Accreditation unit

Escalation policy / Escalating patient safety concerns / Escalating concerns in clinical services

November 2017

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1.0 Introduction and purpose

The Accreditation Unit (AU) and each of its accreditation schemes aim to support services in delivering high quality standards for patients. Services undergo an assessment every five years, as well as an annual review process.

There may be instances where concerns are identified by the assessment team, either through review of a service’s evidence or during the assessment about the processes in place at the service. Concerns about a service may also be raised to the AU by members of the public or staff in the service. This escalation policy outlines:

- What constitutes a concern
- How to raise a concern
- How to deal with a concern.

2.0 Scope

The scope of this policy is concern about the quality and safety of a service, which may include:

- the fitness to practice of a healthcare professional
- how patients and employees are being treated
- the welfare of patients and persons receiving care
- the safety and safeguarding of persons receiving care, their dignity and privacy.

Out of scope of this policy are any concerns about other departments at the organisation that is being assessed. For example, it would not be within scope of this policy if an assessor witnessed an issue at the main reception of a hospital during a JAG assessment of an endoscopy service. Also out of scope of this policy are concerns raised about services that are not registered or engaged with the accreditation scheme. In all of these instances, the individual identifying the concern should liaise with the management of that organisation or, if applicable, the organisation’s Patient Advice and Liaison Service (PALS) at the time of witnessing the incident. This concern should be raised as an individual concern and not one raised on behalf of the AU or its schemes.

The AU has a responsibility to investigate concerns which relate to the accreditation standards. It is not within the remit of the AU to investigate concerns raised if they do not specifically relate to the accreditation standards and in some instances it may be more appropriate to direct the individual(s) to other organisations who may be able to investigate the concern.

3.0 Definitions

The following definitions should be used in the context of this policy:

**AU independent contractor:** Any individual working on behalf of the AU, who may be employed through another organisation. For example, clinical leads, chairs of steering groups, assessors, lay representatives and accreditation consultants.

**AU senior leadership team:** AU manager, Audit and Accreditation operations director and Audit and Accreditation clinical director.

**AU staff:** Any individual employed by the AU, often referred to as ‘office team’
Concern: An issue about a service which requires attention and escalation as it may lead to harm of patients and/or staff in a service.

Scheme management team: Scheme manager, head assessor and clinical lead(s).

4.0 Related policies

This policy should be used and referred to in conjunction with the following policies:

- AU complaints policy.

5.0 Responsibilities

Scheme management team:

- to provide oversight and leadership of investigation of any and all concerns raised
- to receive and act on concerns raised
- to ensure a proactive and objective view is taken and that the service has an opportunity to respond to the concern before a judgment is made
- to escalate issues to AU senior leadership team
- to determine whether further escalation to external agencies may be required
- to treat matters confidentially
- to review records of concerns raised at quarterly intervals.

AU independent contractor(s):

- to raise concerns to the scheme management team in a timely manner.

AU staff:

- to raise concerns to the scheme management team in a timely manner
- to maintain records of concerns raised.

AU senior leadership team:

- to provide leadership and guidance to the scheme management team
- to share learning from concerns raised across all schemes hosted by the AU and ensuring that matters are treated confidentially within the AU.

6.0 Procedure

6.1 Concern raised by AU staff or AU independent contractor during accreditation process

This section sets out how the AU will respond to issues brought to its attention by assessors and AU staff during the course of the accreditation process.

If a concern is identified, this should be brought to the attention of the scheme management team, who should review the detail of the concern and ascertain which standard(s) the concern relates to. In some instances, for example where a concern is raised about a service policy or process, it may be appropriate for the independent contractor or a member of the scheme management team to arrange a call with the service to clarify the issue. It may be that this resolves the concern.
If the concern is not resolved by having a discussion with the service, and the individual raising it feels that there may be an issue with the service maintaining accreditation standards or there is a risk to patient/staff safety in a service, the matter should be escalated to the scheme management team or AU senior leadership team. The scheme management team or AU senior leadership team will determine whether a letter is required to go to the service team or whether the senior management team (typically the CEO) in the organisation need to be informed. In determining who the letter should be addressed to, the scheme management team and/or AU senior leadership team should consider the severity of the concerns raised. A template letter can be found in appendix A. In all cases, the AU will be objective and await a response to the allegations before acting on the information.

The AU will expect to receive a response within 28 days and if the response satisfies the scheme management team and/or AU senior leadership team that patient and staff safety and experience is being maintained, then the case will be closed.

However, if the scheme management team remain concerned after this time, the accreditation status of the organisation may be affected. It may be necessary to inform the Care Quality Commission (CQC) or equivalent and, in instances which relate to the practice of individuals in the organisation, the relevant professional regulatory body.

If there is urgency required then the scheme management team and/or the AU senior leadership team will act as quickly as is appropriate.

6.1.2 Concern raised by member of the public or staff of a service

There may be occasions when concerns are raised to the AU about a service by a member of the public or by a staff member(s) of that service. Whilst the AU embraces a culture where concerns can be raised, there may be occasions where it would be more appropriate to signpost members of the public to other organisations.

In the first instance, the AU will determine whether the member of the public is raising a concern about a registered service (regardless of accreditation status). If the service is not registered with the scheme, then the AU will be unable to investigate further and the member of the public should be redirected to another organisation (see further details below). Next, the AU will determine whether the concern(s) raised relate to accreditation standards and/or quality and safety of the service. If the concern raised is outside the scope of the accreditation standards, then the member of the public will be redirected to the most appropriate organisation. If the concern raised is within the scope of the accreditation standards and raises significant concerns about the quality and safety of the service, or if one is in doubt, the concern will be escalated to the scheme management team.

Where the scheme management team agree that the concern raised is about a registered service, within the scope of accreditation standards and raising concerns about safety and/or quality of a service, a call or letter to the service should be arranged to discuss further, as per the procedure outlined above. A template letter can be found in appendix A.
6.1.3 Recording

All issues relating to registered services will be logged on the AU appeals, issues and complaints (AIC) log which will be reviewed at quarterly intervals by the scheme management team and AU management team so that trends can be monitored. The AIC log should also be reviewed prior to upcoming accreditation assessments to review if any concerns have been logged.

The following points are required for the issue log.

- Date of issue being raised
- Name of complainant / organisation
- Organisation incident refers to
- Service accreditation status
- Description of issue.

6.1.4 Redirecting individuals

It may be appropriate to redirect individuals to other organisations to deal with their concern raised if outside the scope of this policy. The table below provides some examples as to which scenarios may require signposting though this is not an exhaustive list. If in doubt, individuals should discuss the matter with the scheme management team for advice. AU staff and independent contractors will not give advice to the individual but will offer options which the individual can consider and act on as they wish.

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<th>Example scenario</th>
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| Member of public calls to say a service has harmed them/family member | • Complaints procedure at the organisation concerned  
• Parliamentary and Health Service Ombudsman (for NHS services only, or private providers commissioned by the NHS). This organisation typically only accept complaints if an individual has been through the complaints procedure at the organisation first.  
• This website may be helpful to individuals [http://www.nhs.uk/chq/pages/1084.aspx?categoryId=68 'How do I make a complaint about an NHS service?'] |
| Staff member from service claims they have been bullied by a service | • Grievance procedure at the organisation concerned  
• Typically external organisations will be concerned about bullying when it is across a team or the Trust and not just an individual issue. The National Whistleblowing Helpline may be able to advise the individual  
• [http://wbhelpline.org.uk/](http://wbhelpline.org.uk/) |
| Staff member or member of the public wants to raise a concern about the practice of a colleague | • Refer to the following organisations:  
  o Doctors – General Medical Council (GMC)  
  o Nurses – Nursing and Midwifery Council  
  o Allied health professionals – Health and Care Professions Council ([www.hcpc-uk.org](http://www.hcpc-uk.org))  
  o Care Quality Commission or equivalent |
Dear CEO,

Re: Concern raised about [potential breach of accreditation standards / [safety and quality]

The XXX scheme has received an anonymous phone call / letter / logged a concern from a staff member/independent contractor, which has raised concerns about the standards in the xxxxxxxx department. We are committed to ensuring high quality xxxxx provision for patients and we are therefore asking for a formal reply to the points raised, as outlined below.

The following points were raised as concerns:
1) XXXXXXXX [relates to standard XXX]
2) XXXXXXXX [relates to standard XXX]
3) XXXXXXXX [relates to standard XXX]

It is alleged that this started in month year XXXX and is still currently occurring / has since stopped.

The XXX scheme fully appreciates that, on occasion, concerns will be raised without validity; however, we do have a duty to investigate matters which relate to the XXX standards, as and when they are brought to our attention.

Please confirm receipt of this letter and provide a response by XXXX date (28 days of the date of this letter). If you are unable to meet this timeframe, please advise and provide an alternative timeframe. If we are satisfied with your response and have the necessary assurance that the XXXX standards are being maintained, we will keep a note of this on file and close the case. If we are not satisfied with the response, we may request a teleconference to discuss further and your accreditation status may be affected. You can expect a response from us within 10 days of your response.

Yours sincerely,

XXXX
Clinical lead xxxxxxxx

cc: Service Clinical Lead - XXX
Service Nurse Lead – XXX
Service Management Lead - XXX