We encourage you to take the following steps:

- 1. It's best to discuss the situation with the employee concerned. He will do its best to respond appropriately.
- 2. If you remain dissatisfied, you can ask a CSCE employee for the contact details of the employee's manager.
- 3. If you remain dissatisfied and wish to file a complaint, you may do so.

How to lodge a complaint:

- Verbally, by contacting Executive Director at 613-937-2683.
- In writing, by completing the complaint form on the reverse.
- Online, by completing the electronic form available on the website at www.cscestrie.on.ca/en/client-rightsand-responsibilities/

Who can file a complaint?

- Any client of the Centre de santé communautaire de l'Estrie.
- A client's representative.

Our Centres

 ALEXANDRIA
 BOURGET

 5, Main Sud
 2081, Laval

 613 525-5544
 613 487-1802

CORNWALL CRYSLER
841, Sydney 1, Nation
613 937-2683 613 987-2683

EMBRUN LIMOGES649, Notre-Dame 601, Limoges
613 443-3888 613 557-2210

www.cscestrie.on.ca info@cscestrie.on.ca

Assistance available:

You can receive assistance in filing your complaint.

Winter 2024



WHAT CAN I DO IF I'M NOT SATISFIED?



If your rights have not been respected or you are dissatisfied with the services you have received at CSCE, you can file a complaint.

Please indicate what you expect as a result following the handling of your complaint. Phone number: Email: Is the user aware of the complaint? Yes No Event Details Date of the event: Time of the event: Location of the event: Name of the employee Signature of the author of the complaint	Client's information		Describe the facts that prompted you to file a	complaint.
Phone number: Email: Information from the author of the complaint (if other than the client) First name: Family name: Phone number: Email: Is the user aware of the complaint? Yes No Event Details Date of the event: Time of the event: Location of the event: Name of the employee involved (if applicable): Have you spoken to the employee involved about Yes No your dissatisfaction? Please indicate what you expect as a result following the handling of your complaint. Client's signature: Date: Signature of the author of the complaint (if other than the client): Date received of the	First name:			
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