



Patient Complaints

As a surgery we always strive to ensure the best level of patient care, however we acknowledge we may not always get it right first time. Therefore we operate a complaint procedure as part of an NHS complaints system, which meets national criteria. We view complaints as an opportunity to reflect on patient care, where appropriate apologise and learn from incidents to improve patient care. 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.

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 Business Manager using the attached form, please do not e-mail the surgery as this may be overlooked. The Business Manager 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 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 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

E-mail: phso.enquiries@ombudsman.org.uk

Complaints Form

Patient Full Name:

Date of Birth: __/__/____

Address:

.....

.....

.....

.....

.....

Telephone:

Complaint details: (Include dates, times, and names of practice personnel, if known)

[illegible]

(Continue on a separate sheet if necessary)

Signed

Print Name.....

Date

**Please return completed forms to: FAO Business Manager, Library House Surgery,
Avondale Road, Chorley, PR7 2AD**

Patient Third-Party Consent

Patient Name	
Telephone No.	
Address	

Enquirer/Complainant Name	
Enquirer / Complainant's Relationship to patient	
Telephone No.	
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 / management team of Library House Surgery releasing information to, and discussing my care and medical records with, the person named above.

This authority is for an indefinite period in relation to this individual complaint.

This authority can be withdrawn at any time by contacting the Business Manager or the Assistant Manager.

Signed (Patient)

Signed (Complainant)

Print Name.....

Print Name.....

Date

Date