

## Complaints Procedure

We make every effort to give the best service possible to our patients. However, at times, things can go wrong resulting in a patient feeling that they have a genuine cause for complaint. If this is so, we would wish for the matter to be settled as quickly, and as amicably, as possible. To pursue a complaint please contact reception or Dr. Emer Byrne who will deal with your concerns appropriately.

Written information is available regarding the complaints procedure from reception or in the policy document below.

### Making a Complaint

Most problems can be sorted out quickly and easily, often at the time they arise with the person concerned and this may be the approach you try first.

Where you are not able to resolve your complaint in this way and wish to make a formal complaint you may do so, preferably in writing as soon as possible after the event and ideally within a few days, as this helps us to establish what happened more easily. You can drop a letter into the practice or alternatively there is a complaints box and forms in the waiting room for your convenience. You may also ask the receptionist for a complaint form. What we do next

We aim to manage any / all complaints as soon as possible. We will acknowledge receipt of your complaint within 7 working days.

You may then receive a reply in writing, or you may be invited to meet with the person(s) concerned to attempt to resolve the issue.

If the matter is likely to take longer than this we will let you know, and keep you informed as the investigation progresses.

When investigating a complaint we attempt to see what happened and why, to see if there is something we can learn from this, and make it possible for you to discuss the issue with those involved if you would like to do so.

When the investigations are complete, the outcome of your complaint will be determined and a final response will be sent to you.

We endeavour to provide you with a final written response within 30 working days from the day that we receive your complaint.

To : Kells Medical, Church Street, Kells, Co. Meath

Date:  
Name:  
Date of birth:  
Address:  
Phone:  
Complaint:

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Details:

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Suggestions:

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Signature \_\_\_\_\_ Date \_\_\_\_\_