

Clinical Governance Assurance

Complaints & Incidents Management

Complaints & Incidents

NHS Professionals (NHSP) understands working within an NHS Trust and providing essential patient-centered care every day, can be an emotionally demanding role. With this in mind incidents can arise. In these cases, a thorough investigation is crucial to ensure lessons are learnt and where appropriate follow up actions undertaken.

The Complaints Team receives and processes all clinical and non-clinical feedback, both positive and negative, from our clients and workers.

The structure of our team has been designed to support clinical and non-clinical issues (page 4).

Workers and client Trusts can use the online feedback form via our website www.nhsprofessionals.nhs.uk, to submit compliments, concerns or complaints. The form can be found in the Feedback section.

If your feedback is in regards to an agency worker the feedback will be passed onto the appropriate agency to manage in line with its contract agreement with the Trust.

Depending on the nature of the feedback provided, the Complaints Team will determine the most appropriate course of action.

Types of Feedback

Compliments

Workers are valuable support to a Trust's substantive workforce and we encourage client Trusts to submit positive feedback about their colleagues using the feedback form.

Once received the worker will be sent a letter detailing the compliment from a member of the Clinical Governance Senior Management Team.

Submitted feedback from the client Trust will be thanked and acknowledged.

Concerns

Concerns can be raised by client Trusts and workers following assignments worked.

Concerns raised normally fall into these categories:

- Trust has dealt with an issue and has informed NHSP, to ensure the corresponding information is recorded.
- Concerns about a worker's performance in general.
- Trust has concerns over a worker's suitability for a particular area.
- A worker has concerns following an assignment worked.
- A worker has concerns with NHSP's corporate services.

Issues logged as concerns by client Trusts are discussed with the worker and the Trust member, who has logged the concern. An appropriate plan of action is then devised and agreed.

Concerns raised by workers are sent to the relevant NHSP corporate team for investigation and response.

Complaints

Formal complaints regarding a worker's attendance including Short Notice Cancellation (SNC) or not attending assignments (DNA) are managed by NHSP HR department, through a staged process and picked up automatically on release of timesheets.

NHSP HR also investigate complaints regarding workers sleeping on duty and refusing to move wards.

Any issue logged as a complaint will proceed through the NHS Professionals Investigations Handling Process (page 3), and may result in disciplinary action.

Complaints or concerns regarding agency workers will be forwarded to the appropriate agency to manage in line with its contract agreement with the Trust.

The Complaints Handling Process explained

Formal Complaints Process

On receipt of a complaint the Nurse Lead/Investigator will call the complainant within one working day to agree 'Terms of Reference'. In serious cases, for example Serious Incidents (SI) or Safeguarding issues, the client Trust will be contacted the same working day.

Investigators aim to conclude investigations and respond to the worker, complainant and the Trust Lead within 25 working days.

Complaints regarding attitude, competency or behaviour may require witness statements. This evidence enables the investigators to make appropriate recommendations, for example remedial action in the form of training and/or monitoring.

If a witness statement is required, the Investigator will provide statement guidelines. All statements should be signed, dated and include the job title of the worker and/or witness.

Where the Trust are undertaking a Serious Incident investigation and there is evidence of bank member involvement, NHSP require support and cooperation of Trust staff and workers where required. In such situations witnesses are key to the investigation as without supportive evidence it may be difficult to take a case, which should be dealt with formally, to a disciplinary hearing.

Effective complaints management requires partnership working between workers and client Trusts. The Investigation Handling Process is outlined on page 3.

Incident Reporting

If a worker has been involved in, or affected by an incident whilst on assignment, a feedback form should be completed by the ward manager or worker. Incidents may include issues that could have an impact on the worker's own health and well-being. These could include a slip, fall, aggression from a patient or needle stick injury. Where appropriate the worker will be offered immediate first aid by the Trust. A Nurse Lead will contact the worker to discuss the incident and offer on going support, where required.



The Investigation Handling Process

25 Days Timeframe

Providing feedback about worker performance to NHS Professionals

STEP 1

Informing NHSP

Be clear about the type of feedback you are providing.

Compliment

When a worker deserves some recognition for their hard work client Trusts can let us know.

Equally, workers can also submit a compliment following an assignment worked within the Trust.

Concern

When a worker is not suitable for an area of work or if there is a competency issue, client Trusts will let us know.

Complaint

If there has been a specific incident involving a worker which requires formal investigation, client Trusts will let us know.

STEP 2

The Investigation (obtaining evidence)

Day 1 – First contact

Nurse Lead/Investigator contacts the complainant and worker to agree on a Terms of Reference (TOR) for the case. They will request statements from both parties.

Day 5 – Second contact

If the information is not received, a second request is sent by email, requesting the information within five working days.

Day 10 – Third contact

If the information is not received a letter is sent to the Trust Lead requesting the information to be sent within five working days.

Day 15 – Information still not received

Two possible actions:

Action 1

If the client Trust has failed to supply further information and the worker has complied, the case will be considered for closure which may include not upholding the complaint. In this case, continuous Professionals Development (CPD) will be considered.

Action 2

If the allegation is too serious to consider for closure, a letter will go to the Director of Nursing/Chief Executive Officer at the client Trust requesting assistance to obtain the relevant information.

STEP 3

Complaint Outcome

Discussion and closure

The outcome of the complaint will be discussed with the complainant (Sister/ Ward Manager/Matron). In cases which have been risk-ranked as serious and/ or where an exclusion is in place, the outcome will be discussed with the Trust Lead.

Case progression

- Closed with Remedial Action Plan
- Closed without Remedial Action Plan
- Closed with CPD in place
- Proceeding to Disciplinary Hearing
- Proceeding to Statutory Body Referral
- Instant Dismissal (rare)

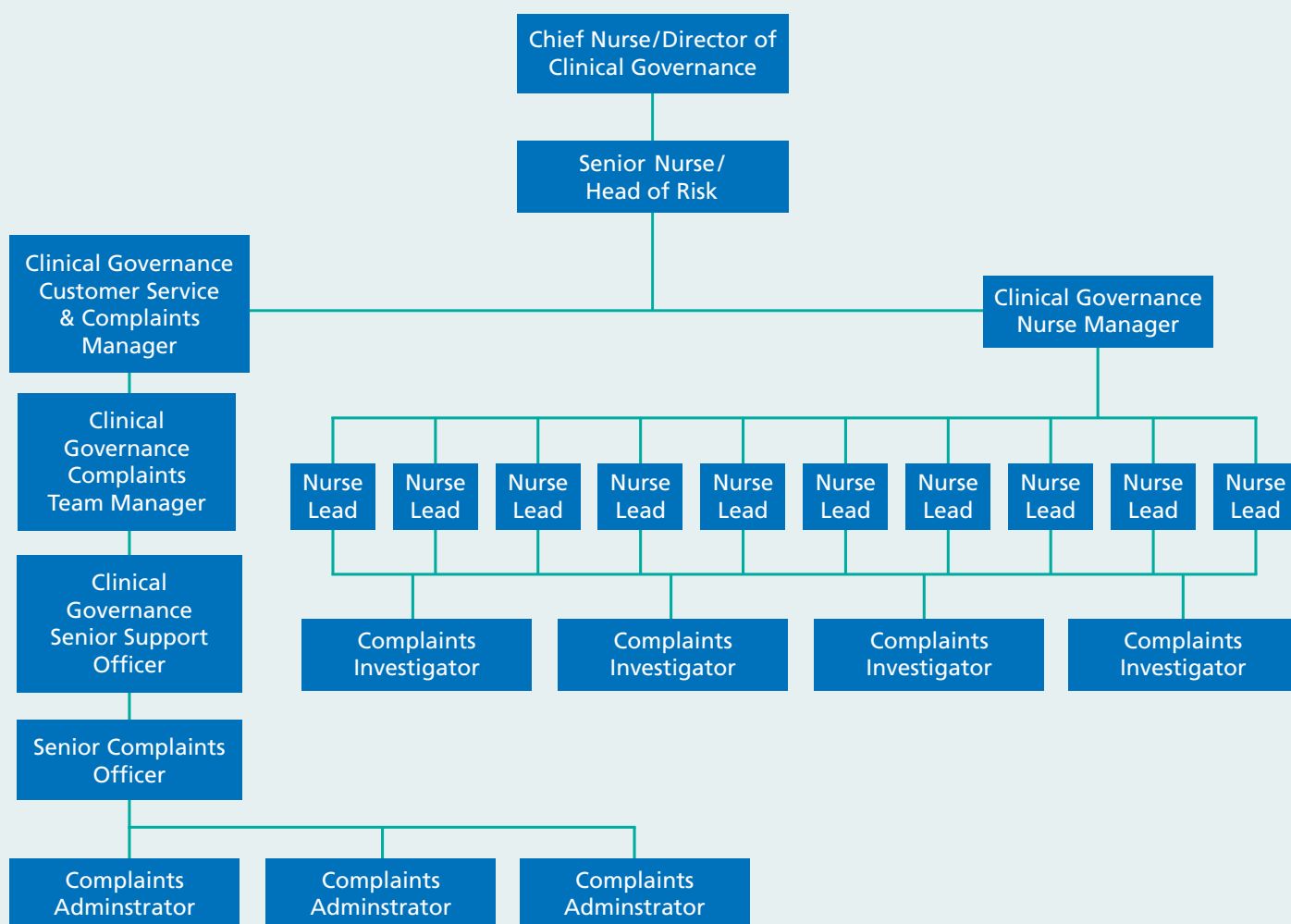
Review of Ward Restrictions or Trust Exclusion

Any restrictions or exclusions approved by the Trust Lead at the outset of the investigation will be discussed between the Trust Lead and the Nurse Lead/ Investigator before the worker is allowed back to work in the Area/Trust.

Formal Outcome

After a discussion with the client Trust, a formal closure letter is sent to the worker, Trust Lead and the complainant (Sister/Ward Manager/Matron).

Our Structure



Further Information

If you would like further details about any of the information in this document or if you have any other governance queries, please email the Complaints Team at: cims@nhsprofessionals.nhs.uk