
PATIENT COMPLAINTS



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.

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 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. Please address your complaint in writing to the Practice Manager (you can use the attached form). Please be as specific and concise as possible.

COMPLAINING ON BEHALF OF SOMEONE ELSE

We keep strictly to the rules of medical confidentiality so if you are not the patient, but are complaining on their behalf, you must have their written permission to do so. A Third Party Consent Form is overleaf.

WHAT WE WILL DO

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 it possible for you to discuss the problem with those concerned;
- 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

TAKING IT FURTHER

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

The Parliamentary and Health Service Ombudsman
Millbank Tower
Millbank
LONDON
SW1P 4QP
Tel: 0345 0154033, website: www.ombudsman.org.uk

The complaint form in on the next page >>>>



THIRD PARTY CONSENT

PATIENTS DETAILS

FULL NAME	
TELEPHONE NUMBER	
ADDRESS	

ENQUIRER/COMPLAINANTS DETAILS

FULL NAME	
TELEPHONE NUMBER	
ADDRESS	

If you are complaining on behalf of a patient other than yourself or your enquiry involves the medical care of a patient other than yourself then the written consent of that patient will be required. Without the patients consent the Data Protection Act 1988 prevents us from disclosing any information to you.

PLEASE OBTAIN THE PATIENT'S SIGNED CONSENT BELOW

THIS CONSENT IS VALID UNTIL	
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Inset date or 'INDEFINITE'

I fully consent to Victoria Practice 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.

SIGNED (patient only)		DATE	
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