



LT CARE

LEARNING TOGETHER

COMMUNICATE ADVANCE RESOLVE EVALUATE

In striving to continuously improve our services and provide the highest level of care, your feedback is very important! If you have feedback you wish to share with us, please tell us directly or use this form to share your compliments, suggestions, or concerns.

What type of feedback are you submitting? (Please check one):

Compliment Suggestion Concern

Person Submitting Feedback: _____

Contact Phone Number or email: _____

Date of Feedback: _____

Resident's Name and location (if applicable): _____

I wish to make the following compliment, suggestion, or concern:

Thank you for taking time to let us know what you think! Completed forms can be submitted to any member of our management team, registered staff, the main office, or the suggestion box located in your facility. This form is also available for residents and families on the County's website at Simcoe.ca/dpt/ltc and for staff on the LTCSS section of the Simcoe County intranet.