



Complaints form about registered supporters

If you have a complaint or concern about a registered supporter, you can raise this with the System Governor, responsible for supporters. Complaints can be made about a current or former registered supporter at any time, by anyone.

You may wish to review the [resource library for registered supporters](#) for information on complaints about registered supporters and what the System Governor can, and cannot do, under the Act.

This form is a template that you may wish to use to submit a complaint about a registered supporter. It is **not mandatory** to use this template. You may instead wish to provide information directly in the [online form](#) available on the department's webpage for [registered supporters in aged care](#).

Do not use this form to submit:

- complaints about My Aged Care
- complaints about a topic other than registered supporters, or
- requests for the internal review of a decision made by the System Governor. This includes requests to review assessment decisions or decisions by the System Governor about a registered supporter relationship.

You can find information about pathways for these matters on [My Aged Care](#).

How to submit this form

After completing Parts A and B, submit this form to the System Governor responsible for supporters:

- directly, by uploading it as an attachment in the online form on the department's webpage for registered supporters in aged care at: <https://www.health.gov.au/our-work/aged-care-act/about/registered-supporters-in-aged-care>
- via My Aged Care, by mailing it to:

My Aged Care
PO Box 1237
Runaway Bay, Queensland, 4216

Next Steps

Once a complaint has been raised with the System Governor responsible for registered supporters, the System Governor will consider whether the information provided justifies the suspension of a registered supporter under the Act. The System Governor may also consider whether the information should be disclosed to another person, body or authority, and/or whether a registered supporter has committed an offence under the Act. If further information is required, you may be contacted.

Privacy

Information you provide in this form may be collected by My Aged Care, the Department of Health, Disability and Ageing, and the System Governor to assist the System Governor to perform functions related to the regulation of registered supporters under the Act. Please read the [privacy notice](#) for complaints and submissions related to registered supporters for more information about how this information is handled.

Part A: Aged Care Client and Registered Supporter's Details

You may wish to remain anonymous. However, we may not be able to contact you or address this complaint. If you have an Aged Care ID and do not provide it, we may not be able to look into this matter completely.

Your Details	Other Person's Details
Last name:	Last name:
First name:	First name:
Date of birth:	Date of birth:
Aged Care (AC) ID (if known):	Aged Care (AC) ID (if known):

Part B - Complaint Details

Please provide details below.
