

## Stakeholder feedback form

Thank you for taking time to provide feedback.

The Get Healthy Service values the feedback for service and quality improvement.

All feedback is submitted to Clinical governance and outcome (including further actions) will be provided to you once an investigation has been carried out. Please attach any supporting documentation to this form upon submission.

Please direct all feedback enquires to <u>NSWH-GetHealthyServiceFeedback@health.nsw.gov.au</u>

## Your details (to be completed by Stakeholder)

Name	
Title	
Employer	
Component of the Get Healthy Service	
feedback relates to	
(e.g. GHiP, Aboriginal, calls, coaching)	

## Feedback for investigation (to be completed by Stakeholder)

Please provide <b>participants</b> details for a minimum of 3 of the following:		
rease provide participants details for a minimum of 5 of the following.		
Name		
DOB		
Postcode		
Phone number		
Address		
Referrer name (if known/relevant)		
Referrer Occupation (if known/relevant)		
Please provide details of the feedback including dates and times if known		
(Please attached any supporting documentation to the submission for investigation)		
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Please return completed forms to: <u>NSWH-GetHelathyServiceFeedback@health.nsw.gov.au</u>