



KELVINGROVE MEDICAL CENTRE **PRACTICE COMPLAINTS PROCEDURE**

If you have a complaint or concern about the service you have received from your Doctors or any of the staff working in this Practice, please let us know. We operate a Practice complaints procedure as part of the NHS system for dealing with complaints. Please be assured that making a complaint will not affect your care from the Practice.

If you feel you cannot complain directly to the Practice, you may send your complaint to NHS England – (details overleaf). NHS England will contact the Practice and investigate your complaint.

Complaining to the Practice

We hope most problems can be sorted out easily and quickly, often at the time they arise and with the person concerned. If your problem cannot be sorted out in this way and you wish to make a complaint, we would like you to let us know **as soon as possible** – ideally within a matter of days or at most a few weeks – because this will enable us to establish what happened more easily. If it is not possible to do that, please let us have the details of your complaint:

- within 12 months of the incident that caused the problem
- or within 12 months of realising that you have a problem

Please record your complaint on the attached form. It will be a great help if you could provide as much detail as possible. Complaints should be addressed to the Practice Manager or The Senior Partner. Address: Kelvingrove Medical Centre, 28 Hands Road, Heanor, Derbyshire DE75 7HA.

What we will do

We will acknowledge your complaint within three working days and will investigate your complaint as quickly as possible. At the time of acknowledgement, we will discuss the following:

- a. The manner in which the complaint is to be handled
- b. The period within which the investigation of the complaint is likely to be completed
- c. When the response is likely to be sent to you

Following investigation we will contact you with a written reply or arrange a meeting at the Surgery to discuss the matter.

Complaining on behalf of Someone Else

Please note that we keep strictly to the rules of medical confidentiality. If you are complaining on behalf of someone else, we have to know you have their permission to do so. A signed consent by the patient concerned will be needed, unless the patient is unable to sign.

Complaining to NHS England

If you feel you are unable to complain directly to the Practice, you may complain to NHS England, details as follows:

NHS England
PO Box 16738
Redditch
B97 9PT
Tel: 0300 311 2233 (open Mon-Fri 8am – 6pm, excluding bank holidays)

Help with making a complaint

If you require help in making a complaint about the Practice, you can contact

- [POhWER](#) support centre can be contacted via 0300 456 2370
- [Advocacy People](#) gives advocacy support on 0330 440 9000
- [Age UK](#) on 0800 055 6112
- Local Council can give advice on local advocacy services

Unsuccessful Local Resolution – (complaint investigated by the Practice)

If you are still unhappy after your complaint has been investigated by the Practice, the next step would be to contact the Parliamentary and Health Service Ombudsman.

Parliamentary and Health Service Ombudsman (PHSO)

The Ombudsman is independent, is not part of the NHS or Government and their powers are set down in law. The Ombudsman will usually only look into a complaint after the NHS has had a chance to try to resolve it. The contact details are as follows:

The Parliamentary and Health Service Ombudsman
Millbank Tower
Millbank
London
SW1P 4QP

Tel No: 0345 015 4033

Email: phso.enquiries@ombudsman.org.uk



KELVINGROVE MEDICAL CENTRE
COMPLAINT FORM

Section 1. Patient's Details	
Patient's Full Name:	
Address:	
Postcode:	Date of Birth:
Home:	Mobile:
Email Address:	Preferred method of contact:

Section 2. Are you the patient and complaining on behalf of yourself?
YES / NO (delete as appropriate)
If YES , go to section 4
If NO , (i.e. you are not the patient and are complaining on the patient's behalf), please complete your details below in section 3:

Section 3. Complainant's Details – I am not the patient and am complaining on the patient's behalf. (Please ask the patient to sign below to give consent for us to respond to you directly. If the patient is sadly deceased or unable to sign, e.g. is a child, please tick this box <input type="checkbox"/> and we will contact you to discuss this.)	
Name:	
Address:	
Postcode:	
Home:	Mobile:
Your relationship to the patient:	
Complainant's Signature: (the person complaining on the patient's behalf)	
I hereby give my consent for Kelvingrove Medical Centre to disclose confidential information about me, relating to this complaint, to the above named in section 3:	
Patient's Signature:	

Section 4. Details of Complaint:

Date(s) of incident(s) or time period involved:

Name of staff member(s)/department involved:

Please provide full details of your complaint below (attach additional sheets if necessary).

Section 5. Please state the specific questions/issues which you would like us to investigate and respond to:

What we will do when we receive your complaint

When we receive your completed form a member of our staff will contact you to discuss your complaint in more detail (if further information is required), to resolve any issues regarding consent (if the patient is not able to sign this form), to discuss how your complaint will be investigated and the timescale for us to respond to you. Please confirm below if you would like us to telephone or write to you to regarding this.

I would like you to **write to me/telephone me/email** (*delete as appropriate*) to discuss my complaint and how the Practice will respond to the concerns I have raised.

Signed:

(To be signed by the Patient or the person who is complaining on the Patient's behalf)

Please Print Name:

Date:

Please return your completed form to:

The Practice Manager or Senior Partner
Kelvingrove Medical Centre
28 Hands Road
Heanor
Derbyshire
DE75 7HA

If you require this information in an accessible format, such as large print, Easy Read or Braille, please contact the Surgery by telephone on 01773 713201.