



Supported Living Easy Read Complaints Form

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|  | If you wish, you can have someone help you complete this form. If you do, please put their name here: |

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| --- | --- | --- | --- | --- |
| |  |  | | --- | --- | |  | Your name: |  |  |  | | --- | --- | |  | The date and time that it happened: | |

|  |  |
| --- | --- |
|  | Please let us know what happened: |

|  |  |
| --- | --- |
|  | How did it make you feel? |

|  |  |
| --- | --- |
|  | What would you like to happen now? |

What now?

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| --- | --- | --- |
| You can return this form by…. | | |
|  |  |  |
| You can hand the form to any member of staff or management | You can email it to johngabell@oasiscareservices.org | You can post it to:  667 London Road,  Hadleigh,  Essex, SS7 2EE |

What Happens Next?

|  |  |
| --- | --- |
|  | The manager will let you know they have read the complaint within 3 days |
|  | The manager will look into your worries. They will look at any recordings and will speak to you and anyone else involved |
|  | We aim to give you a response to your worries within 28 days |