

Paper Title: **Complaints, Compliments and PALS Annual Report 2010-11**

Lead Director: Paul Hogg, Trust Secretary

Paper Author: Louise Hussain, Complaints & Litigation Manager

The Complaints Department manages the complaints procedure which includes the acknowledgement of complaints and support to staff handling complaints and investigations.

On a small number of occasions, the level of service provided might be below an expected standard. We are never happy when this happens and will make every effort to handle complaints directly and quickly, with fairness and with confidentiality. As part of our drive to get real feedback on our services we welcome comments from the people who use our services and their families. There are always lessons that can be learnt, either locally or more widely across the Trust. Services can always improve as a result of listening to individual experiences.

During the year we have updated our processes to improve on how we learn from complaints. We also provide support and training to staff who investigate complaints and have begun to roll out training to all teams on how to deal with complaints and recording complaints. The department has also issued the new complaints leaflet and poster.

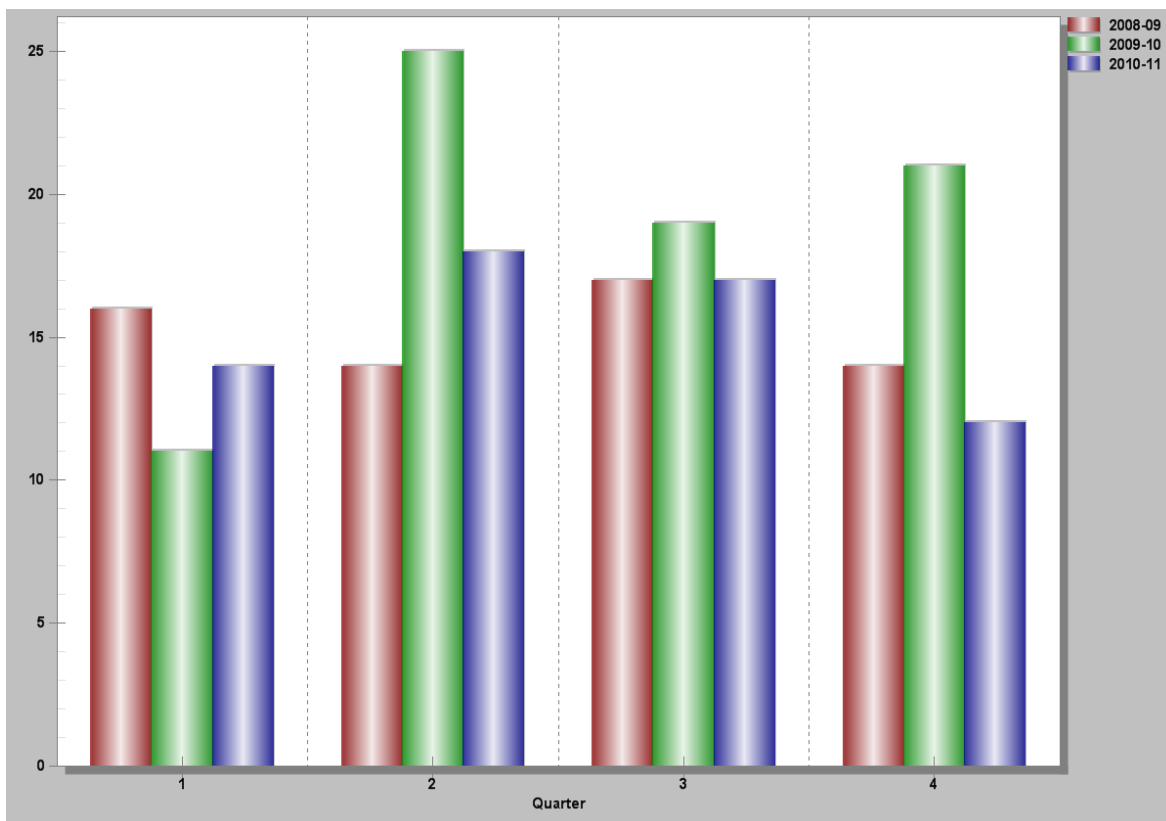
A requirement of the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 is that each Trust publishes an annual report providing the following information:-

- The number of complaints received
- The number of complaints with which the Trust decided were well founded
- The number of complaints referred to the Ombudsman, which the Trust is aware of
- A summary of the subject matter of the complaints, any matters of general importance arising from the complaints and any actions taken to improve services as a consequence of complaints.

Complaints, Compliments and PALS Report

1. Complaints - Statistics

This section describes the Trust's position in regard to meeting performance targets on the handling of complaints for the 4th Quarter of the year ending 31st March 2011.

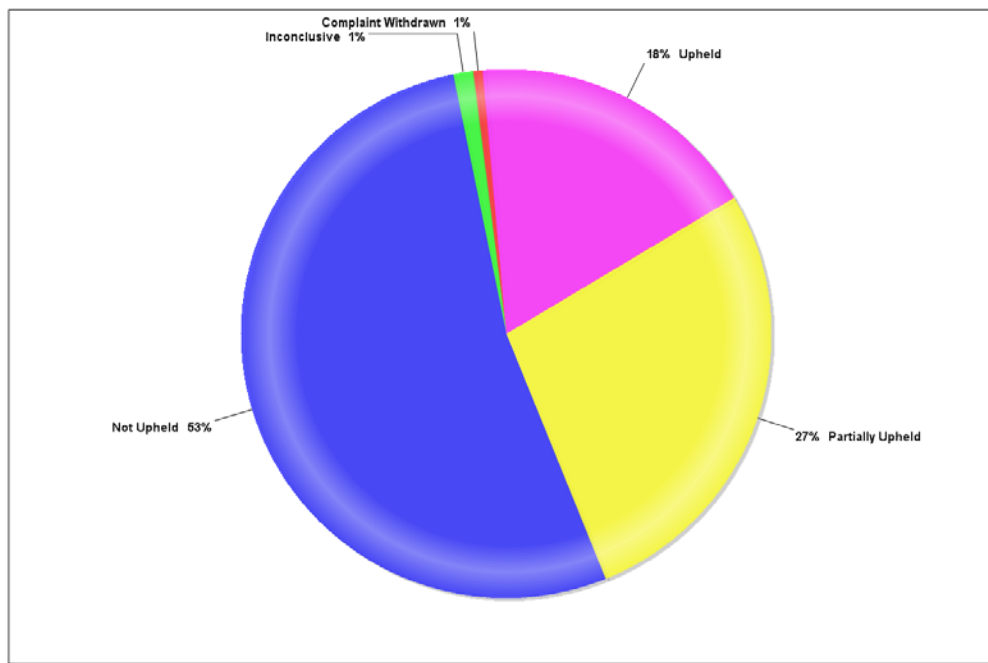


- A total of 61 complaints were registered for 2010/11 period, a decrease of 17 from the previous year.

Summary of complaints upheld

Each formal complaint will have different components. Whilst it is not always possible to state if the whole of a complaint has been upheld/not upheld, it can be broken down by individual components.

Components of complaints found to be upheld in 2010/11



Complaints by Care Group

Formal Complaints by Care Group/Directorate (2010/11)

| Q | Adult Mental Health | CAMHS | Older People's Mental Health | Forensic | Substance Misuse | Learning Disabilities | Social Care and Inclusion | Estates & Facilities |
|---|---------------------|-------|------------------------------|----------|------------------|-----------------------|---------------------------|----------------------|
| 1 | 11 | | | | 1 | 2 | | |
| 2 | 14 | | 1 | | 1 | 2 | | |
| 3 | 16 | | 1 | | | | | |
| 4 | 11 | | 1 | | | | | |
| | 52 | | 3 | | 2 | 4 | | |

Notable differences in the number of formal complaints received are:-

- The Learning Disability Care Group has received 6 less complaints than the previous year
- Older Person's Mental Health received 3 less complaints
- Adult Mental Health received 5 less complaints

Informal Complaints by Care Group/Directorate (2010/11)

| Q | Adult Mental Health | CAMHS | Older People's Mental Health | Forensic | Substance Misuse | Learning Disabilities | Social Care and Inclusion | Estates & Facilities |
|---|---------------------|-------|------------------------------|----------|------------------|-----------------------|---------------------------|----------------------|
| 1 | 6 | | 3 | 1 | | 2 | | |
| 2 | 6 | | 3 | 1 | | 3 | | |
| 3 | 4 | | 2 | 3 | | 7 | 3 | |
| 4 | 10 | 1 | | 8 | 1 | 1 | | |

There has been a notable increase in the recording of complaints resolved informally by frontline staff. During 2009/10 a total of 36 had been resolved and recorded. During 2010/11 a total of 65 informal complaints were reported and recorded with a significant increase in reporting in Older Person's Mental Health and Adult Mental Health.

Independent Review Requests

The Trust is aware of three complaints which were referred to the Ombudsman during the year for independent investigation. The Ombudsman concluded the Trust had done all it could to resolve concerns these and therefore would not investigate the complaints. .

Compliments

Compliments by Care Group

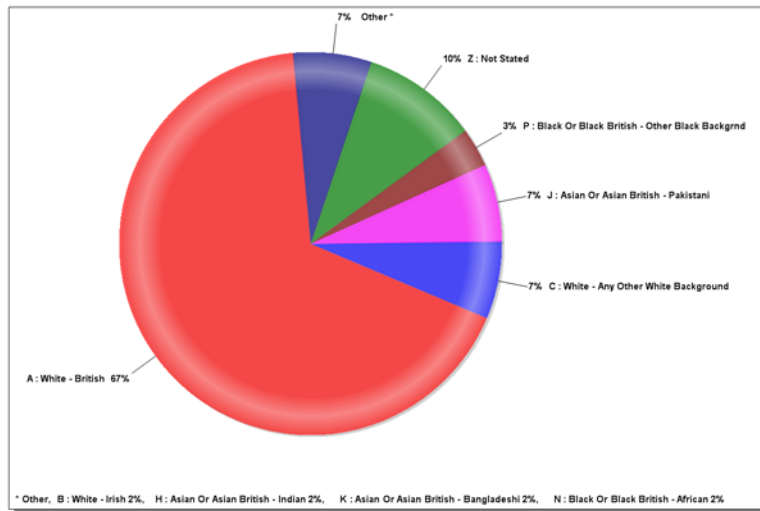
| Q | Adult Mental Health | CAMHS | Older Peoples Mental Health | Forensic | Substance Misuse | Learning Disabilities | Social Care & Inclusion | Facilities & Informatics |
|---|---------------------|-------|-----------------------------|----------|------------------|-----------------------|-------------------------|--------------------------|
| 1 | 9 | 1 | 6 | 0 | 0 | 4 | 3 | 1 |
| 2 | 11 | 1 | 1 | 1 | 0 | 8 | 0 | 0 |
| 3 | 19 | 10 | 15 | 1 | 2 | 10 | 2 | 0 |
| 4 | 16 | 1 | 3 | 2 | 1 | 4 | 0 | 1 |

Compliments continue to be general thanks to teams and staff. The number of compliments received for the year was 133. For the past 2 years there has been a decrease in the recording of compliments. The complaints form has been amended to encourage service users and staff to note good practice and compliments to improve the reporting of these.

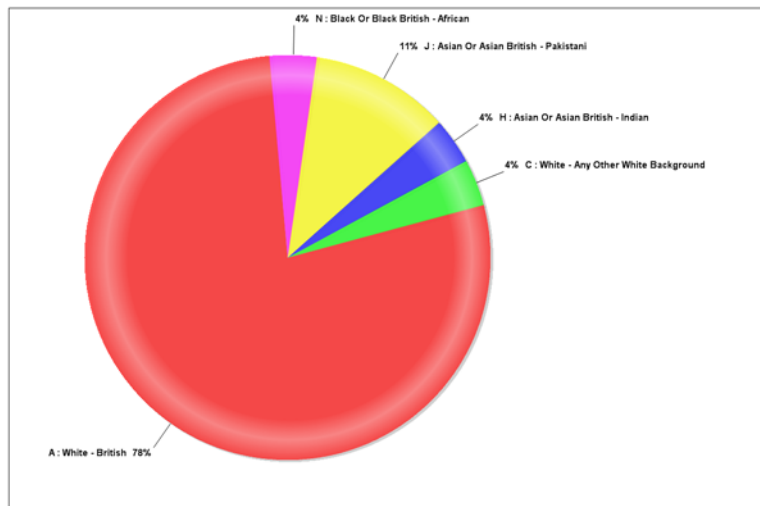
Complainant Ethnicity

An overview of ethnicity of service users and carers who have made formal complaints has been made. This has highlighted both over and under-representation in different groups.

Ethnicity of person making the complaint on behalf of the service user



Ethnicity of the service user



Of the 61 formal complaints received by the Trust, 27 were made by a third party, usually by a relative or carer.

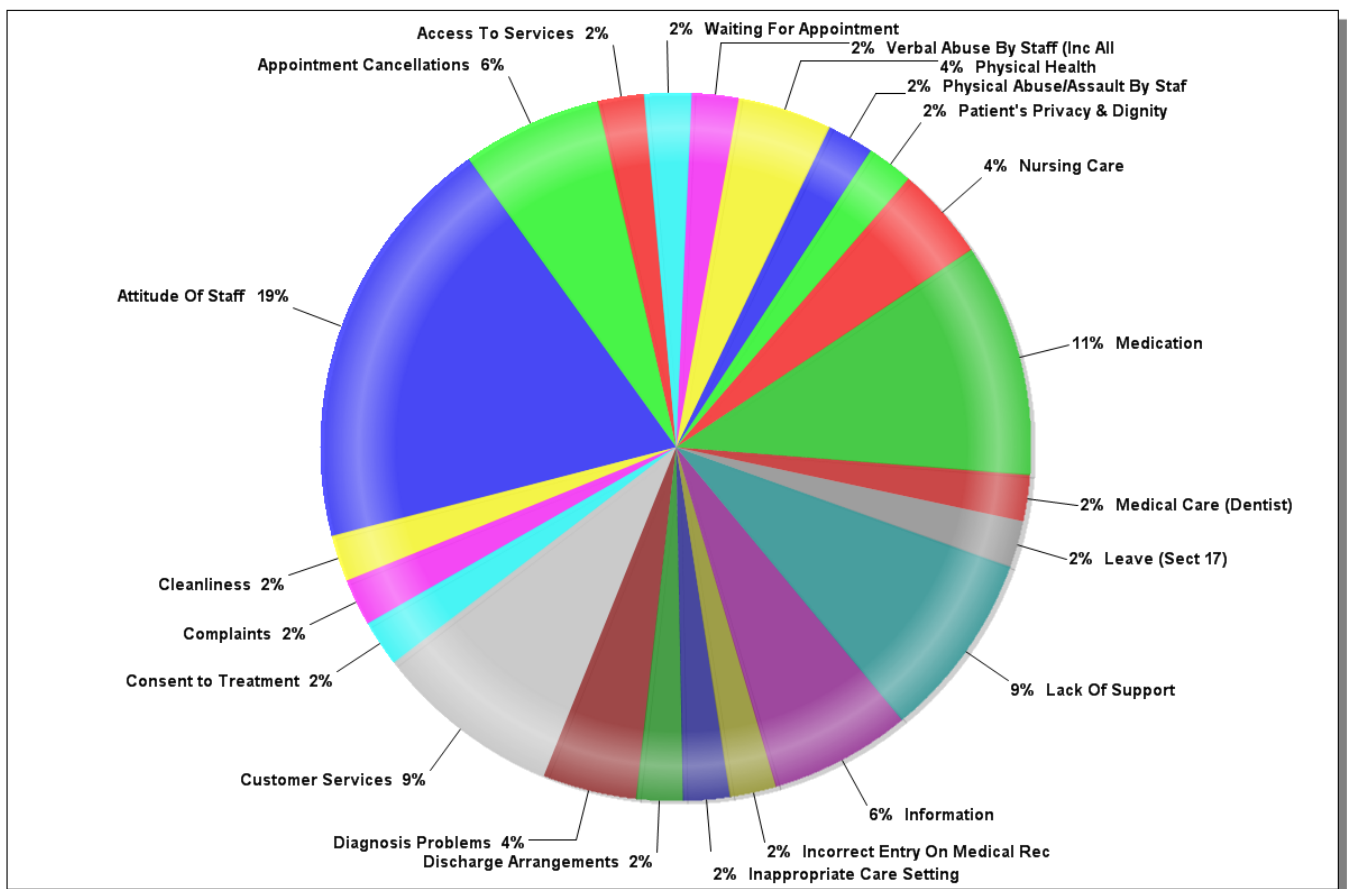
2. Service Improvements

Recommendations/service improvements resulting from complaints investigations are implemented to effect change and improve performance overall. The majority of complaints have an action plan to address any recommendations. Notable improvements during 2010/2011 were:

- Training given to new Senior House Officers was reviewed to ensure that they understand the lessons from this case especially around decision making, risk assessment and management. These will be actioned as part of SHO Induction Programme.
- BDCT undertook discussions with Airedale General Hospital to examine how to improve support, communication and decision making about patients with mental health problems in A+E.
- Consideration was given to utilising the MUST Nutrition tool contained in RIO assessments as good practice for patients on Adult Mental Health Acute Admission Wards.
- An audit was undertaken to identify how much time is spent with carers and what is discussed with them.

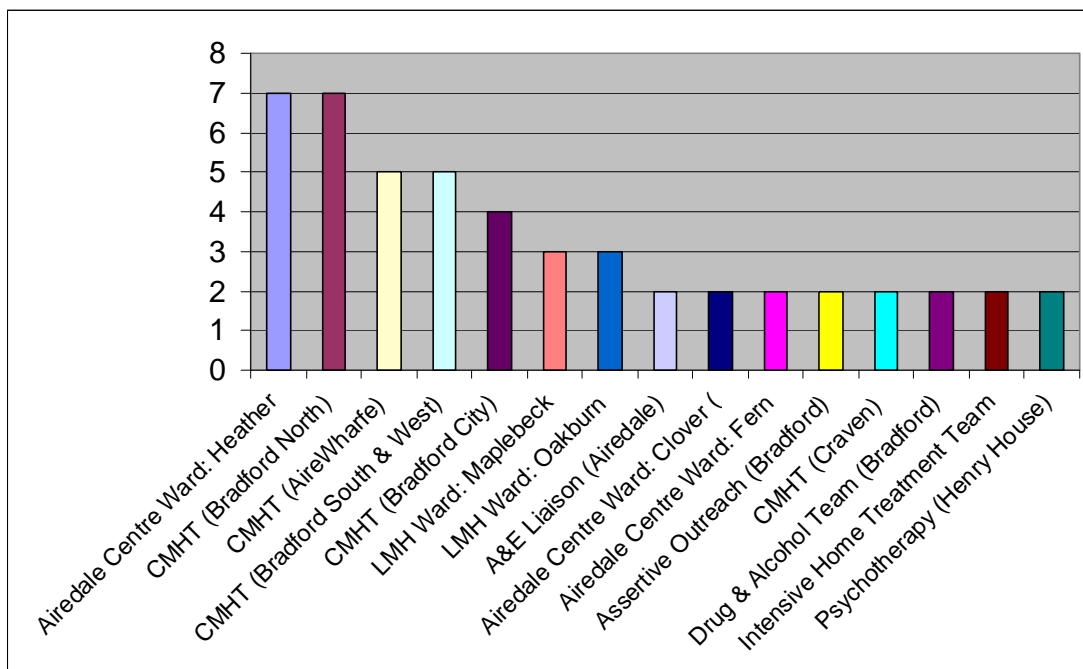
3. Trends Arising in Service Areas (Formal Complaints)

Breakdown of Categories of complaints received during the 2010/11 period.



Most complaints have more than one component. The Trust records all the components of a complaint to monitor any trends. The pie chart above represents the categories of components in complaints.

Breakdown of complaints by service area for 2010/11



Not all complaints relate to one service area. Where the highest number of components of a complaint are identified that area will be registered as the area of the complaint.

4. Improvements to processes

- During the year, we have looked again at the way we do things to make it easier. We now focus on staff working through complaints at the point where they happen. Reports are sent to our Board's decision making groups and we now have much more information about trends and lessons learnt.
- During the year, we looked at the Francis Report and its recommendations around complaints. The Board is now better informed about complaints received across our services with quarterly reports received by the Board's Service Governance Committee and action plans are owned by senior managers in those services. We have an established Complaints Review Panel chaired by a Non Executive Director, where individual complaints and investigation processes are reviewed in greater detail and a Clinical and Safety Learning Forum where cases are shared with front line staff.
- Our Complaints Policy has been refreshed to reflect the transfer of Community Health Services and all staff now use the same policy. The policy makes it easier for staff to complete formal investigations and allows more opportunities to add comments and examples of how things could have been done better.