

Charter of Victims Rights complaint form

Victims Rights Act 1996



Victims Services
Attorney General & Justice

You have a right to make a complaint if you believe that any NSW department, or any person (excluding private legal officers and medical practitioners) or non-government agency funded by the State to provide services to victims of crime has not acted in accordance with the Charter of Victims Rights.

The first step is to contact the agency directly unless you do not feel comfortable doing so. If you are not sure that your complaint relates to a Charter issue, there is a copy of the Charter of Victims Rights on the back page of this document.

Privacy Notice: Victims Services is collecting the information that you provide on this form for the purpose of investigating complaints in relation to the Charter of Victims Rights. The details of your complaint will only be disclosed to the agency or contractor that you are making the complaint against with your consent. If you do not consent, we can note your concerns, but will not take any action. Victims Services will collate non-identifying data arising from this complaint to use for reporting and identifying trends.

Please note that the questions on the form are optional and you are not required to answer questions that make you feel uncomfortable or are not applicable to you.

PART 1: Details of the person making the complaint

Name

Title First/given Family

Gender

Female Male

Date of birth

(dd/mm/yyyy)

Address

Postcode

Contact details

Phone Mobile

Email

Please list any disabilities or special needs

Are you of Aboriginal or Torres Strait Islander origin? (For statistical and planning purposes)

No Yes, Aboriginal Yes, Torres Strait Islander

PART 2: Details of the person* applying on behalf of the complainant#

(*the representative; #the person making the complaint)

Name

Title First/given Family

Your relationship to the complainant

Reason/s for acting on behalf of the complainant

Contact details

Phone Mobile

Email

PART 3: Details about your complaint

What is the name of the agency or service provider that the complaint is against?

Have you complained to the agency or service provider directly? *(Please mark the appropriate box)*

No ► *Please provide reasons why you have been unable to contact the agency in the first instance:*

Yes ► *When did you contact the agency or service provider and what action was taken?*

Please indicate which Right/s in the Charter that you consider complaint applies to

(A full version of the Charter of Victims Rights is on the back page of this form)

- Courtesy, compassion and respect
- Information about services and remedies
- Access to services, if you need medical, counselling and legal help
- Information about investigation of the crime, if you ask
- Information about prosecution of the accused (taking the offender to court)
- Information about trial process and role as witness
- Protection from contact with accused during court
- Protection of identity of victim, unless the court says otherwise
- Attendance at preliminary hearings, unless the court says you must attend
- Return of property of victim held by State, if it is used as evidence
- Protection when the offender applies for bail
- Information about special bail conditions, to protect you and your family
- Information about outcome of bail applications, if you were a victim of serious assault
- Being given information and assistance to prepare a victim impact statement, when relevant
- Information about impending release, escape or eligibility for absence from custody
- Submissions on parole and eligibility for absence from custody of serious offenders
- Apply for victims compensation, for victims of serious personal violence offences
- Information about complaint procedures

Please outline what your complaint is about

What action would you like to see happen in response to your complaint?

PART 4: Information about the crime

The following questions refer to information about the crime; you only need to answer the questions if you feel comfortable doing so.

What was the crime(s) that occurred? *Please mark the appropriate box as it relates to your complaint.*

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Theft | <input type="checkbox"/> Theft with assault | <input type="checkbox"/> Car theft | <input type="checkbox"/> Indecent assault |
| <input type="checkbox"/> Sexual assault | <input type="checkbox"/> Assault | <input type="checkbox"/> Homicide | <input type="checkbox"/> Fraud |
| <input type="checkbox"/> Damage to property | <input type="checkbox"/> Stalking/harassment | <input type="checkbox"/> Domestic violence | |
| <input type="checkbox"/> Other ► <i>Please provide details</i> | <input type="text"/> | | |

When did the crime(s) occur?

(a) (dd/mm/yyyy)

or, (b) over a period of time - from to (dd/mm/yyyy)

Where (what town, suburb and State) did the crime(s) take place?

What is the stage of the case? *Please mark the appropriate box.*

- | | | | |
|--|--|-------------------------------------|--|
| <input type="checkbox"/> Report to police | <input type="checkbox"/> Investigation | <input type="checkbox"/> Arrest | <input type="checkbox"/> Arraignment/Committal |
| <input type="checkbox"/> Guilty plea | <input type="checkbox"/> Trial | <input type="checkbox"/> Sentencing | <input type="checkbox"/> Parole hearing |
| <input type="checkbox"/> Other ► <i>Please provide details</i> | <input type="text"/> | | |

The COPS Event number *(The police E reference number for your matter)*

Please tick if you agree with the following and sign.

- I declare that the information provided is true and correct.
- I consent to the information provided to be released for the purpose of investigating this complaint.

(Note: If consent is not provided, Victims Services can note your concerns but is unable to take any action)

*Please note that your signed consent may be required in some circumstances.
If so, Victims Services will let you know and ask you to sign and return a paper form.*

Applicant's signature

*Signature of parent or representative
(if applicable)*

Date (dd/mm/yyyy)

You can post this form, with a photocopy of any relevant documents to:

Mail: Director
Victims Services
Locked Bag 5118
Parramatta 2124 NSW

or **Email:** vs@agd.nsw.gov.au
(please mark the subject of your email to 'Charter Complaint')

or **Fax:** (02) 8688 9631
Attention: Charter Coordinator

Thank you for contacting Victims Services. Your complaint will be recorded and we will be in contact with you shortly. We will do our best to resolve the problem within 30 days, however depending on the type of complaint, it may take a longer period of time.

For more information about making a complaint, please see the information sheet *Making a complaint under the Charter of Victims Rights* available on www.lawlink.nsw.gov.au/vs or by contacting the [Victims Access Line](http://www.lawlink.nsw.gov.au/vs) on 1800 633 063.

Charter of Victims Rights (*Victims Rights Act 1996*)

1 Courtesy, compassion and respect

A victim will be treated with courtesy, compassion, cultural sensitivity and respect for the victim's rights and dignity.

2 Information about services and remedies

A victim will be informed at the earliest practical opportunity, by relevant agencies and officials, of the services and remedies available to the victim.

3 Access to services

A victim will have access where necessary to available welfare, health, counselling and legal assistance responsive to the victim's needs.

4 Information about investigation of the crime

A victim will, on request, be informed of the progress of the investigation of the crime, unless the disclosure might jeopardise the investigation. In that case, the victim will be informed accordingly.

5 Information about prosecution of accused

- (1) A victim will be informed in a timely manner of the following:
 - (a) the charges laid against the accused or the reasons for not laying charges,
 - (b) any decision of the prosecution to modify or not to proceed with charges laid against the accused, including any decision to accept a plea of guilty by the accused to a less serious charge in return for a full discharge with respect to the other charges,
 - (c) the date and place of hearing of any charge laid against the accused,
 - (d) the outcome of the criminal proceedings against the accused (including proceedings on appeal) and the sentence (if any) imposed.
- (2) A victim will be consulted before a decision referred to in paragraph (b) above is taken if the accused has been charged with a serious crime that involves sexual violence or that results in actual bodily harm or psychological or psychiatric harm to the victim, unless:
 - (a) the victim has indicated that he or she does not wish to be so consulted, or
 - (b) the whereabouts of the victim cannot be ascertained after reasonable inquiry.

6 Information about trial process and role as witness

A victim who is a witness in the trial for the crime will be informed about the trial process and the role of the victim as a witness in the prosecution of the accused.

7 Protection from contact with accused

A victim will be protected from unnecessary contact with the accused and defence witnesses during the course of court proceedings.

8 Protection of identity of victim

A victim's residential address and telephone number will not be disclosed unless a court otherwise directs.

9 Attendance at preliminary hearings

A victim will be relieved from appearing at preliminary hearings or committal hearings unless the court otherwise directs.

10 Return of property of victim held by State

If any property of a victim is held by the State for the purpose of investigation or evidence, the inconvenience to the victim will be minimised and the property returned promptly.

11 Protection from accused

A victim's need or perceived need for protection will be put before a bail authority by the prosecutor in any bail application by the accused.

12 Information about special bail conditions

A victim will be informed about any special bail conditions imposed on the accused that are designed to protect the victim or the victim's family.

13 Information about outcome of bail application

A victim will be informed of the outcome of a bail application if the accused has been charged with sexual assault or other serious personal violence.

14 Victim impact statement

A relevant victim will have access to information and assistance for the preparation of any Victim Impact Statement authorised by law to ensure that the full effect of the crime on the victim is placed before the court.

15 Information about impending release, escape or eligibility for absence from custody

A victim will, on request, be kept informed of the offender's impending release or escape from custody, or of any change in security classification that results in the offender being eligible for unescorted absence from custody.

16 Submissions on parole and eligibility for absence from custody of serious offenders

A victim will, on request, be provided with the opportunity to make submissions concerning the granting of parole to a serious offender or any change in security classification that would result in a serious offender being eligible for unescorted absence from custody.

17 Compensation for victims of personal violence

A victim of a crime involving sexual or other serious personal violence is entitled to make a claim under a statutory scheme for victims compensation.

18 Information about complaint procedure where Charter is breached

A victim may make a complaint about a breach of the Charter and will, on request, be provided with information on the procedure for making such a complaint.

OFFICE USE ONLY

Charter Right/s upheld as a breach

No Yes ► *If yes, indicate the Right/s numbers breached*

1	2	3	4	5	6	7	8	9
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	11	12	13	14	15	16	17	18

Action taken

Date finalised

(dd/mm/yyyy)