

NHS Professionals Complaints and Incidents Policy 1. Introduction

NHS Professionals is committed to providing high quality Bank members to our client Trusts. We ensure the bank members that we supply to the Trusts have the appropriate skills, knowledge, and training to ensure they provide high quality care to patients but also maintain safety.

We actively encourage feedback on the services we provide and the staff who provide services. We do this in a range of ways suitable to the person raising feedback.

We actively seek feedback on the performance of our bank members so they can also be supported to learn and develop their professional skills.

NHS Professionals have a high-level principle of first contact resolution (FCR) and we aim to resolve any complaint or incident at the first contact.

In more serious incidents that require formal investigation we work jointly with our client trusts to resolve as swiftly as possible, Refer to the Serious Incident policy.

2. Definitions

Feedback from client trusts or bank members have many definitions

- Formal complaint – when a Trust or bank member expresses dissatisfaction with an act or omission while on assignment.
- Serious Incident – which requires formal investigation to identify any systemic failings, especially where policy or training needs to be introduced to prevent further occurrences.
- Near miss – A situation where no harm is suffered but has the potential to do so
- Incident – When a bank member has been adversely affected by an act or omission whilst on assignment
- Training and Skills – where a bank member would benefit from additional training
- Vexatious complaints – persistent and repeated unwarranted complaints
- Nursing and Midwifery Council – may require information about a bank member or may be informing NHS Professionals of a Fitness to Practice concern
- Safeguarding complaints – where the police or local authority inform NHS professionals of an ongoing investigation.

3. Principles

NHS Professionals uses a Just Culture to investigate any feedback. It does not set out to actively blame an individual when something has gone wrong but looks to use the opportunity to learn. All feedback is an opportunity to improve develop and learn.

Wherever possible any complaints or feedback should be given locally at the time of the incident.

NHS Professionals will provide client Trust through liaison meetings themed reviews of all feedback that is received.

Feedback is also welcome from our bank members and this is passed to our Trust services to discuss locally in the hope that improvements can be made for the bank members when picking up assignments.

4. Scope of the Policy

Feedback can be provided by

- Trusts and other NHS organisations that NHS Professionals provide a service to
- NHS Professionals Bank members • Commercial agencies and contractors.

This policy relates to clinical concerns about the bank members competence, skills and training or omissions of care.

When patients provide feedback about our bank workers this is logged onto our complaints and Incident module (CIMS) and a joint investigation will take place with the Trust.

Complaints received from our bank members about NHS Professionals services are dealt with through the resolutions team.

Where there is harm to a bank member this is logged onto the CIMS incident module. This is allocated to a nurse lead to provide welfare checks see Incident Policy.

5. Related Policies

- Complaints and Incidents Standard Operating Procedure
- Serious Incident Policy
- Riddor reporting Policy
- Exclusions Policy
- NHSP Disciplinary Policy

6. Responsibility

The Chief nurse is responsible for setting out the process and procedure for handling of complaints and is also responsible for ensuring that all complaints are handled correctly. The senior Nurse for Risk will ensure that summaries of complaints will be provided monthly for the board and quarterly to the Clinical Governance Committee.

7. Clinical Complaints Process

All feedback should be encouraged to be reported through our web-based feedback form.

All complaints are triaged, and risk ranked appropriately all feedback is acknowledged electronically within two working days.

All communications and actions are recorded onto the complaints and incident module.

Upon completion of an investigation the complainant will be informed of the outcome in writing.

If a complaint has the potential to raise serious concerns about the conduct of a bank member the Clinical governance team will work closely with the Employee relations team using the Disciplinary Policy.

All feedback requiring formal investigation should be aimed to be concluded within 25 days.

Any restrictions to the bank members ability to pick up assignments will be actioned by bank member employee services.

Version History

VERSION	Date	Status	Author	HISTORY
1	17.05.2005	Final	Richard	MacMahon, Director of Clinical Governance
2	July 2006	Review	Richard	MacMahon, Director of Clinical Governance
3	June 2007	Review	Richard	MacMahon, Director of Clinical Governance
4	Mar 2010	Review	Karen	Barraclough, Senior Nurse
5	April 2010	Reviewed and updated	Karen	Barraclough, Senior Nurse
6	April 2012	Reviewed and updated	Karen	Barraclough, Senior Nurse Pramjit Khaira, Complaints Manager
7	Sep 2014	Updated with duty of candour	Karen	Barraclough, Senior Nurse

8	July 2017	Reviewed and updated Patients Association	Karen Barraclough, Senior
9	November 2021	Rewritten	Denise Stevens CG Nurse manager
10	November2024	For review	