## **Benfield Park Medical Group Complaints Form**

We are very fortunate that complaints are very infrequent at our practice. We hope this reflects the personal service we offer to all our patients. However, if you have a complaint or concern about the service you have received from the doctors or any of the staff working in this practice, please let us know. We operate a practice complaints procedure as part of an NHS system for dealing with complaints.

Complaints Form Details		
Name:	Address:	
D.O.B:	•	
	•	
Is the complaint regarding You? If no, then please provide details of the person you are representing and their signature	Yes / No	
Name:	Address:	
D.O.B:	<b>1</b>	
I hereby, give consent to representati	ion on dealing with my complaint	
Signed		

Date Event Took Place:			
Do you know the names of people involved?	Yes / No		
If yes then please provide details.			

Details of Complaint:				

Please return this form to Julia Gray (marked private & confidential) to Benfield Park Healthcare and Diagnostic Centre, Benfield Road, Newcastle upon Tyne, NE6 4QD. We shall acknowledge your complaint within 3 days and will fully respond to your complaint within 28 days.

For Practice Use Only.

Date complaint received	Date acknowledged	Response Date>10 days	Complete