



Bwrdd Iechyd Prifysgol
Abertawe Bro Morgannwg
University Health Board

Eich Cyf Your ref:

☎ Direct line/Rhif llinell union:

Ein Cyf /Our Ref:

✉ Email:

Dyddiad/Date:

PERSONAL

Dear

Dear *[Insert patient's name or third party name]*

Re: *[Insert patient's name if third party and summarise your understanding of the concern as outlined in acknowledgement letter]*

I am writing further to **XXXXX** letter of **XXXXX** to provide you with a full response to your concern.

Give details of investigation, outcome and actions taken such as:

- *Summarise nature and substance of the concern/s*
- *Describe the investigation undertaken*
- *Include copies of expert opinions (if received during investigation)*
- *Include copies of any relevant medical records*
- *Where appropriate, include an apology*
- *Identify what action, if any, will be taken, including where services have been improved as a result of the concern*
- *Offer the opportunity to discuss the content of the response*
- *If no liability, give reasons for decision as to why & offer option of free legal advice in accordance with Regulations*
- **THE PERSON RAISING THE CONCERN SHOULD BE ADVISED THAT THEY HAVE 6 MONTHS TO RESPOND TO THE OFFER / DECISION NOT TO MAKE AN OFFER**

Chairman/Cadeirydd: **Professor Andrew Davies**

Chief Executive/ Prif Weithredydd: **Mr Paul Roberts**

ABM Headquarters/ Pencadlys ABM, One Talbot Gateway, Seaway Parade, Baglan Energy Park, Port Talbot. SA12 7BR.

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Bwrdd Iechyd ABM yw enw gweithredu Bwrdd Iechyd Lleol Prifysgol Abertawe Bro Morgannwg

ABM University Health Board is the operational name of Abertawe Bro Morgannwg University Local Health Board

www.abm.wales.nhs.uk

On behalf of the Health Board I would like to thank you for raising your concern with us. The Health Board is committed to learning from concerns and considers each to be invaluable in improving our service and ensuring excellent outcomes and patient experience. When you have read the investigation report you may want to discuss these matters in more detail with a senior member of staff and **[Insert contact name/role, telephone contact number]** would be delighted to assist in this.

If we have not addressed your concern to your satisfaction, we would much prefer to resolve this locally, either by further discussion or by meeting with you. If you would like to be assisted in resolving your concerns or supported in a meeting with us, the Community Health Council is able to offer confidential support through their Patient Advocacy Service. However, if you remain unhappy you do have the right to contact the Public Service Ombudsman for Wales who will review the matter. Contact details are in the leaflet we previously sent to you entitled 'Putting Things Right – Raising a concern about the NHS from 1 April 2011'.

Yours sincerely

DEPARTMENT / DIRECTORATE / LOCALITY

Enclosures:
Investigation Report