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Raising and Escalating Complaints/Concerns within Practice Environments Guidance

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Introduction

This guidance advises staff and students of the process for raising and escalating complaints and concerns that arise from practice settings. Throughout all investigations there will be a clear and transparent process in place from initial concern to formal resolution.

KMMS is working closely with the Practice Learning Unit (PLU) at Canterbury Christ Church University (CCCU) in the management of this guidance and therefore some terminology and staff roles that are applicable across the broader work of the PLU are included in this document.

This guidance should be read in conjunction with:

- Raising and Escalating Complaints/Concerns within Practice Environments Policy
- the whistleblowing policies of the Local Education Provider, and with local clinical governance and risk management procedures. This is especially important for notification of adverse incidents or near misses (such as Datix Incident Reporting).

If the student is part of the concern or complaint, please refer to *Low Level Concerns, Fitness to Study and Fitness to Practise Policy* where issues relating to student concerns such as fitness to practise or student support are addressed in separate policy guidance.

Please note that University of Kent (Kent) /Canterbury Christ Church University (CCCU) Guidance to Students on Whistleblowing is a policy that refers to malpractice within the universities and not to 'whistleblowing' or escalating concerns as the phrase is commonly understood within health and social care placements.

Flowchart for Raising and Escalating Complaints/Concerns within Practice Environments

In the case of immediate risk, do not wait to alert University staff:

- Act immediately if you witness or suspect that there is a risk of immediate harm
- Report your concerns to an appropriate person such as the safeguarding lead
- Thereafter inform the Practice Learning Unit at CCCU as soon as you can

A concern or complaint is raised by student or staff member

A **complaint** is where a student is complaining about how they have personally been treated whilst on a practice learning experience and are seeking resolution for themselves.

A **concern** regards practice and/or patient safety, where the safety and well-being of patients/service users or others may be at risk. You are acting as a witness to what you have observed, or to risks that have been reported to you, and are taking steps to draw attention to the situation.

Stage 1: Aim for informal resolution

- Student discusses and addresses issue normally with the Practice Assessor/Lead Educational or Clinical Supervisor. If this is not possible discuss with the KMMS Student Life and Wellbeing Team
- Alert Form completed and marked as resolved.
- If unresolved, complete Section 1 & 2 of Alert Form
- All Alert Forms are accessed via the [website](#)

Stage 2: If not resolved, escalate

- Alert Form submitted via the [website](#) within 3 days of complaint/concern being raised.



Stage 3: Further investigation

- Alert Form to be sent to relevant parties for investigation and for Section 3 to be completed, which should be returned to placementsquality@canterbury.ac.uk.
- An initial response email is required within 5 working days (to show receipt and planned actions), with the completed Section 3 returned within 15 working days.

Stage 4: Outcome of investigation

- The outcome of the investigation (Section 4) is completed by the Faculty Director of Placement Learning (FDPL) and sent to relevant parties. The outcome is reported back to student by the FDPL.
- There may be outcomes that the Practice Learning Unit or other HEIs need to follow up.

Stage 5: External reporting and reviewing the process

- Quarterly reporting of all concerns by Faculty Director of Practice Learning.
- Regular review of handling of process between organisation & university and agreement of actions required.
- Regular monitoring of all complaints and concerns raised through KMMS Placement Committee.
- Information is regularly shared with appropriate professional bodies.

Guidance for Students for Raising and Escalating Complaint/Concerns within Practice Environments

Please read this in conjunction with the above.

Overall, this guidance aims to:

- Encourage you to feel confident in raising a complaint/concern
- To reassure you that if you raise a complaint/concern, the university will support you through the process
- Provide advice about how you may go about raising a complaint/concern
- Ensure that you receive a response to your complaint/concern
- Promote high quality practice for all

What is a complaint and what is a concern?

A complaint is when you are complaining about how you personally have been treated in the practice setting and are seeking resolution for yourself.

A concern is when you are worried about an issue, wrongdoing or risk which affects others. You are acting as a witness to what you have observed, or to risks that have been reported to you, and are taking steps to draw attention to the situation which could adversely affect those in your care, staff, or the organisation.

A complaint can link to a concern – for example, how you are treated may reflect how a service user/patient could be treated; there can be an overlap.

The response to complaints and concerns may be differentiated – complaints may be more easily resolved at Stage 1 of the resolution process, i.e. through talking through the issue with your Personal Academic Tutor/ Academic Lead for Student Support. A complaint may not be escalated as rapidly or as high as a concern when the risk factor for service users is not considered high.

Examples of complaints (and these are just some examples and not a complete list):

- Low standard of practice learning facilitation
- Assessment documents not completed in time
- Reasonable adjustments not being met

Examples of complaints that can raise concerns of standards of service user care:

- Breaching supernumerary status of student
- Students being asked to do tasks beyond those agreed for their level

Examples of concerns:

- Health and safety violations
- Unprofessional staff conduct (attitudes, values and behaviour), perhaps related to equality and diversity
- Low standard of care and service delivery
- Issues related to the environment of care, such as resources and staffing
- The health of a colleague affecting their ability to practise safely
- Issues around equipment and lack of adequate training
- Financial malpractice

Considering the Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry (Francis, 2013) and the resulting review of the NHS complaints system, Putting Patients Back in the Picture (Clwyd & Hart, 2013), there is a call for a cultural shift where:

- All feedback is welcomed
- Feedback is considered as part of a learning cycle to improve care
- Complainants can feel confident that their concern will be dealt with
- The process is open and transparent.

For all staff and students, there is a professional responsibility, a duty of candour, to escalate all concerns relating to practice learning environments. There is a professional duty to put the interests of the people in your care first and to act to protect them if you consider they may be at risk. Safeguarding people is everyone's business and if you have a safeguarding concern, you must raise this. **Speaking up** on behalf of people in your care, raising genuine concerns, represents good practice. 'Doing nothing' and failing to report concerns is unacceptable.

'Safeguarding means protecting people's health, wellbeing and human rights, and enabling them to live free from harm, abuse and neglect. It's fundamental to high-quality health and social care' (<http://www.cqc.org.uk>).

Please read the safeguarding section at

<https://www.gov.uk/government/publications/care-act-statutory-guidance/care-and-support-statutory-guidance#safeguarding-1> for duties and process of managing safeguarding concerns and enquiries under the Care Act 2014.

It can be difficult to go into troublesome cultures and stand up for change however advocating for good practice is part of your professional role. It can be difficult to raise concerns. You may worry about being disloyal or have a fear of reprisals, however protecting people in your care is your primary concern. If you are a student, please speak to your Personal Academic Tutor for support if you are questioning whether you should raise a complaint/concern.

You should always be acting with the best of intentions. The University and KMMS will not tolerate any criticism or negative responses regarding your actions when you raise a complaint/concern in good faith. Failure to report concerns can lead to your Fitness to Practise being questioned and investigated. However, a malicious or vexatious complaint could result in disciplinary action.

You do not need to have all the facts to prove your concern – just a reasonable belief that people are at risk from harm. It could be happening now, took place in the past, or likely to happen in the future.

Please note: If there is risk of immediate harm to a person in your care or a patient, you should report your concerns to the person in charge of the practice area without delay. Acting appropriately may include calling the police or contacting the relevant safeguarding contact. Follow up your actions by notifying the Faculty Director of Practice Learning as soon as possible. If a practice placement provider takes immediate action (and there could be police interviews), the University (contact point being the Faculty Director of Practice Learning) expects to be informed as soon as possible and no later than the following working day.

For further information on professional duty of candour and advice on addressing complaints and concerns, please see the following guidance that is underpinned by the GMC , HCPC and NMC professional codes of conduct:

GMC (2012) *Raising and acting on concerns about patient safety* at:

<https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/raising-and-acting-on-concerns>

NMC (2015) *Raising and Escalating Concerns: Guidance for Nurses and Midwives*, Available at: <https://www.nmc.org.uk/standards/guidance/raising-concerns-guidance-for-nurses-and-midwives/>

HCPC (2013) *Raising and Escalating Concerns*, Available at: <http://www.hcpc-uk.org/registrants/raisingconcerns/>

Confidentiality

When raising and escalating a complaint or concerns, whilst we understand that there may be times when you would prefer to keep your identity confidential, your anonymity cannot be guaranteed for professional and legal reasons. Any complaint or concerns raised will need to be fully investigated and in more serious situations, this may include you being asked to provide a full and accurate witness statement for the Police or the University which may be shared under the Kent and Medway Information Sharing Protocol. Your evidence could be pivotal in an investigation. Support will be available for those involved in an escalating concerns process.

Ideally, if you have a complaint or concern, you need to address the issues within the practice area first, near the time of the issue; this can take courage. However, if uncertain, you can call upon your Personal Academic Tutor or Student Support and Wellbeing Services for support – we recognise that as a student you are an evolving practitioner. Students have regular access to supervision where issues can be

discussed. There should be an opportunity for informal discussion and resolution. The issue may be resolved at this stage and this can be the end of the process. If the matter is resolved and you consider it is an issue the University should be aware of in order to maintain good practice placement experiences for our students, then please still complete an Alert Form and return this to placementsquality@canterbury.ac.uk, clearly marking this as **resolved**. This should be written in collaboration with a University/ KMMS staff member where possible. The Faculty Director of Practice Learning (FDPL) can then monitor practice placement experiences, trends and issues to inform their work. They may decide further action is required. Low risk complaints will be managed through regular reporting to the practice placement provider and feed into ongoing work to improve standards.

Completing a raising complaint/concerns Alert Form

Keep an accurate record of your complaint/concerns and actions taken, giving details such as dates and times of any events, details of witnesses and how you have attempted to resolve the concerns.

Please protect service user/patient confidentiality within your reporting. Also, omit staff names for roles instead – we can always ask for names at a later date if required. Discretion should be used at all times around giving peoples' names involved in the incident.

The NHS gives advice for reporting concerns available at:

<http://www.nhsemployers.org/~media/Employers/Documents/Campaigns/Top%20tips%20for%20raising%20concerns.pdf>

This includes:

- Be specific
- Be positive
- Express yourself in a professional manner
- Wherever possible, raise the concern with the support of your colleagues
- Keep a paper trail
- If you receive assurance of action in response, keep this on record

As a student, you are advised to seek support in completing the Alert Form, most likely from your Personal Academic Tutor or Module Lead. Please aim to complete and submit an Alert Form within 3 working days of raising your complaint /concerns. This allows the issue to be addressed in a timely manner.

Please return the Alert Form to placementsquality@canterbury.ac.uk. Avoid copying in other parties as the information should be considered sensitive and confidential.

Parallel Policies and Procedures

University/KMMS guidance should be used in conjunction with the whistleblowing policies of the practice placement provider, and with local clinical governance and risk management procedures. This is especially important for notification of adverse incidents or near misses (such as Datix Incident Reporting). If there is a Datix recording that involves a student, the University expects to be informed through an Alert Form. At the start of each practice experience, please ensure you ask about and read the safeguarding policies for the practice placement provider. These will notify you of the designated safeguarding lead. The large NHS Trusts and Kent County Council have whistleblowing telephone contacts, however as a student or member of staff, there is support available at the University/KMMS.

Out of Hours Management

If an urgent complaint/concerns arise outside of university opening hours that cannot be raised locally, contact the Senior Manager on call within the practice organisation to discuss the issue. This should be followed up with an explanatory email to the member of staff in your programme who is identified as your practice support copying this email to placementsquality@canterbury.ac.uk so the FDPL is ready to respond on the next working day if urgent or within 5 working days.

Note on Alerting Police/Regulatory Body

After exhausting the Raising and Escalating Complaint/Concerns process, you are advised to seek advice from the Faculty Director for Practice Learning (FDPL) if you feel your concern has not been addressed adequately. You should seek advice and clarification from the FDPL before reporting your concern to a regulatory body. You are requested to inform the FDPL if you do contact a regulatory body or the police.

The following external organisations provide advice and support on raising and escalating complaints/concerns within Health & Social Care settings.

Public Concerns at Work (PCaW) (provides independent confidential advice)

020 7404 6609

Helpline@pcaw.co.uk

www.pcaw.co.uk

General Medical Council:

https://www.gmc-uk.org/-/media/documents/Raising_and_acting_on_concerns_about_patient_safety_English_0617.pdf_48902813.pdf

Health and Care Professions Council (2013)

<http://www.hcpc-uk.org/registrants/raisingconcerns/>

Nursing and Midwifery Council:

<https://www.nmc.org.uk/education/becoming-a-nurse-or-midwife/raising-concerns-as-a-student/>

Freedom to Speak Up: (Whistleblowing Policy for the NHS)

<https://improvement.nhs.uk/resources/freedom-to-speak-up-whistleblowing-policy-for-the-nhs/>

Further Reading

Department of Health (2000) No Secrets: Guidance on Developing and Implementing Multi-agency Policies and Procedures to Protect Vulnerable Adults from Abuse

Health and Care Professions Council (2016) Standards of Conduct, Performance and Ethics. Available at: <http://hcpc-uk.org/publications/standards/index.asp?id=38>

Health and Care Professions Council (2016) Information for Students and Education Providers: Guidance on Conduct and Ethics for Students. Available at:

<https://www.hcpc-uk.org/resources/guidance/guidance-on-conduct-and-ethics-for-students/>

Kent County Council, Adult Protection Policy, Protocols and Guidance for Kent and Medway (Available at: <https://www.kent.gov.uk/social-care-and-health/information-for-professionals/adult-protection/adult-protection-forms-and-policies/national-adult-protection-legislation>, Last accessed 04/12/19)

Kent Safeguarding Children Board, Kent and Medway Safeguarding Children (Available at: <http://www.proceduresonline.com/kentandmedway/chapters/contents.html>, Last accessed 04/12/19)

Milligan, F., Wareing, M., Preston-Shoot, M., Pappas, Y. & Randhawa, G. (2016) Supporting Nursing, Midwifery and Allied Health Professional Students to Raise Concerns with the Quality of Care: A Systematic Literature Review, June 2016 (Available at <https://www.councilofdeans.org.uk/wp-content/uploads/2016/07/CoDH-lit-review-students-raising-concerns-FINAL-with-covers.pdf>, Last accessed 04/12/19)

Robert Francis QC (2013) Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry: Executive Summary. Available at:

<https://www.gov.uk/government/publications/report-of-the-mid-staffordshire-nhs-foundation-trust-public-inquiry>

Rt Honourable Ann Clywd MP and Professor Tricia Hart (2013) A Review of the NHS Hospitals Complaints System: Putting Patients Back in the Picture. Available at:

<https://www.gov.uk/government/publications/nhs-hospitals-complaints-system-review>

Glossary of Terms and Roles / Responsibilities in Practice Education

Complaint – within the context of this document, a complaint is where a student is complaining about how they have personally been treated whilst on a practice learning experience and are seeking resolution for them self.

Concern – a concern relates to an issue, wrongdoing or risk, which affects the student, patients or others.

Student / Learner – interchangeable term for the purposes of this document. The term learner implies students who are also employed in practice, such as a apprentices.

Faculty Director for Practice Learning – lead person within the Faculty of Medicine, Health and Care for managing the Practice Learning Unit and ensuring quality practice learning environments for our students

Personal Academic Tutor (PAT) – students within Health and Social Care are allocated a Personal Academic Tutor who supports their academic journey during their time at Kent and Medway Medical School (KMMS). The PAT does not usually provide placement support for the student, however this may be the most trusted point of contact for the student.

Link, Practice, Placement or Module Lead – a named individual leading practice education within their specific programme. Their role includes supporting the student with practice related issues, and this will involve being the named contact if an issue arises whilst on placement

Practice Assessor/ Practice Educator) / Educational Supervisor– across the Health & Social Care programmes these are the various terms for the immediate supervisor for practice

Practice Placement Facilitator (PPF)/Lead Educational Supervisor – each of the main placement-providing Trusts/Primary Care Networks have a named person/s

leading practice education within their organisation who provides a direct link for the University to correspond on placement issues, standards and allocations

Senior Lecturer in Practice Learning (SLPL) – there is a named SLPL allocated and providing a key link to each placement provider, providing quality assurance and developing the practice learning experience for educators and students

Practice Placement Provider – refers to any organisations that provide practice learning placements for CCCU students on Health & Social Care Programmes

KMMS Quality Manager – Lead link within KMMS for contract monitoring and quality assurance of placements

Working days – the University is open Mon-Fri 9-5pm

Appendix A: Alert Form B

This form should be completed via the website

SECTION 1: CONTACT DETAILS	
Name of person completing this form	
Role of person completing this form	Student <input type="checkbox"/> Staff (KMMS/Kent/CCCU) <input type="checkbox"/> NHS staff <input type="checkbox"/> Member of public <input type="checkbox"/> Other <input type="checkbox"/> Please provide additional details: Click or tap here to enter text.
Email address	
Date	

SECTION 2a: DETAILS	
Who does your complaint/concern relate to? Please tick all that apply	Student <input type="checkbox"/> Staff (KMMS/Kent/CCCU) <input type="checkbox"/> NHS staff <input type="checkbox"/> Member of public <input type="checkbox"/> Other <input type="checkbox"/> Please provide additional details: Click or tap here to enter text.
If this relates to a student, please provide details below:	
Student Name (if more than one student please complete additional forms)	
Student Number (if known)	
Year group/Cohort of student (if known)	
Programme/Module/Placement (if known)	
Supervisor (if known)	

Organisation	
Senior Manager within the practice placement area and the Trust Lead for (Undergraduate) Medical Education or Practice Placement Facilitator (PPF)/Lead Educational	

Supervisor or equivalent and their email address	
Senior Lecturer in Practice Learning/GP Educator	

SECTION 2b: COMPLAINT/ CONCERN DETAILS

Date and time of incident(s) or reason for Alert form:

A **complaint** relates to an issue where a student is complaining about how they have personally been treated whilst on a practice learning experience (placement) and are seeking resolution for themselves.

A **concern** relates to an issue, wrongdoing or risk, which affects others.

Is this a Complaint or Concern? (please specify)

Summary:

(Please refer to roles rather than names where possible. Please do not include any patient identifiable information)

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Please provide details of any action taken so far and parties involved
(Please refer to roles rather than names where possible. Please do not include any patient identifiable information)

Is this report written in collaboration with others? If so please state this here:

SECTION 3: FURTHER INVESTIGATION/ RESPONSE

Please provide a response and any actions agreed (including reporting this as per local protocols, seeking medical treatments, discussion in supervision etc.) (must be completed by Practice Placement Provider, or CCCU/KMMS representative if the issue has been raised by practice)

Should you have any further information to add following initially submitting this section, please send it to placementsquality@canterbury.ac.uk with the subject line as the case number.

Name	
Role	
Date	

Expected timeframes:

- Student to raise the complaint/concerns within 3 working days – or immediately depending on urgency of situation;
- 5 working days for Practice Placement provider to provide initial response;
- 15 working days for complete action from Practice Placement Provider and response to student, however it can take much longer for an investigation to be completed
- Student/staff to be updated of investigation within 15 working days of initial raising of complaint/concerns
- Other HEIs to be informed as required depending on the circumstances (FDPL)

Alert REPORT - TRACKING

(FOR OFFICE USE ONLY)

Case Number:

SECTION 4a: THEMES FROM RAISING COMPLAINTS/CONCERNS REPORTS

LEVEL OF PRACTICE EDUCATION

Standard of practice learning facilitation (complaint)	
Incorrect assessment documentation for student	
Impact of low staffing levels on quality of practice learning facilitation	
Assessment documents not completed in time	
Reasonable adjustments not being met	
Breaching supernumerary status of student	
Students being asked to do tasks beyond those agreed for their level (complaint/concern)	
Reduced satisfaction in placement evaluation data	

POTENTIAL INJURY

Accidental injury to Student (e.g. needle stick, back injury)	
Assault on student	
Student witnessing an assault on staff member	
Student involved in medication error	
Student mentioned in patient complaint	
Breaching confidentiality	

STUDENT MALPRACTICE

Inappropriate use of social media by student	
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Unprofessional behaviour of student (e.g. attendance)	
CONCERN - STAFF BEHAVIOUR	
General standard of staff behaviour	
Standard of staff to patient care	
Poor moving and handling technique of staff	
Low staffing level impacting on level of care	
Staff unfamiliar with Trust/PVIS health guidance/policy	
DISCRIMINATORY BEHAVIOUR	
Inappropriate behaviour of staff to student	
Possible bullying indicated from staff to student	
RAISING AND ESCALATING COMPLAINT/CONCERNS PROCEDURE	
Misuse of RC (e.g. for student unwell on shift)	
Datix being completed - overlooking RC process	
OTHER – brief outline	

SECTION 4b: OUTCOME OF INVESTIGATION/ CASE REFLECTION
Case number:

Comments and conclusions

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Date of Case Review by FDPL	
FOLLOWING CASE CLOSURE, FDPL HAS NOTIFIED THE FOLLOWING: (THIS MAY CROSS PROGRAMMES)	
Student (Informed by FDPL or agreed appropriate KMMS/CCCU staff)	
Staff member reporting (Informed by FDPL)	
Educational Supervisor/PA/Practice Educator (FDPL to agree with practice placement provider who informs)	
Senior Lecturer in Practice Learning (Informed by FDPL)	
Head of Faculty/School/Programme/Dean of KMMS (informed by FDPL)	
Programme Practice Lead/Module Lead or Year Lead (Lead is expected to inform people if necessary within their own team) (Informed by FDPL)	
Personal Academic Tutor	
GMC by Dean of Medical School or Quality Manager	
HCPC/NMC by FDPL	

Appendix B: Reflective Analysis of Issue of Concern

<p>What happened to trigger your concerns? (What did you see? what was said, what did you do?)</p>	
<p>Who was involved? Did you ask their perspective and if so, what was it?</p>	
<p>Were there any additional influences that are relevant (emergency situations, previous issues, context or environmental factors)?</p>	
<p>What is your interpretation of what happened? How confident are you of your interpretation?</p>	
<p>Do you think your perspective is complete or could there be some information missing? If so, what might that be?</p>	
<p>Can you think of any alternative explanation?</p>	

Was there anything else you could have done / said at the time?	
What action was taken or proposed during the placement (incident reporting etc.)	