



## Student Health Service Complaint Policy

The Student Health Service aims to provide the highest quality professional service to the students of University College Dublin. We strive for continuous improvement and we welcome feedback from our students either positive or negative.

If you are concerned about any aspect of the service you received from us, we would like you to contact us.

The Student Health Service complies with the UCD complaints policy and if you wish to make a complaint you should follow this policy. Further information can be found at: [www.ucd/complaints/docs/complaints\\_po.pdf](http://www.ucd/complaints/docs/complaints_po.pdf)

The policy envisages that most complaints will be dealt with at local level. Initially you can raise your concerns with the individual concerned within 15 days of the issue arising. Most complaints arise as a result of misunderstanding and a discussion may resolve matters. It is the policy of the Unit to acknowledge mistakes and apologise where appropriate.

After discussion with the individual concerned, if you are still not satisfied, you can make a formal complaint to the Head of the Student Health Service by filling in the formal complaint form below.

We will acknowledge your complaint within 7 days. Your complaint will be reviewed and responded to within 15 working days in line with UCD Complaints Policy.

If you are not satisfied with the response you may request a University Review by filling in the Student Complaint form and submitting it to the UCD Office of Assessment Appeals and Student Complaints.

### COMPLAINT FORM STUDENT HEALTH SERVICE

#### Section 1: Personal Details

Student Name

Student Address

Student Contact Telephone number

Student Email address

Student Identification Number

#### Section 2: Details of the Complaint

Please give a brief outline of your complaint and include the names of the people involved and relevant dates.

**Section 3: Complaint resolution**

What steps have you take to date to resolve the issue?

**Section 4: Complaint resolution**

Please state the outcome you would like to see to resolve your complaint e.g. an apology

**Section 5: Other information**

Please include anything else you consider relevant to your complaint

**I have read and understood the UCD Student Complaints Policy:**

**Signature:**

**Date:**