

Complaints Procedure

If you have a complaint or concern about the service you have received from the doctors, practitioners or any of the personnel working in this clinic, please let us know. We operate a practice complaint procedure which meets or exceeds 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 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 Complaints Lead Dr Tom Malak (you can use the below form). They will make sure that we deal with your concerns promptly and in the correct way. You should be as specific and concise as possible.

Complaining on behaviour 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 will we do

We will acknowledge your complaint within 2 working days and aim to have fully investigated within 20 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 Independent Healthcare Sector Complaints Adjudication Service (ISCAS). They will offer an external review of the complaints:

ISCAS,
CEDR, 3rd Floor
100 St. Paul's Churchyard
London
EC4M 8BU
Email: info@iscas.org.uk
Phone: 020 7536 6091

Patient Third-Party Consent

Patient's Name:	Telephone:
Date of birth:	Email:
Address:	
Enquirer/ Complainer Name:	Telephone:
Date of birth:	Email:
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 only, 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):	Date:
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