

A Complaints form is to be used by members to document serious or important complaints they have regarding any aspect of service or management or issue of which the Board should be aware including Occupational Health and Safety matters.

The Board won't mediate personal squabbles. Members are expected to behave properly and sort out their own problems and relationships in a responsible and positive way.

If behaviour contravenes that which is expected under the Articles of Association, then the Board has powers under those Articles to deal appropriately with offenders and will do so if no other reasonable solution is found.

How to Lodge a Complaint.

1. Fill out the sections as succinctly and clearly as possible. Use the back of the form if necessary.
2. Place completed complaint in an envelope marked "confidential" and "personal"
3. Address it to the Secretary or Chairperson of the Board.

What will happen when my complaint is received ?

The secretary or person delegated by the Chairperson shall open the letter in the first instance and table it at the next regular Board Meeting Scheduled unless:

- The nature of the complaint is so urgent or serious that it needs to be dealt with more quickly. In this case, at least 3 directors must be made aware of the nature of the complaint and can deal with it then and there as the situation requires or arrange an urgent meeting if necessary.
- The matter is deferred after tabling to a more suitable time.
- The same person is the subject of the complaint in which case it should be addressed to another Board member.

NOTE:

Members or witnesses involved in any complaint may be invited to attend a meeting to determine issues.

The Board will allocate a priority rating to complaints and deal with each accordingly.

All complaints must be authentic and signed.

The Secretary.

NO.

Name of Person/s Filing This Complaint (“The Complainant”).....

Contact Details of The Complainant (Phone, email, Address)

Date This Form Filled Out

Date This Complaint Submitted

Place Where Incident Occurred

Date/s and Time/s of Incident

Background to the Complaint / Details of Complaint. (A brief and relevant summary)
(Please attach any supportive evidence or documentation / statements)

Specific Issue/s Arising From Complaint (Use back of form if necessary)

What actions do you feel should be taken re this issue ?

How can similar situations / problems be avoided ?

Office Use Only.	Date Received:	Received By:	Date of Meeting
	Date Resolved:	Date Deferred To:	Outcome: