Complaining on behalf of someone else

Please note that The University of Reading Medical Practice keeps strictly to the rules of medical confidentiality. If you are complaining on behalf of someone else, the practice needs to know that you have their permission to do so. A note signed by the person concerned will be required, unless they are incapable of providing this due to illness or disability.

Complaining to other authorities

The practice management team hope that if you have a problem with the service you have received, that you will use the Practice Complaints Procedure. However, if you feel you cannot raise your complaint with us, you can contact NHS England as follows:

The complaints Manager at
National Contact Centre: 0300 311 22 33
(Mon – Fri, 8am – 6pm)
NHS England, PO Box 16378, Redditch, B97 9BT
England.contactus@nhs.net

Do you need help or support in making your complaint?

Healthwatch England – NHS COMPLAINTS ADVOCACY SERVICE

Healthwatch England is a national service that supports people who want to make a complaint about their NHS Care or treatment. Your local Healthwatch service can be found on:
http://healthwatchreading.org.uk/nhs-complaints-advocacy-service/

Are you dissatisfied with the response to your complaint?

OMBUDSMAN

If you have not received a satisfactory response from this practice, or NHS England, you can then refer your complaint to the Parliamentary and Health Service Ombudsman who investigates complaints about the NHS in England.

You can call the Ombudsman’s Complaints Helpline on 0345 015 4033 or http://www.ombudsman.org.uk or Textphone (Minicom) : 0300 061 4298

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University Medical Group

Complaints and Comments Leaflet

LET THE PRACTICE KNOW YOUR VIEWS

Please Take a Copy

(Revised August 2018)
LET THE PRACTICE KNOW YOUR VIEWS

University of Reading Medical Practice is always looking for ways to improve the services it offers to patients. To do this effectively, the practice needs to know what you think about the services you receive. Tell us what we do best, where we don’t meet your expectations plus any ideas and suggestions you may have. Only by listening to you can the practice continue to build and improve upon the service it offers.

TELL US ABOUT OUR SERVICE BY COMPLETING THE COMMENTS FORM IN THIS LEAFLET

• Could you easily get through on the telephone?
• Did you get an appointment with the practitioner you wanted to see?
• Were you seen within 20 minutes of your scheduled appointment time?
• Were our staff helpful and courteous?

PRACTICE COMPLAINTS PROCEDURE

If you have a complaint about the service you have received from any member of staff working in this practice, please let us know. The practice operates a Complaints Procedure as part of the NHS system for dealing with complaints. Our complaints system meets national criteria.

Note: If you make a complaint it is practice policy to ensure you are not discriminated against, or subjected to any negative effect on your care, treatment or support.

HOW TO COMPLAIN

In the first instance please discuss your complaint with the staff member involved at the time. Where the issue cannot be resolved at this stage, please contact Fiona Mullin – Complaints Manager as soon as possible. She will try to resolve the issue, and where appropriate, will give you further information about the complaints procedure.

If it is not possible to raise your complaint immediately, please let us have details of your complaint within the following timescales:

• Within 12 months of the incident that caused the problem
• Within 12 months of discovering that you have a problem, provided this is within 12 months

The practice will acknowledge your complaint within three working days, and will aim to respond within 30 working days of the date you raised it with us. Should we not be able to meet this target Fiona will contact you to explain the reason for the delay and advise on timescales going forwards.

When the practice looks into your complaint it aims to:

• Ascertain the full circumstances of the complaint
• Make arrangements for you to discuss the problem with those concerned, if you would like this
• Make sure you receive an apology, where this is appropriate
• Identify what the practice can do to make sure the problem does not happen again

COMPLAINTS AND COMMENTS FORM

Name:_________________________________
Address:________________________________
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Telephone:______________________________
Date of complaint / comment:_______________
Details:_________________________________
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