## **Patient complaint form**

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 complaints procedure as part of an NHS complaints system in accordance with legislative requirements and best practice.

### 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 - 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 Reception Team Leader, Amanda Walls. She will make sure that we deal with your concerns promptly and in the correct way. You should be as specific and concise as possible.

The Practice is committed to learning lessons when things go wrong and patients will not be discriminated against for making a complaint.

# **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.

#### **Ashfield Medical Centre's complaint process**

We will acknowledge your complaint within 3 working days and aim to have fully investigated within 10 working days of the date it was received. 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. A full copy of the Practice complaints policy can be obtained from reception.

You will receive a final response letter setting out the result of any practice investigations and any actions the Practice is taking as a result.

# If we have been unable to resolve your complaint:

If you remain dissatisfied with the outcome you may refer the matter to:

By telephone: 03003 11 22 33

By email: england.contactus@nhs.net

By post: NHS England, PO Box 16738, Redditch, B97 9PT

The Complaint Form is on the next page >>>

Complaint form
Patient Full Name:
Date of Birth:
Address:
Complaint details: (Include dates, times, and names of practice personnel, if known)
Signed(Continue overleaf if necessary)

# 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: .....

Patient third party consent