



### **Corvelia** Notification Form – For Healthcare Providers

This form **ONLY** relates to notifications directly involving clinical negligence/medical malpractice. For matters relating to other Corvelia coverages such as libel, slander, breach of data, infringement of copyright, dishonesty of employees, sexual harassment, abuse, loss of documents, regulatory proceedings/investigations, inquests, inquiries or patient recall, please contact Corvelia urgently to ascertain the best method of notification.

Please complete this form to notify us of any claim or circumstance which **could reasonably be expected to** give rise to a claim. This form, combined with copies of any relevant complaint/claim related documentation, is designed to give us the minimum amount of information we need to make an initial assessment of a notification.

#### Policyholders Details

Name of Insured	
Corvelia Policy Number	
Your Contact Person* For This Notification	
Relevant Practice / Clinic Address	
Service Type (e.g. General Practice, minor surgery, Out of Hours, Plastic Surgery)	

#### Important Dates

Please state the date the medical service/treatment/diagnosis complained of was performed? If multiple dates, record the earliest, and other key dates.	
When did the Insured first become aware of the Patient's concerns?	
When was this notified internally to management?	

#### Patient and Complainant/Claimant

Patient's Initials	
Patient's Age	
Patient's Gender	
Insured's relationship with the Patient (e.g. private patient, member of public)	

Who is Involved?

Individual's Name	Role (e.g. Surgeon, GP, Nurse, Physio, RMO, Receptionist)	Employment Status (e.g. employee, locum, consultant under practicing privileges agreement, contractor)	MDO Membership/Insurer Name (or state NONE if cover expected hereunder)

**Where appropriate, please ensure that any practitioners involved who have their own personal indemnity, MDO protection or insurance cover have been advised to notify their insurer/MDO urgently. This includes locum/agency nurses with the benefit of RCN Indemnity.**

Details of Claim or Circumstance

<p>Please provide an overview of the medical services provided to the aggrieved patient, together with details of the allegations being made.</p>	
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<p>Please provide details of any injury (harm) suffered by the Patient.</p> <p>If possible, please also include any initial observations regarding the potential for liability against the Insured and include details of any relevant defences you consider to be immediately relevant (which includes any significant underlying health issues which may have contributed to the severity of injury suffered)</p>	
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<p>In the event you consider that the claim or complaint should be redirected to a third party, please provide details for the third party and the reasons why you consider they should respond to this matter. I.e. who do you consider is responsible for the alleged harm to the Patient and why.</p>	
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### Documentation

Along with this notification form we would be grateful if you could include a copy of the following documents and information:

1. Anonymised patient records, relating to the treatment in question.
2. An anonymised copy of any complaint or claim correspondence, including any subsequent correspondence received (this should include any meeting notes, medical file request, coroner's letters, any pre-action Letter of Claim etc).
3. Copy of any available statements from all clinicians and staff involved.

### Declaration

I/We also confirm that the Contact Person\* named on page 1 is authorised to act for an on behalf of the Insured in respect of this matter.

Signed:

Date:

Name:

We (Corvelia Limited trading as Corvelia Underwriting) collect and use the above information to facilitate claims handling under insurance contracts, as well as for other internal business purposes such as the prevention and detection of financial crime. To this end, the information you provide may be shared with, and used by, a number of third parties in the insurance sector or law enforcement agencies. For more information about how we use, and your rights in relation to, your information please see our full privacy notice on our website at <http://www.corvelia.com/privacy-policy/>, or in other formats on request. You can also contact us at [enquiry@corvelia.com](mailto:enquiry@corvelia.com).