



MEDICAL LEGAL REPORTS

OAK LODGE, GWERNLLWYNCHWYTH ROAD, LLANSAMLET, SWANSEA, SA7 9DT

WWW.MEDICALLEGALREPORT.CO.UK

Document Name	Medical Legal Reports (MNML) (P) Complaints Policy (Division Business) Internal Document
Version	V. 3
Approved by	Mani Neelamegan
Approval Date	22 July 2020
Last Reviewed on	22 July 2021

Introduction

This policy provides a guide to employees as to the actions required to identify, assess and resolve a complaint. Where further investigation is identified, this policy will advise the next actions to take to ensure the complaint is dealt with fairly and expeditiously.

Policy

From each complaint, a full investigation is completed and a report generated detailing the basis of complaint, any actions necessary as well as resolution to meet client's customer satisfaction. Alternatively, where a complaint is found to be incorrect, documents, electronic data and medical records will be reviewed and recorded to refute the complaint.

Policy Aim

To offer high standards of quality with regard to assessment and medical legal reporting which is accessible, convenient and transparent to the patient's needs.

Adhere to related legislation as well as each physiotherapist earning individual recognition and registration with Medco and the Health Care and Professional Council (HCPC).

Process

Any complaint received is thoroughly investigated and any necessary and proportionate action is taken in response to any identification of non-compliance. All instances of failure are acknowledged within 24 hours and a report is sent to our referrer/patient with the results.

Accessibility

Patients are able to make a complaint via:-

Medical Legal Reports (MNML)

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Where a patient has made the complaint, the compliance manager will act as the single point of contact whilst the complaint remains "open"; updating patient periodically and presenting the patient with the options to progress forward. A conclusion can be formulated and an Investigation Report is sent to the referrer directly as an explanation within 3 working days of the complaint being raised..

Patient Collection and Analysis

The database records all feedback recovered as well as its own independent electronic data - to build up a picture of the complaint and any basis on which parties wish to rely.

Any requests by the patient, partners, interested stakeholders or service users are readily available to upload at any time for inspection. The aim is to provide a clear system which can be examined at any opportunity time by those with the legitimate authority to do so.

The "Customer Collection and Analysis" The database records:-

- date of complaint
- name of complainant
- Branch (where applicable)
- Referrer (where applicable)

We then record a description of the complaint and a deadline. A more comprehensive list is then captured

The registered person must provide any information when requested to do so no later than 3 days beginning on the day after receipt of the request, a summary of—

- (a) Complaints made under such complaints system,
 - (b) Responses made by the registered person to such complaints and any further correspondence with the complainants in relation to such complaints, and
 - (c) Any other relevant information in relation to such complaints as requested
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Reviewing Policy

This policy will be reviewed and, if necessary, revised in the light of legislative or organisational changes.

Updating will also be required when the following change in MEDICAL LEGAL REPORTS (MNML)

When there are changes to the management structure.

The activities of the business change.

Policy Amendments

Should any amendments, revisions, or updates be made to this policy, it is the responsibility of MEDICAL LEGAL REPORTS (MNML) senior management to see that all relevant employees receive notice. Written notice and/or training will be considered



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~ Policy Implementation Notice ~

This is the policy statement of:

MEDICAL LEGAL REPORTS (MNML)

The overall and final responsibility for this policy is that of:

DIRECTOR

Signed:

Dated

22/07/2020

Day-to-day responsibility for ensuring this policy is put into practice is delegated to:

MANI NEELAMEGAN

Policy Review Date: 22/07/2021
