# Complaint made by an external person to a youth detention centre (COM2)

Youth Justice is committed to providing high quality services to clients. Please tell us if you are unhappy with the service provided by a youth detention centre. Your complaints and feedback help us to improve our quality of service.

Give us as much information as possible so that we can address your complaint or feedback.

Please tell a staff member if you would like help to make a complaint. We can:

* arrange an interpreter
* provide help for the hearing impaired
* tell you where to find more information.

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| **Details of person making the complaint** | | | |
| Name |  | | |
| Address |  | | |
| Telephone number |  | Mobile number |  |
| Email address |  | | |
| I prefer to be contacted by | ⬜ phone ⬜ mail ⬜ email | | |
| Name of young person |  | | |
| Youth detention centre | ⬜ Brisbane Youth Detention Centre ⬜ Cleveland Youth Detention Centre  ⬜ West Moreton Youth Detention Centre | | |
| Relationship to young person |  | | |

|  |  |
| --- | --- |
| **Details of the complaint** | |
| Who is the complaint against? | If you know the name of the young person, staff member, police or other person, tell us. |
| What are the details of the complaint or concern? | Please write everything relevant to the issue, in the order that it happened. Include a description of what happened, dates, names of people involved, phone calls, letters and meetings. Attach extra pages if needed. |
| What would you like to see happen? | What is the outcome you want or the action you would like us to take? Attach extra pages if needed. |

**Signature Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| --- | --- |
| Details of staff member who gave you the form or helped you to complete it | Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date and time complaint received by manager, client relations | / / \_\_\_\_\_\_\_\_am/pm |

## Privacy notice

The department is collecting the information on this form to manage your complaint under s277 of the *Youth Justice Act 1992*. Your personal information may be disclosed to other agencies or third parties for example your parent/carer, child safety service centre, Office of the Public Guardian and others, for the purpose of responding to or managing your complaint or for evaluation purposes. Your personal information will be handled in accordance with the *Information Privacy Act 2009*.

## Filing instructions

1. Original to be forwarded to the manager or advisor, client relations for filing with the forms about the original complaint.