


NHS Complaints Procedure



Procedure & Responsibilities

Document History

Date	Rev	Comments
01.02.22	01	Creation of Procedure
27.03.24	02	Revision of Document

Prepared By		Date
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Policy Statement

Reachout Medical Ltd values the opinion and feedback of its employees, candidates and clients (including Frameworks and Participating Authorities) and is committed to improving service quality and resolving issues raised in response to feedback, suggestions, complaints or service issues.

To achieve this we operate the following complaints procedure to enable any party to make a complaint quickly and easily and for investigation and subsequent resolution to be completed within set timeframes.

We believe that our customer service is what differentiates us from our competitors, and as such we are continuously seeking ways to improve the service that we give to both our Clients and candidates.

Scope of the Policy

This policy applies to complaints relating to any aspect of the company's service provision, policies and procedures and includes clinical complaints. All employees are required to comply with this policy when dealing with complaints and if required complaint escalation irrespective of whether they are raised by a Client/Participating Authority, candidate/worker or other 3rd party.

Response Times for All Complaints

Response times for all complaints will be as follows:

- Acknowledgement of complaint in writing immediately on receipt and always **within 2 working days** outlining the next steps, aims and timelines.
- Investigation will commence immediately with an assessment of the situation and contact with all individuals involved.
- Interviews with individuals involved will be held as required within 48 working hours unless there are extenuating circumstances.
- A response will be made to complainant within 48 hours of completing interviews. We will take all reasonable and practicable steps to resolve the complaint **within 10 calendar days** of initial receipt unless the nature of the complaint requires additional investigation or action by an appropriate third party (including Professional or Regulatory Bodies, government organisations, the Employment Agency Standards Inspectorate, Home Office UK Border Agency, HMRC, the Counter Fraud Service, Police, Social Services Department or Independent Safeguarding Authority) in which case the complaint will be made good or resolved as soon as possible thereafter.

Operational Complaints Procedure

Although the bulk of service issues are raised and dealt with operationally on a day-to-day basis, there may be occasions when a particular issue needs to be raised and handled formally.

We operate a very open and accessible operational structure, ensuring that our directors and where relevant senior clinical staff are available when required to all parties. This structure allows decisions requiring executive level input to take place quickly and efficiently, streamlining the service to our Clients/Participating Authorities and candidates.

All complaints and service issues will be thoroughly investigated and documented with all parties involved. Clear and accurate communication is central to effective resolution.

Operational complaints should be initially made to:

Name & Job Title: Laura Bingham, Operations Director

Insert Telephone No: 07792 285431

Email Address: laura@reachoutmedical.co.uk

Postal Address: Suite 4, Leonard Place, 2 Westerham Rd, Keston, BR2 6HQ

Information will be requested regarding who is making the complaint together with the nature of the complaint. The person making the complaint will be asked to provide us with all necessary information surrounding the complaint in order for us to undertake a full investigation subject to the restrictions imposed by data protection legislation / UK GDPR. This information will be recorded in our complaints register.

We will investigate the complaint and interview relevant parties as appropriate. Written statements will be obtained from those interviewed and a summary report will be written. Action to resolve the complaint will be detailed, and where appropriate, changes to our standard processes and procedures will be implemented to prevent re-occurrence and improve service. Workers will be informed of any complaint relating to them and be involved in agreeing actions to resolve the issue and to prevent recurrence (unless the issue relates to fraud or a confidential reference provided by the Client/Participating Authority).

During the complaints resolution process, we will ensure that the Complainant is kept abreast of progress in making good or resolving the complaint in writing on request. On resolution, details of the complaint, the agreed resolution and actions / procedures put in place to prevent recurrence will be provided to all parties in writing.

Clinical Complaints Procedure

We are committed to ensuring the safety and wellbeing of patients and as such have a procedure which enables customers (including Participating Authorities), healthcare workers, suppliers, company employees and patients to raise clinical complaints in respect of:

- The behaviour, competence or performance of a healthcare worker.
- A concern relating to a healthcare worker's registered status, experience, background or training.
- An allegation of abuse or neglect.
- Breaches of relevant codes of conduct (including those of relevant regulatory bodies and Clients/Participating Authorities).
- A specific incident that has (or could have) resulted in harm to a patient.
- A safeguarding issue.

- Any other clinical concern (raised by anyone within a clinical environment).

Our Clinical Complaints procedure operates in accordance with all the main recruitment frameworks, NHSE requirements and NHS Litigation Authority Risk Standards.

Healthcare workers are advised of their obligations to report any complaint made by a patient, the Client/Participating Authority or a co-worker to us and to a senior person in the department in which they are working.

We have assigned a single point of contact for ensuring that clinical complaints are dealt with quickly and thoroughly. Clinical complaints should be made in writing or by telephone and then followed up in writing to the Clinical Manager

Receipt of the complaint will be acknowledged in writing pending investigation within the timescales specified above.

Information will be requested regarding who is making the complaint together with the nature of the complaint. We will request details of

- The background of the issue.
- The name(s) of the individuals involved.
- Specifics relating to dates, times and locations where the incident(s) took place.
- Witnesses to the incident(s).

The Clinical Manager will ensure that the customer is notified immediately, and where appropriate, the relevant Professional / Regulatory Body, Independent Safeguarding Authority and Police may also need to be notified to aid our investigation and comply with our legal and best practice obligations.

The Clinical Manager will investigate the complaint and interview individuals relevant to the complaint as appropriate including the complainant and healthcare worker about whom the complaint is being made. The healthcare worker will be fully informed of the complaint(s) relating to them and will receive a written copy of the complaint (unless it is inappropriate to do so e.g. if the complaint relates to adult support and protection). The healthcare worker will be given up to 5 days to provide a response to the complaint in writing.

Written statements will also be obtained everyone interviewed in relation to the complaint.

The Clinical Manager will review all supporting information that we hold on the healthcare worker e.g. details of the employment checks undertaken, their work history including any previous assignments with us and end of assignment references, details of their work performance from previous Clients/Participating Authorities (if they have worked for us before), and any previous issues or concerns that have been raised about the individual.

Depending on the nature of the complaint, the healthcare worker may be suspended pending investigation. This decision will be made in conjunction with all relevant parties.

During the complaints resolution process, we will ensure that the complainant, the customer and the healthcare worker(s) concerned (where appropriate) are kept abreast of progress in making good or resolving the complaint.

Action to resolve the complaint will be documented and shared with all parties within the timescales specified above. This may include reinstatement of the healthcare worker to termination of the assignment and exclusion from future work with us. All parties will receive a written copy of the outcome of the complaint and details of the resolution.

Poor Performance, Confidential References & Worker Supply

Should we receive a poor report of a worker's performance via a confidential reference supplied by the Client/Participating Authority, we will not supply that worker until action has been taken to resolve the issue and the Client/Participating Authority is satisfied that the issue has been resolved, will not recur and has confirmed this in writing to us.

Reporting Complaints to Professional / Regulatory Bodies

If the complaint relates to malpractice, safeguarding or an event that requires notification (i.e. where we believe that patients or staff may be at risk of harm from inadequate or unsafe clinical practice or inappropriate behaviour or there is a risk that an individual may pose a threat to patients or staff because their conduct compromises the effective function of a team or service), we will provide a written report to the CQC, Independent Safeguarding Authority, the relevant Professional / Regulatory Body (and if appropriate the Police).

Each professional body has their own complaints procedure that can be found on their website as follows:

- **General Medical Council** - www.gmc-uk.org.
- **Nursing & Midwifery Council** - www.nmc-uk.org.
- **Health & Care Professionals Council** - www.hcpc-uk.org.

If it is agreed that we are to make the report to the Professional / Regulatory Body, our Complaints Manager will contact them and furnish them with all available information to enable them to conduct a full investigation. All communication and feedback relating to this will be documented and logged on our system, and we will remain in contact with the Professional / Regulatory Body at agreed intervals throughout the investigation to monitor progress. This will involve adding prompts to our system to schedule follow up contact with the Professional / Regulatory Body at the agreed frequency to ensure we remain up to date with the investigation and ultimately with its outcome when this has been reached. Each contact with the Professional / Regulatory Body throughout this investigation period will be logged in our complaints register and also on the candidate's file on our CRM. Any healthcare worker being investigated by a Professional / Regulatory Body will be suspended from their assignment, and the Client/Participating Authority will also be updated throughout the process until an outcome is reached. On receipt of the outcome, we will co-operate with any actions agreed / instructed. We will also discuss with the Client/Participating Authority whether an Alert Notice needs to be issued.

Whilst Reachout Medical Ltd will report complaints relating to malpractice, safeguarding or an event that requires notification as specified above, complaints of this nature can also be raised by colleagues, patients or members of the public directly. Anyone can raise a concern if they feel the safety of patients or the public is at risk. It then becomes the duty of that regulatory body to decide whether the healthcare worker is fit to practise.

Alert Notices

If we receive a complaint relating to potential harm, unsafe clinical practice or inappropriate behaviour that may pose a risk to patients or staff, we will discuss the situation with the person raising the concern to obtain full disclosure of the situation. If the customer is unaware of the issue, we will appraise them of the situation to establish whether an Alert Notice needs to be issued, and co-operate with any actions required.

If we are made aware of an alert notice about a healthcare worker who is registered with us but is not working, we will put their application on hold until the outcome of the investigation has been completed, and make a record on our database accordingly to prevent them from being assigned until such time as the alert notice has been revoked or lifted.

If we are made aware of an alert notice about a healthcare worker who is working on a current assignment, we will:

- Suspend them pending an investigation and advise the customer immediately.
- Ask the healthcare worker a full explanation in a face to face meeting.
- For doctors and nurses, we will check with the Responsible Officer / Confirmer to establish information about the investigation and their decision relating to the worker (including whether they have referred the issue to the relevant Professional / Regulatory Body).
- If it has been referred to a Professional / Regulatory Body, we will obtain full details of the case (if available) and follow instructions relating to whether the worker is to be allowed to continue working or not.
- Put a notification on their record on our system to prevent reassignment until such time as the alert notice has been revoked.

All healthcare workers receive induction guidance during which they are advised that if an alert notice is received by them, they must cooperate fully with any investigation and provide any information requested within the specified timescale. We also require healthcare workers to inform us of any alerts that relate to their own work whilst on assignment with Reachout Medical's customers.

Care Inspectorate (Scotland)

We are registered as a Nurse Agency and regulated by the Care Inspectorate for our operations in Scotland.

The Care Inspectorate was set up in April 2011 by the Scottish Government as a single regulatory body for social work and social care services, including child protection and the integration of children's services.

To raise a concern or make a complaint at any time to the Care Inspectorate, contact should be made by:

- Contacting their national enquiries line on 0345 600 9527 between 9am and 4pm Monday-Friday, or
- filling in their online complaints form at <http://www.careinspectorate.com/index.php/online-complaint-form>, or
- emailing them at concerns@careinspectorate.gov.scot, or
- writing to them at Compass House, 11 Riverside Drive, Dundee, DD1 4NY

If the complainant is unhappy with the outcome, they have the right to ask the Scottish Public Services Ombudsman (SPSO) to look into their decision. The Ombudsman can be contacted at: <https://www.spsso.org.uk/contact-us>.

The SPSO website has information on making a complaint and the types of complaints it looks at. They are the final stage for handling complaints about public services in Scotland.

Reachout Medical Complaints Escalation Process

Should the complainant be dissatisfied with any aspect of the handling of their complaint or the outcome once the above timescales have elapsed, they should contact the Complaints Manager, by outlining the details in full, to:

The Complaints Manager

Reachout Medical Ltd

Postal Address: Suite 4, Leonard Place, 2 Westerham Rd, Keston, BR2 6HQ

The complaint will then be investigated by the Complaints Manager, who will propose a course of action. The Complaints Manager will continue to review the outcome of the complaint at agreed times for a minimum period of 12 months.

Escalation to the REC

In the event that our response to a complaint relating a breach of the “REC Codes” is unsatisfactory, the complaint may be escalated to the REC by writing to them at complaints@rec.uk.com or by post at REC, 20 Queen Elizabeth Street, London, SE1 2LS including details about who was involved, when the incident occurred and any other relevant details that led to the complaint.

Recording, Review & Analysis

A full written record of all complaints will be maintained including details of each individual complaint, the actions taken to resolve it and the outcome and progress reports on any outstanding complaints will be provided whenever requested by the Client/Participating Authority.

We will also conduct complaints analysis on a quarterly and annual basis to identify any trends or patterns and where appropriate make changes to our standard processes to prevent recurrence and improve service as part of our Quality Assurance system. Complaints analysis will also form part of management reporting and will be an agenda point for discussion at review meetings.

Provision of the Complaints Policy to Clients and Workers

All Clients/Participating Authorities will be provided with a copy of our complaints policy prior to us commencing supply and thereafter on request. Healthcare workers will also be provided with a copy of this policy (within the Agency Worker's Handbook) prior to their first assignment with Reachout Medical Ltd. Healthcare workers will be required to sign and date the handbook to confirm that they have received and understand all policies and procedures held within it, including our Complaints Policy / Procedure. This declaration will be retained in the healthcare worker's file in a format that cannot be altered.

Review

This procedure will be reviewed regularly and may be altered from time to time in light of legislative changes or other prevailing circumstances.