Victims Services Department of Communities and Justice



Victims Services Service complaints form

You can use this form to provide feedback about:

- The services provided by Victims Services
- Victims Services Approved Counsellors.

Please note if you're making a complaint about an Approved Counsellor, Victims Services is unable to investigate complaints of a clinical nature.

Complaints of a criminal nature will be referred to NSW Police and other relevant reporting agencies.

We view your feedback as an opportunity to improve our practices and service delivery. We review all complaints and aim to resolve complaints promptly and effectively.

Privacy notice

- 1. Your information is being collected and held by Victims Services so that Victims Services can take steps to resolve your complaint, including investigating and following up on your complaint.
- 2. You may access or amend the information you provide to Victims Services at any time.
- 3. Your information and identity may be disclosed to the person about whom the complaint is being made, to enable a fair investigation and appropriate outcome.
- 4. Your information and identity may be disclosed to professional standards bodies such as the Health Care Complaints Commission, or the NSW Police for investigation.
- 5. Your information and identity may be disclosed if required by law or legal process, such as subpoena or warrant.
- 6. You are not obligated by law to provide the details requested, however if you do not provide complete and accurate details then it will not be possible to keep you up to date about the complaint. It will also not be possible to investigate the complaint, as our investigation procedure requires that both parties be given a fair opportunity to respond, and have the necessary information to do so.

Your details

| Victims Services Ref No. | | |
|---|-------|----------------------|
| Title | | Full name |
| Address | | |
| Contacts | Phone | Mobile |
| | Email | |
| Do you require an interpreter or have any special communication requirements? | | |
| | No | Yes 🕨 please specify |

Details of the person lodging this feedback on your behalf

If this complaint is being submitted on your behalf, please ensure you complete the *Victims Services Client Consent Form* for a Complaint. Complaints will not be accepted if lodged on behalf of the complainant without this form completed (including if the Victims Services Authorised Representative is lodging the complaint).

| Title | | Full name | |
|--|-------|-----------|--|
| Address | | | |
| Contacts | Phone | Mobile | |
| | Email | | |
| Reason for acting on behalf of the complainant | | | |

Details of the complaint

My complaint is about:

Victims Services

Approved Counsellor > insert name of counsellor

Please describe your concerns, what happened, dates, who was involved and any other relevant information to support your complaint. This could include any correspondence with counsellors.

Outcome you are seeking

Please note that Victims Services are unable to expedite claims. Victims Services will not advise of any disciplinary action taken against Victims Services staff or Approved Counsellors due to confidentiality.

Declaration

| I , consei | nt to Victims Services investigating the conc | erns raised in my complaint. |
|---|---|------------------------------|
| I declare that: | | |
| The information provided is true and correct | | |
| I consent to the information provided in this c investigating this complaint. | omplaint to be released to the named respo | ndent for the purpose of |
| | | |
| Name | Signature | Date (dd/mm/yyyy) |

Complaint')

Completed forms can be sent with any other relevant documents to:

| Mail: | The Commissioner of Victims Rights |
|--------|---|
| | Victims Services |
| | Locked Bag 5118 |
| | Parramatta 2124 NSW |
| Email: | vs@justice.nsw.gov.au (please mark the subject of your email to 'Service |
| Phone: | Victims Access Line on 1800 633 063 |

Website: www.victimsservices.justice.nsw.gov.au