

Kerry's Place Complaint/Feedback Form

Pursuant to SS 511 Policy on Complaints/Feedback Process, Kerry's Place recognizes the right of each individual/family to provide their feedback in regards to decisions and actions carried out by our organization. Kerry's Place encourages individuals/families to bring their questions and concerns forward so that they may be dealt with positively and appropriately.

"Complaint" is an expression of dissatisfaction related to the services and/or supports that are provided by a service agency. A complaint may be expressed by a person receiving services and supports from the service agency, or a person acting on their behalf, or by the general public, regarding the services and supports that are provided by the service agency.

"Feedback" may be positive or negative (including complaints) and is related to the services and/or supports that are provided by a service agency.

1. What is your reason for contacting Kerry's Place? (Mark only one box)

I have a complaint

I would like to provide feedback

2. First name:

3. Last name:

4. Mailing address:

5. Telephone number:

6. Email address:

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7. What is your association to Kerry's Place? (Mark only one box)

- Parent/legal guardian to a person supported by Kerry's Place
- Supported person receiving support and services by Kerry's Place
- Substitute Decision Maker (if other than a family member)
- Advocate for the supported person (other than a family member)
- Partner agency
- Ministry
- Kerry's Place employee
- Volunteer
- Member of the general public (no association)

8. Preferred method of contact? (Mark only one oval)

- Phone
- Email
- Letter

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9. Please select the type of complaint/feedback to be addressed by Kerry's Place?
(Mark only one box)

- Complaint/feedback about policy or practice at Kerry's Place
- Complaint/feedback about quality of service provided to person(s) supported by Kerry's Place
- Complaint/feedback about due process on behalf of person(s) supported by Kerry's Place
- Complaint/feedback about conduct of Kerry's Place employee(s)
- Complaint/feedback about refusal of service/level of service
- Other:

10. Please describe the nature of the complaint/feedback.

11. When did this take place?

12. Have you contacted a Kerry's Place representative to respond to your complaint/feedback?
(Mark only one box)

- Yes
- No

13. If yes, who did you contact and when?

14. Has there been an attempt to address your complaint/feedback?



Kerry's Place Complaint/Feedback Form

Please return this completed form either by mail or in person to Kerry's Place Autism Services at 34 Berczy Street, Suite 190 Aurora Ontario L4G 1W9 or via email at feedback@kerrysplace.org.

All feedback and complaints whether provided verbally or in writing will be recorded and tracked within the appropriate database.