



Opportunity for Improvement (OFI)

"Strictly Private & Confidential"

Form No.....

New Aged Care considers your feedback as vital for our continuing to provide excellent services and the further growth and development of the organisation. We consider comments and complaints from consumers, visitors, staff and others as an opportunity to improve and grow these services and welcome your feedback using this form. This form also provides you with the opportunity make suggestions for a solution to any issues.

Are you? A client of NAC? ☐ Yes ☐ No
☐ Visitor ☐ Family / Advocate ☐ Staff ☐ Board Member ☐ Other

Name Date:/...../.....
(Optional - however if you would like feedback please complete)

Phone Address / Email.....

Are you making a?
☐ Complaint ☐ Comment ☐ Suggestion ☐ I have a new idea

Please give us your feedback:

Please tells us how we can improve the situation or how we can assist you with your new idea:

How would you like us to respond to you: ☐ Phone Call ☐ Letter ☐ Email

Manager/delegate to complete

RESPONSIBILTiy for addressing the OFI Form:

☐ B of D ☐ MD ☐ DCS ☐ Home Care Manager ☐ Team Leader ☐ Other

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