PK OSTEOPATHY

Complaints Form - Data protection and general

PK OSTEOPATHY
(For concerns about care, service, or how your personal information is used)

---

1. Your details

Full Name:
Address:
Postcode:
Email:
Phone Number:

Preferred method of contact:
☐ Email
☐ Phone
☐ Letter
☐ Other (please specify): _____

Are you completing this form on behalf of someone else?
☐ Yes
☐ No

If yes, please provide:

Name of the individual: _____

Your relationship to them: _____

Your contact details (if different):

Please attach proof of your authority to act on their behalf:
☐ Signed letter of authority
☐ Power of attorney
☐ Other (please specify): _____

2. Identity verification (if required)

If we need to verify your identity, we may ask for one of the following:

- Passport
- Driving licence
- Utility bill (dated within the last 3 months)
- Other acceptable ID

Have you attached proof of identity?
☐ Yes
☐ No
☐ Not required

3. About Y=your complaint

What type of complaint are you making?
☐ About my osteopathic care or treatment
☐ About customer service or communication
☐ About how my personal information has been used (data protection complaint)
☐ Something else (please describe): _____

Please describe your complaint in as much detail as possible:
(Include dates, people involved, what happened, and how it has affected you.)

_____

_____

_____

What outcome would you like as a result of this complaint?

_____

_____

_____

4. Supporting information

Please attach any documents that may help us understand your complaint, such as:

- Emails or letters
- Screenshots
- Appointment details
- Relevant records
- Evidence relating to data use

Have you attached supporting documents?
☐ Yes
☐ No

_____

5. Accessibility and additional support

Do you need any adjustments to help you make this complaint?
(e.g., large print, help completing the form, communication support)

☐ Yes
☐ No

If yes, please tell us what you need:

---

6. Complaints from Children or Young People

If the complainant is under 18:

Age of child/young person:
Does the child understand their rights and the nature of the complaint?
☐ Yes
☐ No
☐ Unsure

(We may need to assess competence to ensure the child can exercise their data rights.)

---

7. How we will handle your complaint

- We will **acknowledge your complaint within 30 days**.
- We will investigate your concerns promptly and respond **without unnecessary delay**.
- If your complaint relates to personal data, we will explain how your information is used and your rights under data protection law.
- If you are unhappy with our response, you can contact the **Information Commissioner's Office (ICO)** or the **General Osteopathic Council (GOsC)** depending on the nature of the complaint.

---

8. Declaration

I confirm that the information I have provided is accurate to the best of my knowledge.

Signature:
Date: