Person's Feedback Form

Your feedback helps us make our  
service better and keep children  
and young people safe



# Your contact details

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Do your parents/carers know about the feedback you are giving?

They don't have to.

(please tick)

Yes

No

How would you like us to contact you?

(please tick)

Email

Phone

Letter

All feedback is confidential and helps us provide a safe place for children and young people

Patient Label

WGHG Staff Only (if completing for a consumer)

# What is your feedback?



\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

You can give this form to a staff member or email it to: [feedback@wghg.com.au](mailto:feedback@wghg.com.au)