

PATIENT COMPLAINT PROCEDURE

We always try to give you the best possible service but there may be times when you feel this has not happened. If you have a complaint or concern about the service you have received from 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. We have a non-discriminatory approach to complaints and patients, carers and relatives will not be treated adversely as a result of having complained.

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. Complaints may be made in person and over the phone (non-clinical/admin complaints only), or in writing to the Patient Engagement and Complaints Manager, Julie Liney. All verbal & written complaints should be addressed in a timely manner so that your concerns are followed up & addressed. If you are dissatisfied with our reply, you can direct your complaint to NHS England. The appropriate contact address for NHS England and the Independent Complaints Advocacy Service (who can help you with your complaint) are printed below.

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.

WHAT WE WILL DO

We think it is important to deal with your complaints swiftly so we will acknowledge your complaint within 3 working days. You will normally be offered an explanation or, if appropriate, an appointment for a meeting to discuss the matter within 30 days. Occasionally, if we have to make a lot of enquiries it might take a little longer, but we will keep you informed. You may bring a friend or relative with you to the meeting.

Independent Complaints Advocacy Services:

Help and advice for patients is available from POhWER, the NHS Complaints Advocacy Service by telephone: 0300 456 2370 (charged at local rate); by post to:
POhWER,
PO Box 14043, Birmingham B6 9BL, or by email to: yourvoicewyourchoice@pohwer.net

POhWER provide confidential advice and support, helping patients to sort out any concerns about the care given by the practice and guiding patients through the different services available from the NHS.

Complaints to the NHS England

NHS England PO Box 16738
Redditch B97 9PT
Telephone: 0300 311 2233
Email: england.contactus@nhs.net

TAKING IT FURTHER

We will try to address your concerns fully, provide you with an explanation and discuss any action that may be needed. We hope that you will feel satisfied that we have dealt with the matter thoroughly. However, if this is not the case you may refer the matter to:

The Parliamentary and Health Service Ombudsman
Citygate, 51 Mosley Street, Manchester, M2 3HQ
Tel 0345 0154033 www.ombudsman.org.uk

HUMBERSTONE MEDICAL CENTRE
Complaint Form

Personal Details

Name	<input style="width: 95%;" type="text"/>
Address	<input style="width: 95%;" type="text"/>
Date of Birth	<input style="width: 95%;" type="text"/>
Telephone No.	<input style="width: 95%;" type="text"/>

Patient's Details (if different from above)

Name	<input style="width: 95%;" type="text"/>
Address	<input style="width: 95%;" type="text"/>
Date of Birth	<input style="width: 95%;" type="text"/>
Telephone No.	<input style="width: 95%;" type="text"/>

Details of Complaint

Date	<input style="width: 30%;" type="text"/>	Time	<input style="width: 30%;" type="text"/>	Place	<input style="width: 50%;" type="text"/>
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Member of the practice involved with the complaint

Summary of Complaint
(please continue overleaf if necessary)

Complainant's Signature

Date

Where the complainant is not the patient:

I hereby authorise the above complaint to be made and I

agree that members of the practice staff may disclose (in so far as necessary) confidential information about me which I provided to them.

Patient's
Signature

Date