MATLOCK AND ASHOVER PRACTICE.

PATIENT COMPLAINT POLICY

If you have a complaint or concern about the service you have received from the doctors or any of the personnel working in this practice, please let us know. We operate a practice complaint procedure as part of an NHS complaints system, which meets national criteria. The national criteria states that you can either complain directly to the practice or to NHS England but you cannot complain to both. Details for the Complaints Commissioner at the Customer Care Centre NHS England are given below:

Post: NHS England PO Box 16738 Redditch B97 9PT

Email: <u>england.contactus.@nhs.net</u> or by telephone: 0300 3112233

HOW TO COMPLAIN

We hope that we can sort most problems out easily and quickly, often at the time they arise and with the person concerned. If you wish to make a formal complaint, please do so AS SOON AS POSSIBLE - ideally within a matter of a few days. This will enable us to establish what happened more easily. If doing that is not possible your complaint should be submitted within 12 months of the incident that caused the problem; or within 12 months of discovering that you have a problem. You should address your complaint in writing to the Practice Manager (you can use the attached form) who will ensure that we deal with your concerns promptly and in the correct way. You should be as specific and concise as possible.

COMPLAINING ON BEHALF OF SOMEONE ELSE

We keep strictly to the rules of medical confidentiality. If you are not the patient, but are complaining on their behalf, you must have their permission to do so. An authority signed by the person concerned will be needed, unless they are incapable (because of illness or infirmity) of providing this. A Third Party Consent Form is provided below.

WHAT WE WILL DO

We will acknowledge your complaint within 3 working days. If we expect it to take longer we will explain the reason for the delay and tell you when we expect to finish. When we look into your complaint, we will investigate the circumstances; make sure you receive an apology if this is appropriate, and take steps to make sure any problem does not arise again.

You will receive a final letter setting out the result of any practice investigations within 6 months but we hoped that complaints can be investigated and brought to an agreed conclusion within 28 days.

If you are not satisfied with the way your complaint has been dealt with by the practice or commissioner, they can contact the Parliamentary and Health Service Ombudsman (PHSO)

Post: The Parliamentary and Health Service Ombudsman Millbank Tower Millbank London SW1P 4QP

Email: phso.enquiries@ombudsman.org.uk

Telephone: 0345 015 4033

COMPLAINT FORM

Patient Full Name:

Date of Birth: Address:

Complaint details: (Include dates, times, and names of practice personnel, if known)
SIGNED
Print name
(Continue overleaf if necessary)

PATIENT THIRD-PARTY CONSENT

PATIENT'S NAME:			
TELEPHONE NUMBER:			
ADDRESS:			
ENQUIRER / COMPLAINANT NAME:			
TELEPHONE NUMBER:			
ADDRESS:			

IF YOU ARE COMPLAINING ON BEHALF OF A PATIENT OR YOUR COMPLAINT OR ENQUIRY INVOLVES THE MEDICAL CARE OF A PATIENT THEN THE CONSENT OF THE PATIENT WILL BE REQUIRED. PLEASE OBTAIN THE PATIENT'S SIGNED CONSENT BELOW.

I fully consent to my Doctor releasing information to, and discussing my care and medical records with the person named above in relation to this complaint, and I wish this person to complain on my behalf.

This authority is for an indefinite period / for a limited period only (delete as appropriate)

Where a limited period applies, this authority is valid until..... (insert date)

Signed: (Patient only)

Date:

Adopted by Practice Partners	28 th January 2019

Review Date

January 2022