

Paper Title: **Complaints and Compliments annual report 2012/2013**

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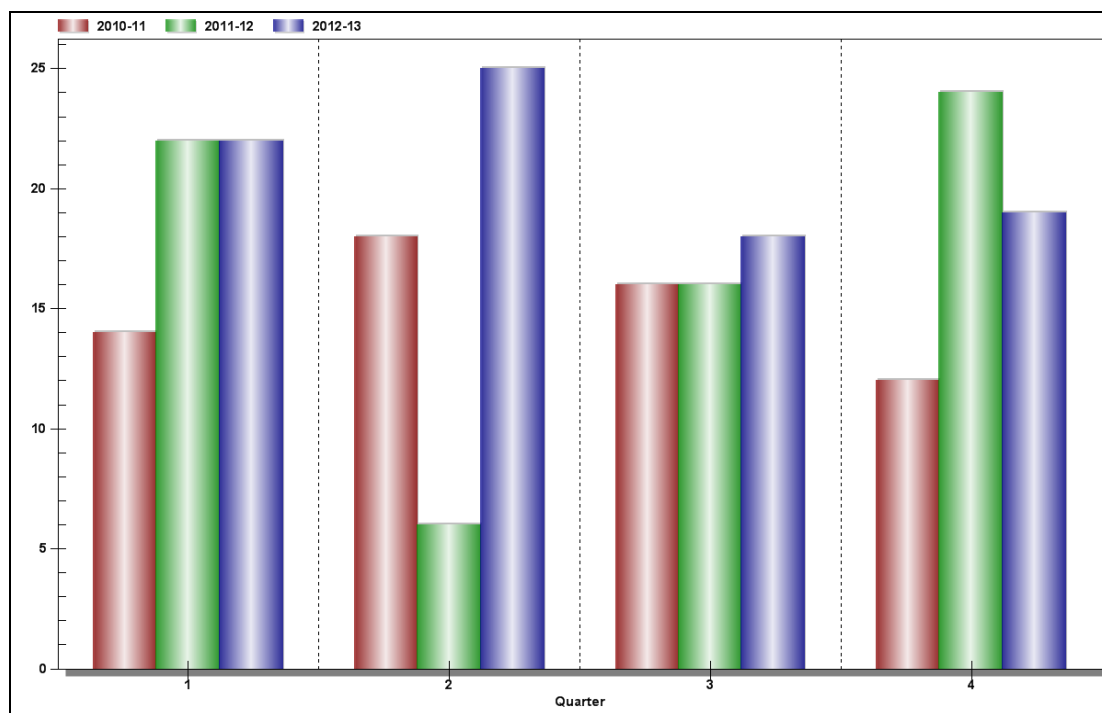
A requirement of the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 is that each Trust publishes an annual report providing the following information:

1. The number of complaints received;
2. The number of complaints with which the Trust decided were well founded
3. The number of complaints referred to the Ombudsman of which the Trust is aware of; and
4. 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.

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 receive 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.

## 1. The number of formal complaints received

The following graphs show the number of complaints received during 2012-13 and comparative figures for previous years.



Year	No. of formal complaints
2009-2010	76
2010-2011	61
2011-2012	71
2012-2013	84

The Trust encourages patients, service users and carers to tell us when they are not happy with services. It is encouraging to see complaint figures increasing; this is a sign that people feel able to raise concerns with the Trust.

### The number of formal complaints and % against performance targets 2012/13

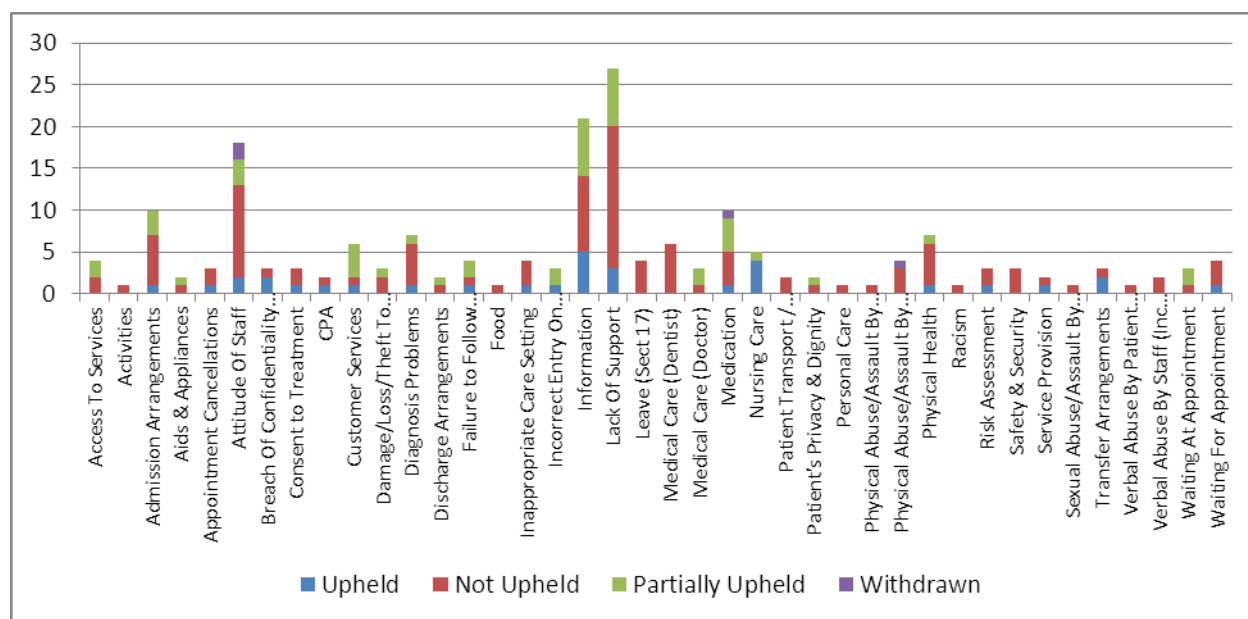
	Total No. complaints received in Quarter	Number acknowledged with 3 working days	Number resolved within original timescale agreed with complainant	Number resolved with agreed extension to original timescale	Number resolved in excess of agreed timescale	Number still under investigation and within agreed timescale
1	22	22 (100%)	18 (81%)	4 (19%)	0	0
2	25	25 (100%)	17 (68%)	8 (32%)	0	0
3	18	18 (100%)	12 (66%)	6 (34%)	0	0
4	19	19 (100%)	13 (68%)	6 (32%)	0	0

## 2. The number of formal complaints with which the Trust decided were well founded

Each formal complaint will have different components. There are few complaints in which every component is found to be not upheld.

The graph below indicates the outcome of closed complaints.

32 of the 192 Components covered in the 84 complaints received during 2012/13 were found to be upheld for 2012/13.



Complaints figures for the Trust are also reported to the Department of Health via KO41. Where a complaint has one component upheld or partially upheld the Trust must report this as 'upheld' and will be reflected in the figures published by the Department of Health.

### All contacts received by Complaints and PALS

The following table shows other contacts received and dealt with by the complaints and PALS department during 2012-13 in comparison to previous years.

	Formal Complaint	Informal Complaint	PALS Concern	PALS Enquiry	TOTAL
2009-2010	76	34	658	190	958
2010-2011	61	74	475	201	811
2011-2012	71	98	498	284	951
2012-2013	84	42	345	445	916

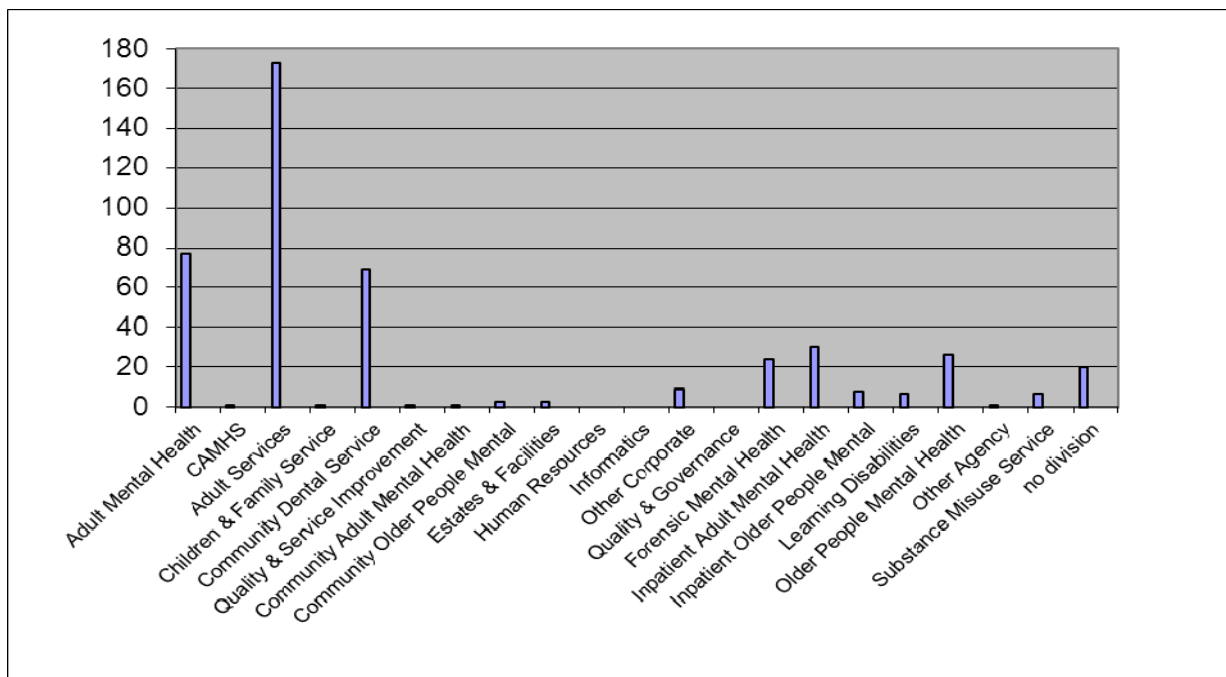
This shows the number of informal complaints being dealt with locally by services highlighting that service users and carers feel able to approach staff with concerns. There

has been an increasing number of contacts being recorded by PALS overall.

This is encouraging as the Trust encourages service users, patients and carers to tell us when they are unhappy with services in order to give us the opportunity to learn from experience and ensure we are providing a high quality of care.

### Compliments (PALS & Complaints)

A total of 461 compliments were recorded by the PALS and the Complaints Department during 2012/13.



Year	No. of compliments
2009-2010	215
2010-2011	177
2011-2012	323
2012-2013	464

The above graph and table shows the compliments that are sent to the Complaints and PALS Departments for recording. The Trust acknowledges that there are more compliments received and recorded locally by individual teams.

Adult Mental Health have recorded a high number of compliments and the high number of compliments received for Adult services relate to District Nursing services.

Notable compliments were:

- Teams across the Trust receive cards and letters from patient, services users, their carers and family members for care and support provided;
- On Heather Ward, a service user’s named nurse received a letter from the carer of the service user, thanking them for the support offered to them as a carer specifically;
- Staff on Ward 24 at Airedale received big thank you from the family of a service use who stated “words cannot express how grateful we are for the fantastic care given to X over the last X weeks”;

- A service user of the substance misuse service received the following compliment; “Thank you for the time you have allowed me to babble on about my family problems and anything else I have needed to get off my mind, you have steered me on the right path”;
- The District Nursing Service received a large number of compliments, here is one example; “I just wanted to pass on my thanks to X and her team for their great support to my family when my father was ill. They were all marvellous and their professionalism, warmth and concern for us all during those difficult days was greatly appreciated. They really are a great credit to the service. Once again many thanks”;
- The Palliative Care Team receives a large number of compliments which are extremely heartfelt. It is overwhelming the number of people who still write to thank staff during such difficult times.
- The Salaried Dental Service receives a high volume of positive feedback from people who use the service.

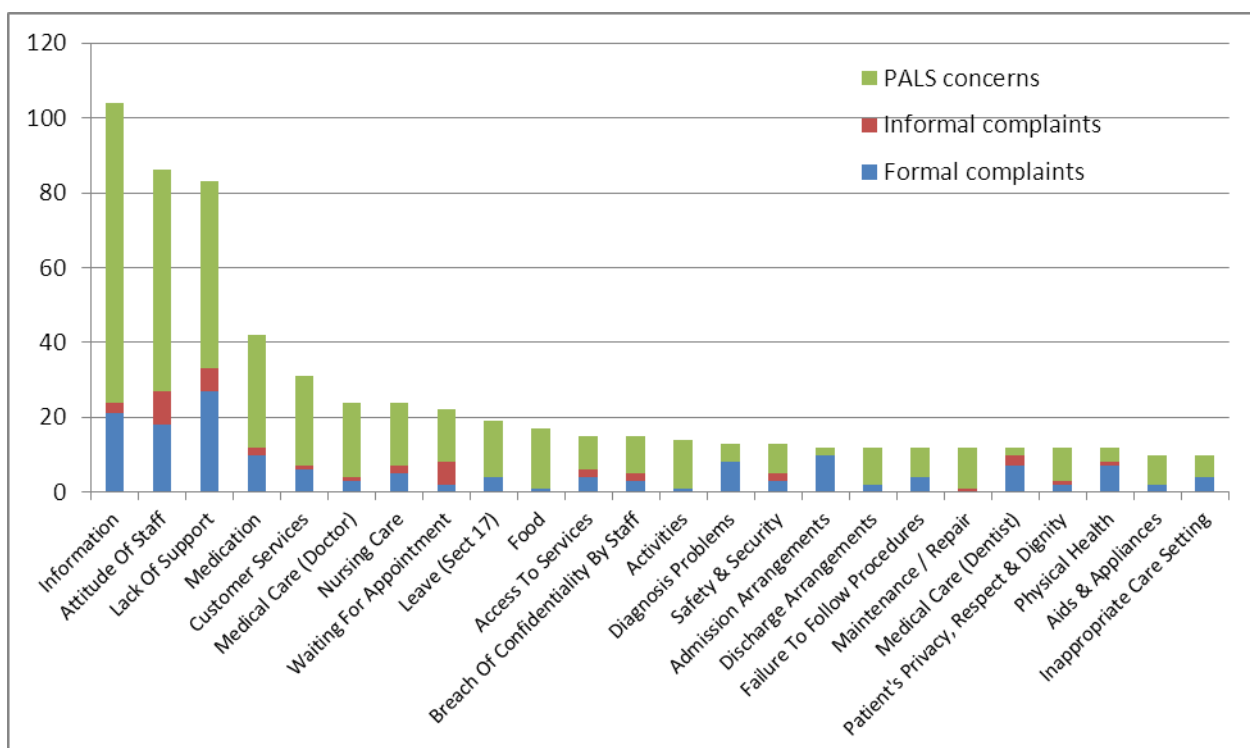
### 3. The number of complaints referred to the Ombudsman of which the Trust is aware

The Trust is aware of 8 complaints which were referred to the Ombudsman during 2012-13 for independent investigation. In seven of the cases no further investigation was required. The Ombudsman is still currently investigating the remaining complaint.

### 4. 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.

#### Breakdown of Categories of complaints received during 2012-13

Most complaints have more than one component. The Trust records all the components of a complaint to monitor any trends.



The above graph shows the top 25 categories of Complaints and PALS received during 2012-13. Information and staff attitude are consistently high during each quarter and year on year.

Categories are consistent with the previous year's categories with attitude of staff, information, lack of support and medication as the highest recorded categories. There is a noted reduction in complaints relating to patient's privacy and dignity which accounted for 7% of categories in 2010/11.

Page 11 highlights a graph indicating the breakdown of formal complaints by service area with the majority of contacts consistently relating to Adult Mental Health. It is worth noting that the number of cases received from Adult Mental Health in patient wards are on the whole larger than the number of cases received from other areas of the Trust; this can be attributed to the nature of the care being provided to acutely unwell patients and staff are pro-active in referring service users to the Complaints Procedure if they cannot resolve concerns locally.

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. A selection of improvements as a result of formal complaint investigations is included below.

#### District Nursing Service

- Teams to ensure there is a system in place to ensure, where appropriate, that carers are made aware of referrals to other providers and that there are feedback mechanisms to the carers around any outcome.
- A review of wound management training to be undertaken to identify training needs. Local hospitals to be contacted with regard to information being provided to patient when discharged from a hospital setting into the care of the District Nursing Service.
- A review of risk assessments and care plans across the district to be undertaken to ensure that the content is relevant, individualised and up to date. This will be supported by the Record Keeping, District Nursing Standards and the Safer Administration of Insulin Policy for BDCT. Furthermore, two team members from all the District Nursing teams are to attend a Safer Insulin administration training session.
- Staff to receive refresher training on the Continuing Health Care nursing needs assessment process.

#### Inpatient services

- Ward staff to ensure they maintain weekly contact with family/carers where the carer is not in a position or unable to attend the ward review/visit the ward regularly.
- When considering leave from hospital, the view of the carer/family to be documented in the progress notes and shared in the MDT review meeting. This should inform decisions about planned home leave.
- Clarification to be sought with regard to the role of the police and BDCT staff in the situation of Police being called to speak to service users on the ward following

incidents, including the responsibility of an Appropriate Adult. This will be raised at the Police Liaison meetings with the Acute Services for discussion. BDCT will also clarify its position of 'Zero tolerance' of threats to staff and property in protocols for contacting the police.

- The storage of patient belongings on inpatient wards, when a patient goes on leave is currently being reviewed; one complaint was about a service user's experience of this and will be considered as part of this review.

#### Salaried Dental Service

- To ensure all dentists are reminded to inform patients of how and when they should make contact with services should their symptoms not settle.

#### Specialist Continence Service

- The development of a Continence Service 'patient charter' which incorporates details of reordering procedures.

#### Speech and Language Therapy Service

- The Speech and Language Service to review their referral form.

The graph on page 11 offers a detailed breakdown of complaints received by service area.

### **Complaints Review Panel**

The Trust established the Complaints Panel in November 2011 in response to the Francis Enquiry. The panel is made up of the Trust Secretary, the Complaints Manager and a Non-Executive Director. The intention of the panel is to ensure a sample of complaints are reviewed by a Non Executive Director and to provide assurance to the Trust Board and the Service Governance in improvements to service delivery.

The Panel does not get into operational detail of individual complaints but reviews the original complaint, the investigation findings, and action plan and the final response.

### **Report published on the Public Inquiry into Mid Staffordshire NHS Foundation Trust**

This public inquiry examined the commissioning, supervisory and regulatory organisations and their monitoring role at Mid Staffordshire NHS Foundation Trust between January 2005 and March 2009. The report, published on 6 February, considers why the serious problems at the Trust were not identified and acted on sooner, and identifies important lessons to be learnt for the future of patient care across the NHS. The report identifies a number of recommendations around effective complaints handling including prompt and thorough processing of cases; sensitive, responsive and accurate communication; effective and implemented learning; and proper and effective communication of the complaint to those responsible for providing the care. The Complaints Department reviewed these recommendations against current BDCT practice to identify any areas for change or improvement and agreed a number of actions including:

- Undertaking a review of the Trust's complaints handling procedures, focusing on transparency of complaints information, quality investigations and wider organisational learning and follow up;

- Ensuring that learning from complaints makes a difference in terms of the outcomes of action planning; and
- Development of the Trust website as a tool for sharing complaint information and learning both internally and externally

## 15 Step Challenge

In relation to NHS Change Day, the Trust Board has pledged to invite all individuals who make a complaint about our services to be involved in one of our 15 Steps Quality Challenge Panels. This is now included in all Trust responses signed by the Chief Executive.

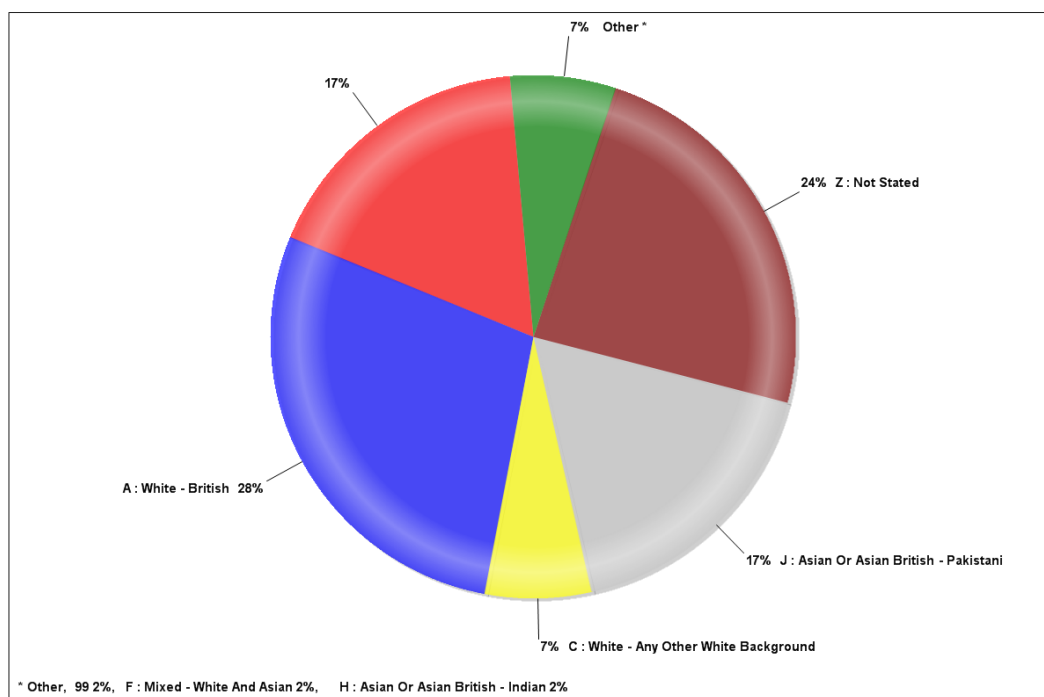
## Equality recording in relation to Formal Complaints

The Complaints Department collects equality data relating to complainants so the Trust can check that we are listening to service users and carers from lots of different backgrounds and communities. This data also allows us to understand who is accessing the complainant process.

The Complaints department uses this information to monitor whether all individuals are treated equally and have equal access to the complaint process. In order to improve the collection of this data, in 2013/14 all complainants receive a consent form to complete which includes the collection of equality data. The aim is to increase the collection of this data in the future. Complainants are also given the option not to disclose this information and this is monitored by the department.

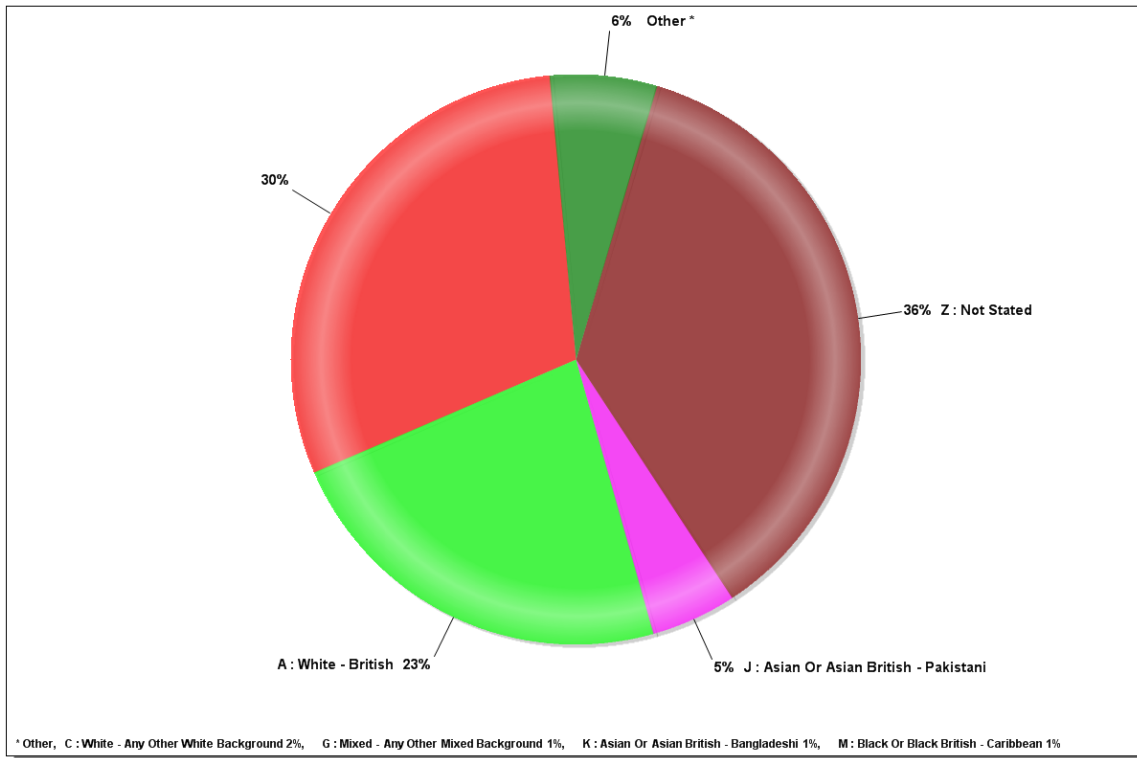
The following graphs show the data collected for complaints made during 2012/13.

### Race and Religion - Ethnicity of person making complaint on behalf of service user



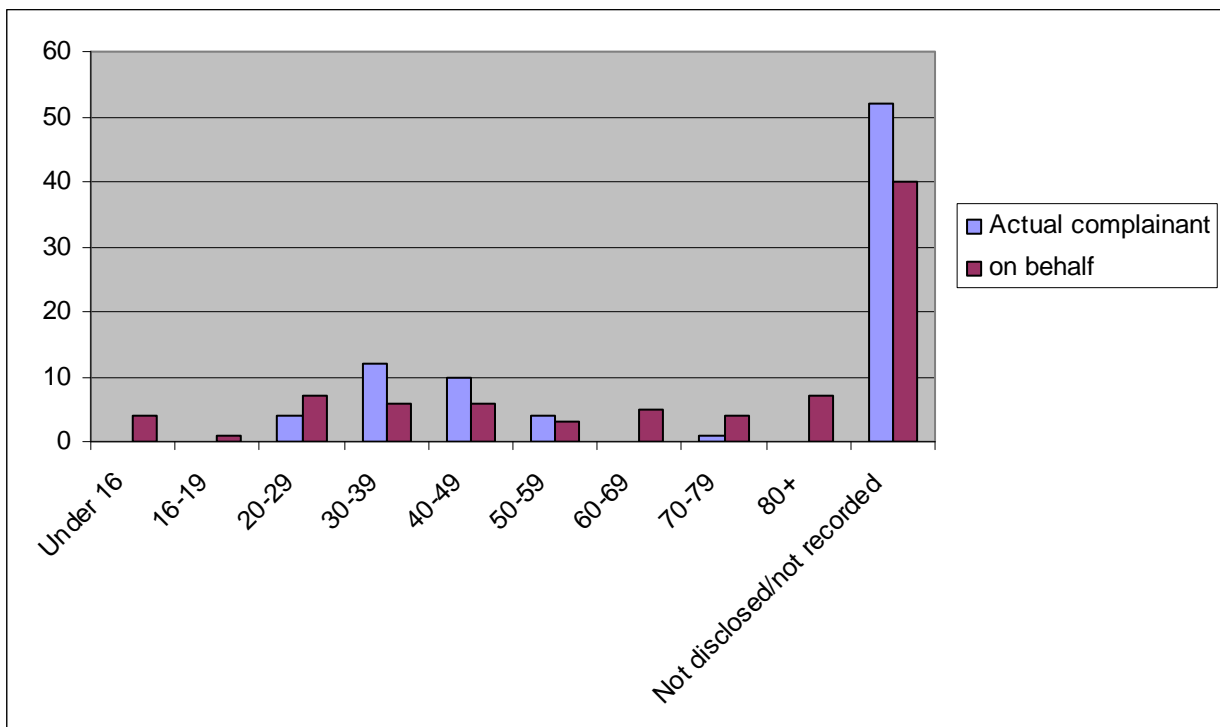


## Race and Religion - Ethnicity of Service User



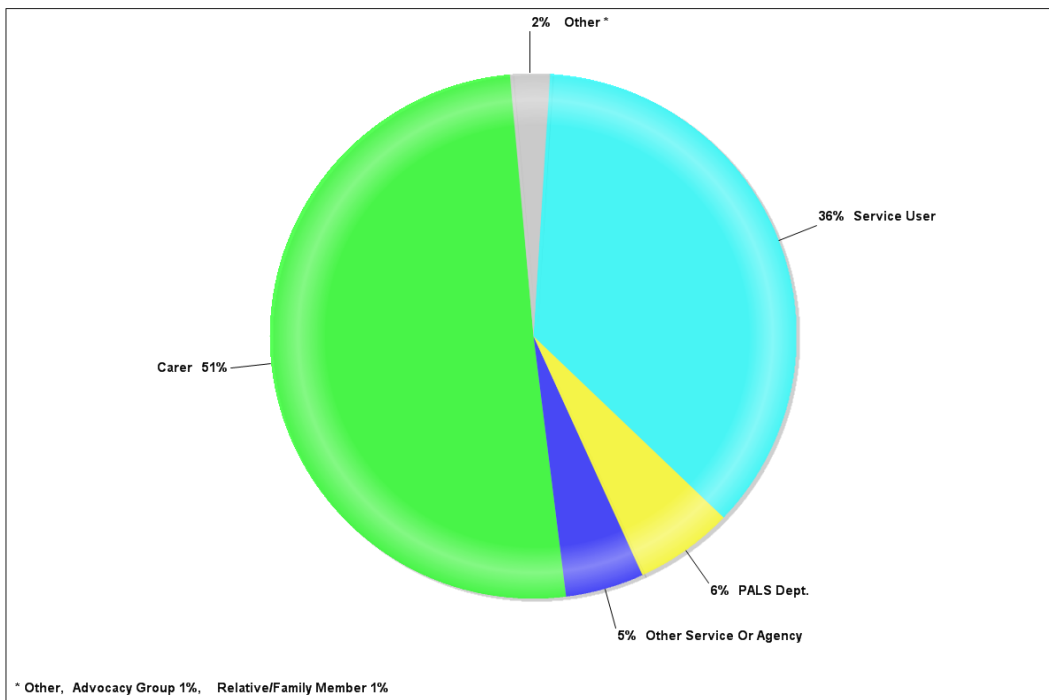
## Age

The graph below shows a breakdown of the age of those who made formal complaint during 2012-13.



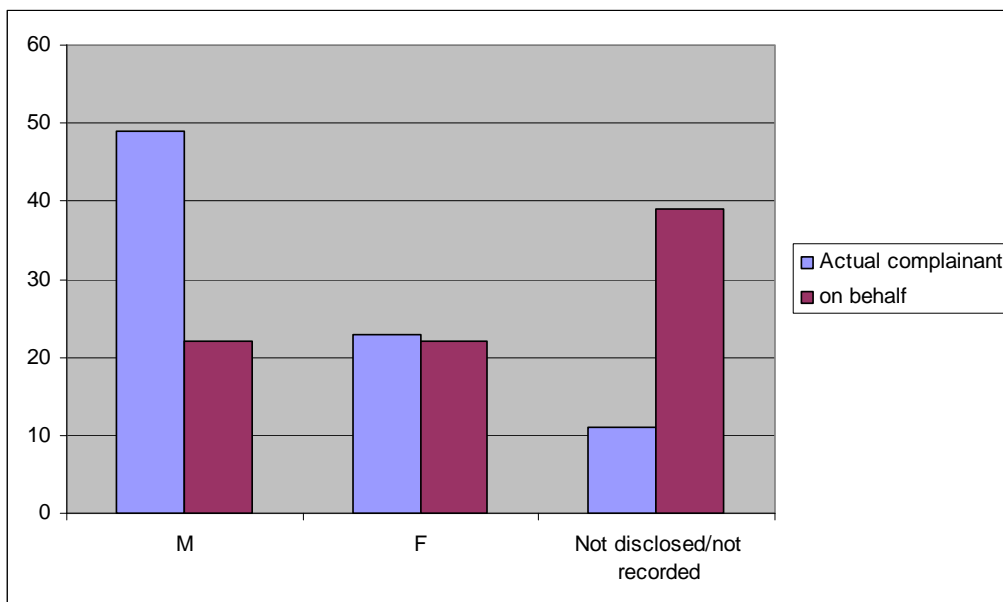
## Carers

We record the source of every complaint. The graph below shows that 51% of the complaints received were from the carer or a relative.



## Gender

This graph shows a breakdown of the gender of those who made formal complaint during 2012-13.



## Formal complaints by service area for 2012-13

The following graph shows a detailed breakdown of complaint received by service area and by quarter.

