1. PURPOSE OF THIS PAPER:

To provide assurance of the positive impact on Trust’s services and for the people who use the Patient Advice and Complaints Service since the integration of the PALS and Complaints service.

2. BACKGROUND

At the Council of Governors meeting held on 11 August 2016, a paper was presented on the changes to the Complaints Team and PALS over the last 2 years, the reason for the change and the benefits for people using the service.

The Council of Governors requested an update on the changes to services and assurance that the changes had not adversely affected people who use the service.

3. REVIEW OF COMPLAINTS PROCESS

In 2015, complaints processes were reviewed using an Appreciate Inquiry process. New procedures were put in place to manage concerns and complaints. Subsequently, a consultation took place and the Patient Advice and Complaints Team underwent a restructure in March 2016. A review has taken place of the new procedures to ensure the revised processes are fit for purpose.

3.1 Concerns raised by Governors

On 26 April 2017, two Public Governors were invited to the Patient Advice and Complaints team meeting so they could meet members of the team, understand roles and responsibilities and also be provided with assurance about the way the changes to services have been implemented and are working in the Trust. A summary of the discussions held are noted below;

- *The PALS name/brand was widely recognised/the use of the word `complaint’ within the service title could deter people from raising a concern.*

The Team has redesigned literature including leaflets and posters. It is acknowledged that some staff and people who use the service still refer to the team as PALS, however it
was discussed that this is cultural. Newer staff to the Trust do refer to the team as Patient Advice and Complaints, as do Service Users who are new to using our services.

It was also discussed that some of the other Trusts had also integrated the services, and had removed the PALS branding.

The team do not think it has stopped people contacting the service and this is reflected in the report figures where there is an increase in concerns being raised, and successfully being resolved at a local level. There is a noted decrease in the number of enquiries received. This is due to a difference in recording and being a simple signposting enquiry. A copy of the Annual report was shared with the governors who attended the meeting for assurance.

Changes have also been made to the Trust website to make it easier for people wanting to access our services to find out information about this. It is acknowledged that this is still a work in progress and the team will continue to work with the Communication team who are the owners of the Website.

Feedback from people who use the service has been detailed in section 3.2.

- **PALS played a key role in preventing concerns leading to complaints.**

The Governors informed the team that there were concerns raised that the service would be more ‘reactive’, meaning that they would be waiting for complaints to be received before acting on them.

The team were able to offer their assurances around the type of activity that they are involved in. For example:

- Regular attendance at ward and community meetings (weekly)
- Attendance at carer involvement meetings
- Meeting with Service users face to face to hear their concerns and to help resolve concerns.
- Attendance at CMHT Service user meetings.
- Volunteers recently recruited to attend the wards. This project will be piloted at Lynfield Mount for 6 months.
- Regular representation at, and reports to, governance meetings at Service and locality level.
- Supporting staff in local resolution meetings.
- Meeting with Service users face to face to hear their concerns and to help resolve concerns.

The team was also proud of their relationships with Carers organisations and Advocacy groups and had received good feedback.
- It was important that the Trust consider how it might capture views from those people that did not feel able to raise a complaint.

A piece of work has recently been undertaken with young people as it was identified that they are a group that do not raise concerns. The team is piloting new ways of contacting with CAMHS service users. Barnardo’s has also been involved in this work. The young people had lots of ideas including communication via social media and phone applications such as ‘snapchat’ and ‘whatsapp’. The team is piloting new ways of contacting the Trust, working closely with Child and Adolescent Mental Health Services (CAMHS) to explore the use of non-standard ways of receiving communications about complaints and concerns.

- Governors should be provided with information about: any trends and themes arising from complaints.

Reports on Themes and trends are reported to the Quality and Safety Committee and the CCG’s. Annual reports on themes and trends are available on the Trust website. The Governors also confirmed they receive performance indicators which highlight numbers of complaints received and areas of concerns.

- Governors should have been consulted about the amalgamation.

Whilst this could not be fully addressed it was suggested that the changes to the service had been planned and the processes were being undertaken before the Governors were fully established in post.

3.2 Feedback from complainants and staff

Complainants’ feedback about the process is obtained using questionnaires, although feedback is also often obtained in face to face discussions/telephone calls with the case handler. Questionnaires are only sent when a formal complaint has been made. Additional feedback for locally resolved concerns is recorded in the case file e.g. where the complainant contacted the case handler or investigator to feedback.

Staff Feedback is captured using survey monkey. Feedback was also obtained in a meeting attended by Team Managers (although the invite was extended to staff of all levels involved in complaints).

Feedback from Complainants

This feedback has been mostly positive:

- The support received from the Case Handler, especially around level of communication;
- The explanations they receive and the outcome;
- The transparency the complaint is handled with;
- Speed of responses to local concerns;
- Concerns have been taken seriously and they have been listened to;
- Complainants are pleased with outcome and actions taken to address the issue;
There was, however, some negative feedback from complainants. When the team is aware someone is not satisfied they would usually arrange further meetings/investigation to successfully resolve the concerns. Where the team has received feedback about processes, then we have been able to reflect on this and change them as they arise. The complainant will be informed of any changes arising from their feedback.

Unfortunately, the Trust cannot resolve 100% of complaints to the satisfaction of the complainant. However, there are occasions when the complainants have not been satisfied with the outcome of the investigation, but they have felt the process has been fair.

Feedback from Staff

When Survey Monkey was introduced, there was some negative feedback from staff about the processes. This has improved over the year; as data is reviewed this enables the Complaints Manager to change processes or alert managers to concerns.

Staff fed back that:

- Investigators took time to listen to and understood any concerns the staff member had;
- Staff receive the findings of the complaint and this is done in a supportive and robust way, and the process is transparent;
- The process was objective and robust.
- Staff are consulted with regards to the best way to deal with concerns;
- Phone calls, rather than emails are helpful to enable the Team Leader to prioritise their workload. It’s more personable and helps clarify issues which supports a successful resolution process;
- One manager commented that a case handler demonstrated excellent communication skills, particularly with patients and carers and is good at negotiating/mediating; and
- Managers feel they have a good relationship with staff in Patient Advice and Complaints and get a good response when support is requested.

A significant improvement is that previously, staff felt unsupported by their managers during the complaints process. This has significantly improved in the last 9 months and, in the most recent review of data, 100% of staff were aware of the complaint, felt it was a fair process and had been supported by their manager.

6. RECOMMENDATIONS

That the Council of Governors confirms it is assured that:

- The Service Users, Patients and Carers have not been adversely affected by the integration of the PALS and Complaints team;
- Appropriate arrangements are in place for concerns and complaints to be raised and addressed; and
- The Patient Advice and Complaints Department continues to promote a learning culture and to improve the service by listening to feedback from service users, carers, staff and managers.