

## The NQAAP's complaints policy

Title	The NQAPP's complaints policy
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When a complaint is lodged, by whatever communication route, it is expected that the participant states in the communication that they wish to complain. However, the National Quality Assessment Advisory Panel (NQAAP) reserve the right to review all communications received and to classify any issues as complaints, irrespective of the initial communication. Conversely, where a 'complaint' is judged to have been raised incorrectly (for example, a misunderstanding of the complaints process), such 'complaints' may be downgraded at the discretion of the NQAAP.

Service users or laboratories with cause for complaint about any aspect of the NQAAP will communicate their concerns to the panel, in writing or email. All complaints will be logged in the minutes of the next NQAAP meeting, along with the actions taken and resolutions if applicable.

Complaints to the NQAAP relate to the actions undertaken as part of the operation of the NQAAP and would include topics such as (but are not limited to):

- actions undertaken by NQAAP
- support provided by NQAAP (to both laboratories and external quality assessment [EQA] providers)
- communications issued by NQAAP
- the referrals by EQA providers to NQAAP
- how an EQA provider is operating (for example, lack of transparency about noncommutability of samples)
- conduct of a member of the NQAAP (in this case the individual should be recluse from any role in the subsequent investigation).

Complaints regarding EQA programme operation will be directed to the appropriate EQA provider. The EQA provider will inform the relevant NQAAP of any upheld complaints or appeals that resulted in changes to EQA programme operation.

Complaints regarding adherence by EQA providers to ISO/IEC 17043 Conformity assessment – General requirements for proficiency testing or laboratories to ISO 15189



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Medical laboratories – Requirements for quality and competence should be referred to UK Accreditation Service (UKAS), not the NQAAP.

All complaints received to the NQAAP are passed to the chair of the relevant NQAAP, who will make best efforts to acknowledge receipt within 5 working days.

Following receipt of a complaint, a review will be undertaken by the NQAAP chair (or delegated NQAAP member). This will also include recommendations for actions to share learning and to mitigate recurrence of the issue.

On completion of the review, the findings will be documented, and a concluding letter provided to the complainant. The letter will include any actions taken to share learning and mitigate recurrence. The letter will be provided by the relevant NQAAP chair to the complainant ideally within 30 days of initial receipt to NQAAP. If the investigation takes longer than this time, updates will be provided to the complainant at 30-day intervals.

A 'stop the clock' system can be utilised in a situation where input from a third party is required. If this situation occurs, the complainant must be informed of the additional time added to their expected response date.

The concluding letter will be shared with relevant stakeholders involved in the NQAAP and to the Quality Assurance in Pathology Committee (QAPC).

If after generation of the letter the complaint remains unresolved (for example, continued dissatisfaction from the complainant), it will be referred to the chair of the QAPC. At this time, the QAPC may choose to further investigate the complaint, refer the matter to the next available QAPC meeting or to close the complaint if they feel the initial report fully addressed the issues raised. In any of these situations, the findings of the QAPC will be final.



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