DATA PROTECTION COMPLAINTS PROCEDURE AND COMPLAINT FORM

Provided by SMTO for member use

Business, clinic or practice details.

Name: Positive Flow Therapies

Address: 11 Esslemont Road, Edinburgh, EH16 5PX

Telephone or mobile number:
07961 285752

Email address:
lisa@positiveflowtherapies.co.uk

Name of the person responsible for data protection complaints: Lisa Newall

Their telephone or mobile number if different from above:

Their email address if different from above:

Their postal address if different from above:

Date this procedure was adopted: 19 June 2026
Review date: 19 June 2027
Privacy notice location: www.positiveflowtherapies.co.uk within FAQ's subsection "Downloads"

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PART B

This is the public data protection complaints procedure for the business, clinic, practice or training setting named below.

This document is provided by the Scottish Manual Therapists Organisation (SMTO) members to use in their own practice, clinic, teaching or professional setting. It is for guidance only and does not constitute legal advice. Each member remains responsible for their own data protection compliance.

DATA PROTECTION COMPLAINTS PROCEDURE

Business, clinic or practice name:

Positive Flow Therapies

1. Purpose of this procedure

This document explains how the business, clinic or practice named above handles complaints about the way they collect, use, store, share, retain, correct or delete personal data.

This procedure applies only to data protection complaints.

Other complaints, such as concerns about treatment, professional conduct, fees, appointments, customer service or clinical care, are handled under general complaints procedures.

Personal data is taken seriously. This includes your contact details, consultation information, health history, treatment notes, consent records, appointment records, payment information, emails, messages, student records, course records and any other personal information held.

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Health information is special category data under UK GDPR. This means it requires additional care and protection.

2. Who can use this procedure?

You can use this procedure if personal information is held about you.

This may include if you are a current or former client, student or course attendee, professional contact, supplier or another person whose personal data is held.

3. What is a data protection complaint?

A data protection complaint is a concern about how your personal information is handled.

You do not need to use legal wording. You do not need to mention UK GDPR. If your concern is about how your personal data has been handled, it will be treated as a data protection complaint.

Examples include concerns about how your personal information was collected, how it was used, how it was stored, whether it was shared, how long it was kept, whether it was or is accurate, how a response was made on a request to see your records, or how a response was made to a request to correct, delete or restrict use of your information.

4. How to make a data protection complaint

You can make a data protection complaint by completing the form below and sending it to us.

You may also raise a concern by email, post, telephone, or another reasonable method. If you raise a concern verbally, we may make a written note and ask you to confirm that we have understood your concern correctly.

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Please send complaints to: Lisa Newall

Email: lisa@positiveflowtherapies.co.uk
Postal address: 11 Esslemont Road, Edinburgh, EH16 5PX

Telephone, if accepted: In writing

5. What happens after you complain?

We will acknowledge your complaint within 30 days of receiving it.

We may ask you for more information if we need it to investigate your concern properly.

We will review your complaint and make appropriate enquiries. This may include checking records, reviewing emails or messages, checking our privacy notice, considering whether information was shared, reviewing consent or lawful basis, and deciding whether any action is needed.

We will respond without undue delay. If the matter is complex or we need more time, we will keep you informed.

We will tell you the outcome of the complaint. Where possible, this will be provided in writing.

We aim to resolve and provide a final written outcome to most data protection complaints within three months and will keep you regularly informed if an extension is required due to the complexity of the investigation.

6. Possible outcomes

Depending on the complaint, we may decide to:

- correct inaccurate information,
- update incomplete information,
- explain how or why information was processed,
- restrict further use of information where appropriate,
- delete information where appropriate,
- confirm why information must be retained,
- update our procedures,
- take another reasonable action,
- or explain why we do not agree with the complaint.

7. If you remain dissatisfied

If you remain dissatisfied after we have responded, you have the right to contact the Information Commissioner's Office, known as the ICO.

ICO complaints page: https://ico.org.uk/make-a-complaint/
ICO helpline: 0303 123 1113

ICO postal address:
Information Commissioner's Office
Wycliffe House
Water Lane
Wilmslow
Cheshire
SK9 5AF

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PART C

This is the complaint form for the person making the complaint. It should be completed and returned to the business, clinic, practice or training setting named on the form.

Name of business, clinic or practice:

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Please complete this form if you wish to raise a concern about how we, the business named above, have handled your personal information.

Section 1, Your details

Full name:

Email address:

Telephone or mobile number:

Postal address, if you want us to reply by post:

Your preferred contact method:

Are you completing this form for yourself or on behalf of someone else?

☐ Myself

☐ Someone else

If you are completing this form on behalf of someone else, please explain your relationship to that person and provide evidence that you have authority to act for them.

Section 2, What is your connection with us?

Please tick the most relevant option.

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☐ Current client

☐ Former client

☐ Student or course attendee

☐ Parent, guardian or representative

☐ Professional contact

☐ Supplier

☐ Other

If 'other', please explain:

Section 3, What is your complaint about?

Please tick any that apply.

☐ I am concerned about how my personal information was collected.

☐ I am concerned about how my personal information was used.

☐ I am concerned about how my personal information was stored or secured.

☐ I am concerned that my personal information was shared.

☐ I am concerned about how long my personal information has been kept.

☐ I believe the information held about me is inaccurate.

☐ I asked to see my records, (Data Subject Access Request / DSAR), and I am unhappy with the response.

☐ I asked for information to be corrected, and I am unhappy with the response.

☐ I asked for information to be deleted, and I am unhappy with the response.

☐ I asked for use of my information to be restricted, and I am unhappy with the response.

☐ I am concerned about marketing messages.

☐ I am concerned about health information or other sensitive information.

☐ Other data protection concern.

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If 'other', please explain:

Section 4, Please describe your concern

Please explain what happened, when it happened, and why you are concerned about how your personal information has been handled.

Section 5, Dates and records involved

Approximate date or dates involved:

Please describe any records, messages, appointments, emails, forms, treatment notes, course records or other information involved.

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Have you already contacted us about this issue?

☐ Yes

☐ No

If yes, please tell us when and how you contacted us.

Section 6, What outcome are you seeking?

Please tell us what you would like us to consider.

☐ Explanation of what happened

☐ Correction of inaccurate information

☐ Deletion of information, where appropriate

☐ Restriction of further use of information, where appropriate

☐ Copy of information held about me

☐ Review of how my information was handled

☐ Change to practice procedure

☐ Other

If 'other', please explain:

Any other additional details:

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Section 7, Supporting information

Please list any documents, emails, messages or other information you are providing with this complaint.

Section 8, Declaration

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

Signature, if completing in print:

Date:

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