

Disability

Do you consider yourself to be disabled?

Yes No

If yes, could you specify the impairment _____
(optional)

Ethnic Monitoring

a) **White British**

- English N Irish
- Welsh Scottish
- Roma Gypsy Irish
- Irish traveller

b) **Mixed or Mixed British**

- White and Black Caribbean
- White and Black African
- White and Asian

c) **Asian or Asian British**

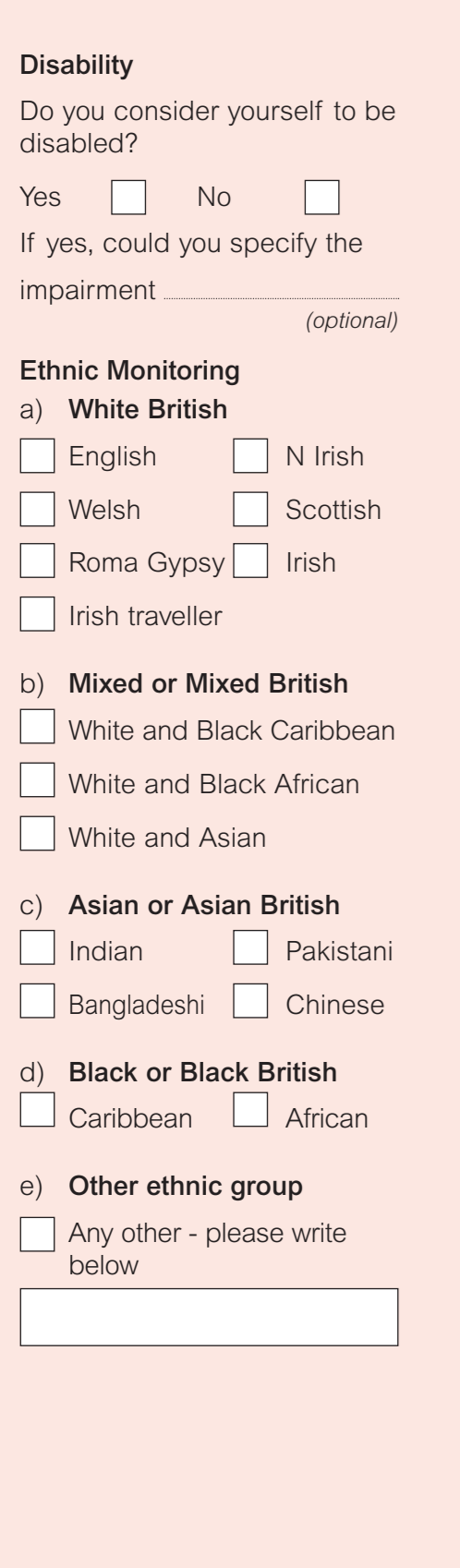
- Indian Pakistani
- Bangladeshi Chinese

d) **Black or Black British**

- Caribbean African

e) **Other ethnic group**

- Any other - please write below



Business Reply Plus
Licence Number
RRYJ-RCZZ-KSCA



Confidential
Complaints Officer
People's Services
Atlas House
Corporation Street
St. Helens
WA9 1LD



St. Helens Council

Contact Centre

Wesley House
Corporation Street
St. Helens
WA10 1HF

Tel: 01744 676789
Minicom: 01744 671671
→ www.sthelens.gov.uk/contactus

Please contact us to request translation of Council information into Braille, audio tape or a foreign language.

This leaflet was reviewed in May 2017.



Are we getting it right in Children's Services?

Children's Services Complaints



Are we getting it right in Children's Services?

Comments

St.Helens Council is committed to providing the best possible standards of service. You can help us to do this by telling us if we are getting it right. Comments, good and bad, will be welcomed and will help us to know how to change things for the better.

Compliments and Complaints

We welcome and value any compliments and complaints you have regarding the services we provide. Please use the form at the back of this leaflet to record your views, and return it to us.

Comment, Compliment and Complaint Form

Please use this form to tell us what you think about our services. Any information you give us will be processed in accordance with the requirements of the Data Protection Act 1998. It will be treated as confidential and only used to respond to your comments, and to help us to improve future service delivery.

Please tick one box to tell us what kind of feedback you are giving us:

Comment Compliment Complaint

Name of the Service to which your feedback relates:

Details of your comment, compliment or complaint:

What action would you like us to take?

Your name

Your address

Postcode

Your telephone number

Your email address

Today's date

How would you like us to contact you in relation to your comments?

Thank you for taking the time to contact us. Please detach this form from the rest of the leaflet and post it back to us.

Service Equality Monitoring Form

St.Helens Council is committed to providing high quality services that are available to everyone. We want to ensure that nobody is treated better or worse because of his or her age, gender, disability or race.

One way that we can make sure we are doing this well is to monitor the details of the people who contact us. This information will be used to help us improve access to our services, will be held in the strictest confidence, and will not be shared with the person to whom your feedback is passed.

Please tick one box in each section:

Gender

Male Female

Age

0-16 17-24

25-34 35-44

45-54 55-64

65-74 75-84

85+