

Poor Performance & Reporting Malpractice Policy & Procedure.

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Version Control

Version 1	24/08/18	Policy created
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Policy Statement

At 'Southern Ultrasound', the quality of the service we provide is of prime importance, both to our own reputation and to patient safety.

For this reason, we take staff training very seriously (see our "Training & Development Policy") and encourage all staff and contractors to take part in comprehensive and regular CPD activities

It is therefore of paramount importance that we also take appropriate action whenever we are made aware of a member of staff who falls below acceptable professional standards.

When we are made aware of any occasion where the professional standards of a member of staff or sub-contractor has potentially fallen below acceptable standards, we shall initiate an investigation, as laid out below

What is Poor Performance

An incident in which the performance of a member of staff is called into question might be highlighted as a result of:

- A complaint or negative comment by a service user
- A complaint or negative comment by a healthcare worker employed elsewhere
- A complaint or negative comment by a member of our staff
- A report by a service manager
- A negative finding during audit

(This is not an exhaustive list)

Not every such occasion will be due to a clinical issue, but each will be investigated to clarify the position

Investigative Procedure

Initial complaint received.

The Service Manager will make an initial assessment of the situation to identify what has occurred.

- If assessment is not possible because, for instance, it was hear-say from a witness who is not available to question again; the matter will be recorded in the staff members record but marked for no further action.
- If the assessment finds the case with-out merit, full details will be recorded in the staff members record, included contact details of all concerned, but marked for no further action.
- If for any reason the Service Manager feels unable to perform such an investigation, for instance if it appears to be such a serious matter that any initial attempt at discovery might jeopardise future investigation, the matter will be formally recorded and passed on to a Company Director without delay

Full investigation

If a full investigation is required, a Company Director will deal with the rest of the procedure, as laid out below.

- A full investigation shall be made by the Director, with involvement of Client management if they prefer.
- As part of the investigation, a formal interview will be arranged with the Staff member concerned.
- The nature of incident will be explained to member of staff, with any supporting evidence.
- An opportunity given for the individual to clarify the position and their actions
- The result of this meeting is likely to lead to further investigation to ensure as true a picture of the situation as possible, is obtained.
- Once a conclusion is reached, the findings will be disclosed to the staff member and other parties involved.

Divulging Findings

A report of 'Southern Ultrasound' findings and any action taken will be provided to any complainant in written form and through a face-to-face meeting

Where applicable, a Joint meeting with the staff member and any complainant may be arranged and means of resolution devised.

At all stages of this procedure, consideration shall be given to **"HSC 2003/012 – Maintaining high professional standards in the modern NHS: a framework for the initial handling of concerns about doctors and dentists in the NHS, Department of Health, December 2003"**

Where that investigation supports a finding of clinical Malpractice, the results of our investigation will be disclosed to our Client, even if they had declined involvement in the initial investigation

Where the Client or another NHS body arranges an investigation in line with HSC 2003/012, Southern Ultrasound shall assist in the investigation to the best of its ability, by providing all requested information and documentation.

Where appropriate, the Staff member is reviewed regularly to ensure no repetition of the offence.

Reporting Malpractice

Where an error or omission is considered to be of a serious nature, consideration shall be given to reporting the facts to the HCPC, SVT or other State Registration body, in addition to reviewing the suitability of the staff member for employment on a Southern Ultrasound contract.

We recognise that the State Registration bodies have the expertise to make the most appropriate decision on the suitability of an individual to continue in their profession and whether their practice constitutes an on-going risk to the public or the profession as a whole. Our referral does not therefore constitute a judgement on the individual concerned, but recognition of a need for more informed judgement.

Reporting such matters shall be the responsibility of a Company Director. Up-to-date reporting mechanisms shall be obtained from the registration body's website.

The Director will also notify the Practitioner that such a referral is being made.

Policy Standards

Distribution

All staff will be made aware of the policy as part of their induction training. If there are any significant changes to the plan that affect the way in which staff respond, these will be communicated to them via team-briefs.

A copy of the policy is available to all staff via their On-Line Policy & Procedure folder, and can be accessed 24/7 from any location with Web Access. A hard copy version is retained at all sites of operation and can be viewed or downloaded from the company's website.

Policy Approval & Review

This policy has been approved by the undersigned and will be reviewed annually and any time there is a material change in equipment or equipment suppliers.

Policy Created: 24/08/18
Kevin Rendell Director

Policy Reviewed v1 14/03/19



Appendix 1 - Equality Impact Assessment

An Equality Impact Assessment has been performed on this policy and procedure. The EIA demonstrates the policy is robust; there is no potential for discrimination or adverse impact. All opportunities to promote equality have been taken.

		Yes/No	Comments
1.	Does the policy/guidance affect one group less or more favourably than another on the basis of:		
	Race	No	
	Ethnic origins (inc. gypsies and travellers)	No	
	Nationality	No	
	Gender	No	
	Culture	No	
	Religion or belief	No	
	Sexual orientation including lesbian, gay and bisexual people	No	
	Age	No	
	Disability - learning disabilities, physical disability, sensory impairment and mental health problems	No	
2.	Is there any evidence that some groups are affected differently?	No	
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	NA	
4.	Is the impact of the policy/guidance likely to be negative?	NA	
5.	If so can the impact be avoided?	NA	
6.	What alternatives are there to achieving the policy/guidance without the impact?	NA	
7.	Can we reduce the impact by taking different action?	NA	