

## WESTERN HEALTH & SOCIAL CARE TRUST COMPLIMENTS AND COMPLAINTS ANNUAL REPORT 2019/2020

### Introduction:

This Annual Report provides information on the compliments and complaints received by the Western Health and Social Care Trust for the period 1 April 2019 to 31 March 2020.

The Trust welcomes and actively encourages compliments and complaints about our services. On occasion individuals, or families, may feel dissatisfied with some aspect of their dealings with the Trust and, when this happens, it is important that the issue is dealt with as quickly as possible. We recognise that everyone has a right to make a complaint and we can learn valuable lessons from them – a complaint may well improve things for others.

Complaints provide us with lessons to help us learn how to improve our services. Whilst we aim to give the best service to all our patients and service users, we wish to know when things do not go well so that we can take the appropriate remedial action to prevent it happening again.

We also like to know when users have been impressed or pleased with our service. We can use these examples to share best practice amongst our staff. In addition, compliments can help boost morale.

### Achievements during the 2019/20 year:

- Processed 497 Formal Complaints
- Resolved 482 Formal Complaints
- Acknowledged 85% of the Formal Complaints Received within 2 working days which is a 23% improvement on the previous year
- Received 4,961 compliments\*
- Provided Complaints Awareness Training to over 1050 staff
- Developed more meaningful reports to senior management groups to include the Rapid Review Group and Chief Executive Assurance meetings
- Implemented a Lessons Learned Template for Investigating Officer staff to complete following the investigation of a complaint
- Commissioned a review of Complaints Management Processes and took forward the following recommendations:
  - Currently upgrading and reviewing the Trust's Complaints Policy
  - Promoted the corporate Complaints email address as the central point for complainants to send their complaints correspondence
  - Re-established complaints learning as part of the "Share to Learn" communication programme to staff
  - Developed a formalised complaints aide-memoire checklist to support staff when formulating complaints responses
- In March 2020 during the COVID 19 Emergency the Trust was keen to ensure that members of the public would continue to raise any concerns directly with the Trust. The Trust's complaints Department, telephone line and email address remained open and accessible during that time. Members of the Public made contact and made valuable observations on some of the changes that had been initiated as a result of the COVID 19 Emergency

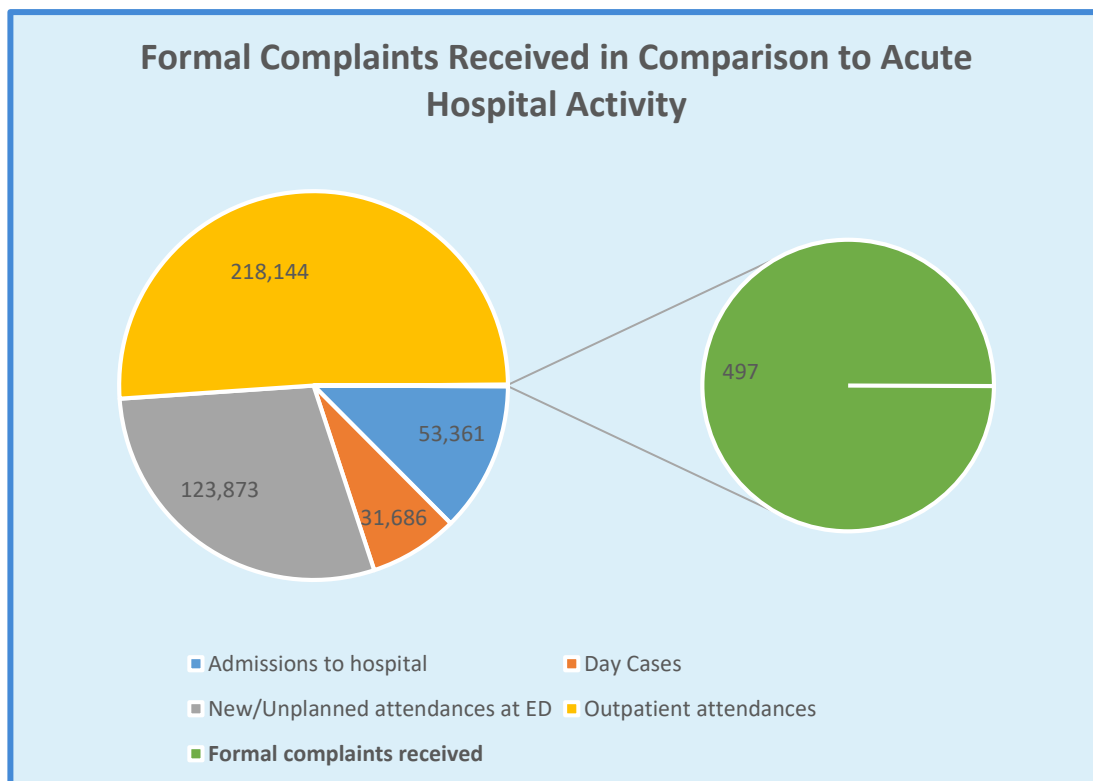
*\*likely to increase due to delayed reporting*

### Complaints:

Despite a slight increase in the number of complaints received for the 2019/20 year, the number continues to be low considering the range and spread of services Trust staff provide to service users.

#### Some Key Facts:

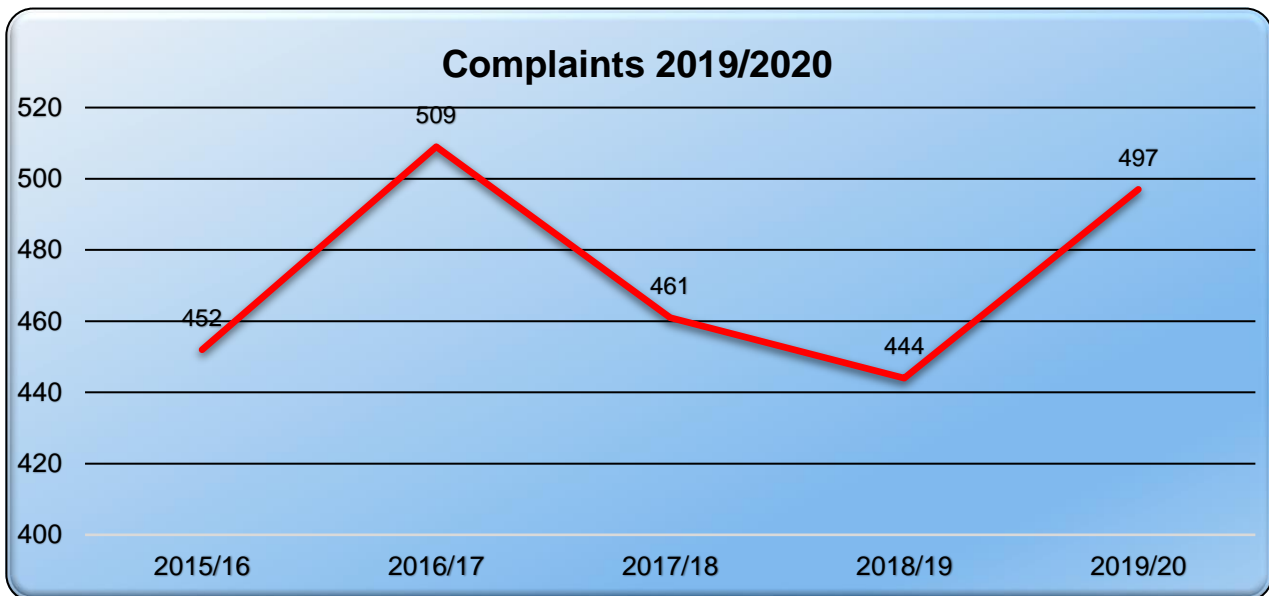
- Serves a population of approximately 300,000
- In a catchment area of over 4,842km<sup>2</sup> and has approximately 12,500 staff
- 8 hospitals
- 30 day centres
- 8 children's homes
- 53,361 admissions to hospital, 31,686 day cases, 123,873 new/unplanned attendances at Emergency Departments and 218,144 Out-patient attendances during 2019/20
- Approximately 140,000 hours were delivered to people with a learning disability through a range of short break services during the last year
- Care is provided directly into thousands of people's homes



Note: Formal complaints have also been received relating to other services

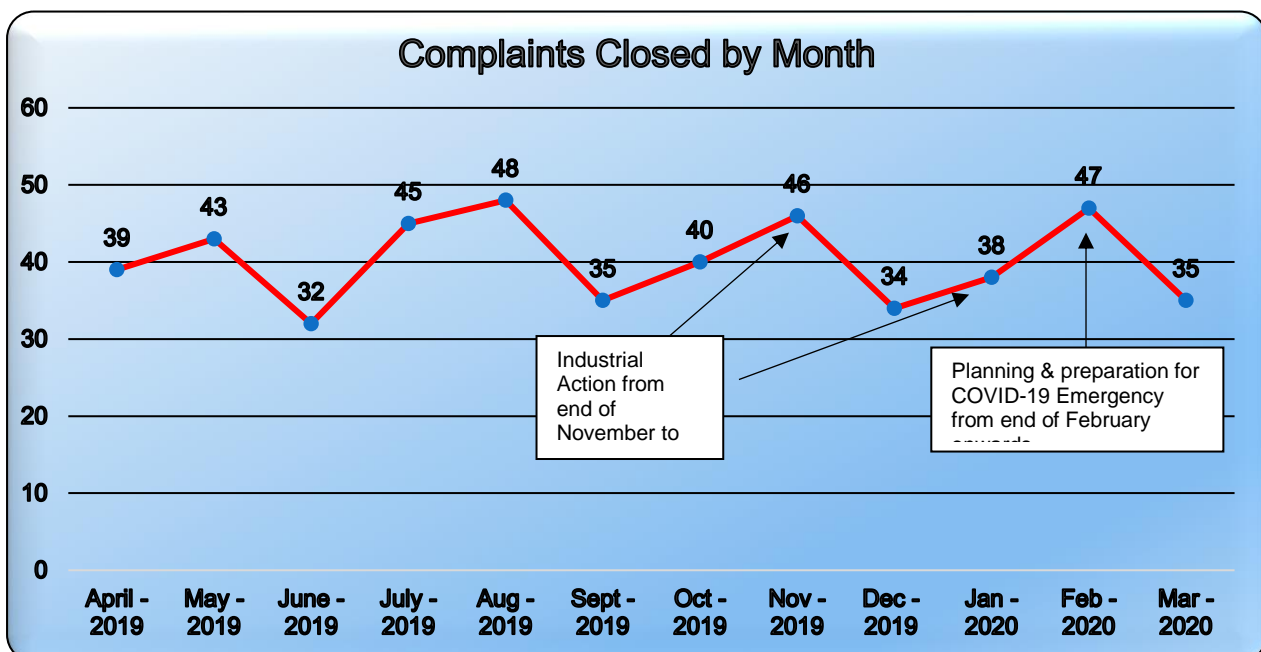
**Complaints this year:**

During 2019/20 a total of 497 Formal complaints and 2 Children Order Complaints were received by the Trust. This compares with 444 Formal Complaints received during the previous financial year of 2018/19. The continued awareness training provided to staff on the Health and Social Care Complaints Procedure highlights the emphasis around enhanced local resolution, encouraging staff to resolve complaints at a local level.



**Complaints resolved during 2019/2020:**

During the 2019/20 year a total of 482 Formal Complaints were resolved. If the complainant was dissatisfied with the Trust’s response a complaint can be re-opened. The following graph provides a breakdown by month.



## Complaints Procedure – Children Order:

Complaints by, or on behalf of, children about services provided to them under Part IV of the Children (NI) Order 1995, are dealt with under a separate procedure – the Children Order Representatives & Complaints Procedure. Over the year there were 2 Children Order complaints resolved by the service at the informal “problem solving” stage.

## Informal Complaints:

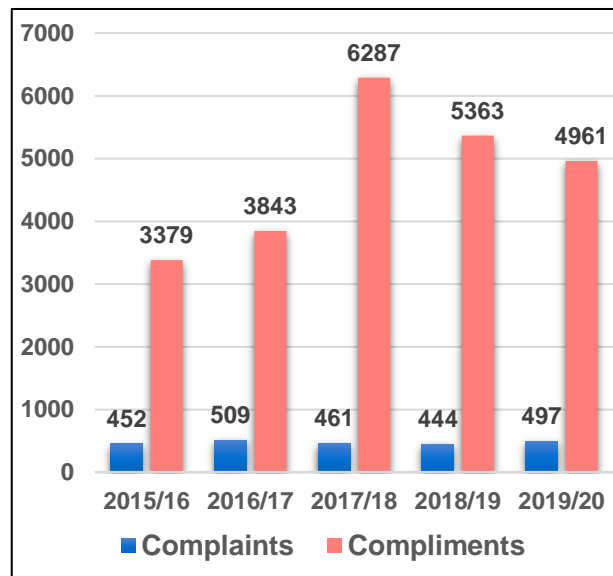
There are numerous concerns raised by patients, service users and/or their families or next of kin which are resolved at the point of contact with the services. Figures of these informal complaints are not captured centrally. It is acknowledged the informal complaints are under reported and consideration is being given to a mechanism/system for more accurate recording.

## Compliments:

Whilst the Trust recognises that sometimes things go wrong, each year it receives thousands of letters, emails and social media comments of appreciation and expressions of thanks to acknowledge the excellent services provided. In 2019/20 the Trust received 4,961 compliments\* We are proud of our staff and ensure that positive feedback is shared and celebrated. Our staff certainly appreciate feedback from their patients and service users, and knowing when things go well.

In line with regional requirements, the Trust has been recording compliments on an electronic online system since February 2019. This new system provides greater accuracy and consistency in relation to the compliments received in writing and provide statistics on our successes. The system has been designed to be easily located on the Trust’s intranet site. It is fast, user friendly and is able to provide more information on the reasons why people have complemented a service or staff member. We continue to encourage staff to use this system.

“On behalf of my family, I would like to express my sincere thanks to the management and staff of the South West Acute Hospital for the exceptional care provided to my mother from 26<sup>th</sup> Feb to 6<sup>th</sup> Mar 2020. From admission to the A&E Department through to Surgery, Critical Care Unit and subsequently to Ward 9 the level of genuine care and professionalism was exemplary at all levels. We are truly grateful for the service that was provided which made a traumatic time so much easier to bear. Our mother is now happily recovering at home”



“I just cannot thank the mental health team enough. The time I spent with them was so beneficial to me, I feel I can live each day without fear. I know I always have somewhere to turn when I am very distressed and that means so much to me.”

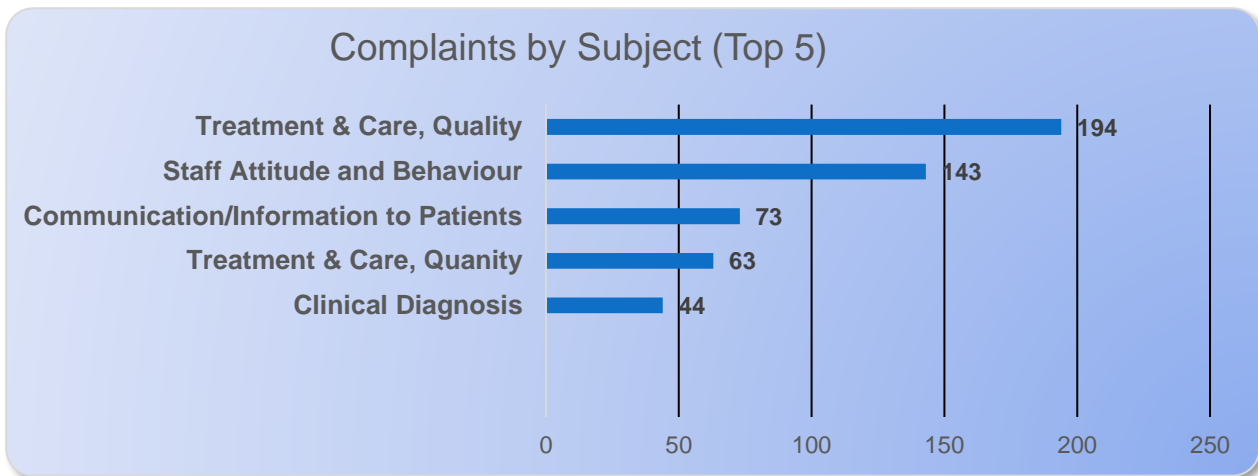
“The antenatal diabetic team at Altnagelvin worked with a commitment to patient centred care and sensitive support that exceeded every expectation”

“I would like to comment on the cleanliness of the ward and how hard working the cleaners and HCAs were, they always smiled and demonstrated genuine kindness.”

\*likely to increase due to delayed reporting

## Complaints by Subject – Top 5

The top five categories of complaints received during 2019/20 are set out below.



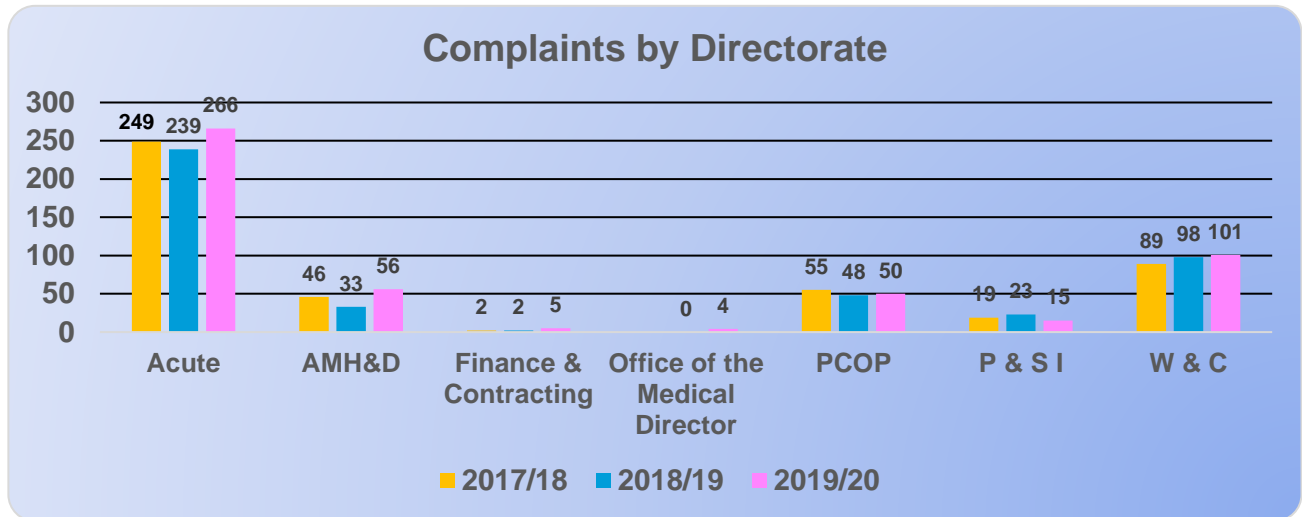
### What people complained about:

The table below shows all the complaints by subject for the past year (2019/20). The figures provide a breakdown of issues complained about, as a complaint can raise more than one issue. \*For 2019/20, 497 complaints were received which raised 699 issues, compared with 2018/19 where there were 444 complaints and 689 issues.

Treatment & Care, Quality	194
Staff Attitude/Behaviour	143
Communication/Information to Patients	73
Treatment & Care, Quantity	63
Clinical Diagnosis	44
Waiting Times, Outpatient Departments	25
Appointments, Delay/Cancellation (Outpatient)	24
Admission into Hospital, Delay/Cancellation (Inpatients)	22
Discharge/Transfer Arrangements	20
Other	20
Confidentiality	10
Records/Records Keeping	8
Patients' Privacy/Dignity	7
Professional Assessment of Need	7
Waiting Times, Accident & Emergency	6
Aids/Adaptations/Appliances	4
Other Contracted Services	4
Theatre/Operation Procedure, Delay/Cancellation	4
Complaints Handling	3
Delayed Admission from Accident & Emergency	3
Environmental	2
Infection Control	2
Transport, Suitability of Vehicle/Equipment	2
Transport, Late or Non-Arrival/Journey Time	2
Waiting Lists, Community Services	2
Consent to Treatment	1
Hotel/Support/Security Services	1
Policy/Commercial Decisions	1
Patient's Property/Expenses/Finance	1
Waiting Times, Community Services	1
<b>Totals:</b>	<b>699</b>

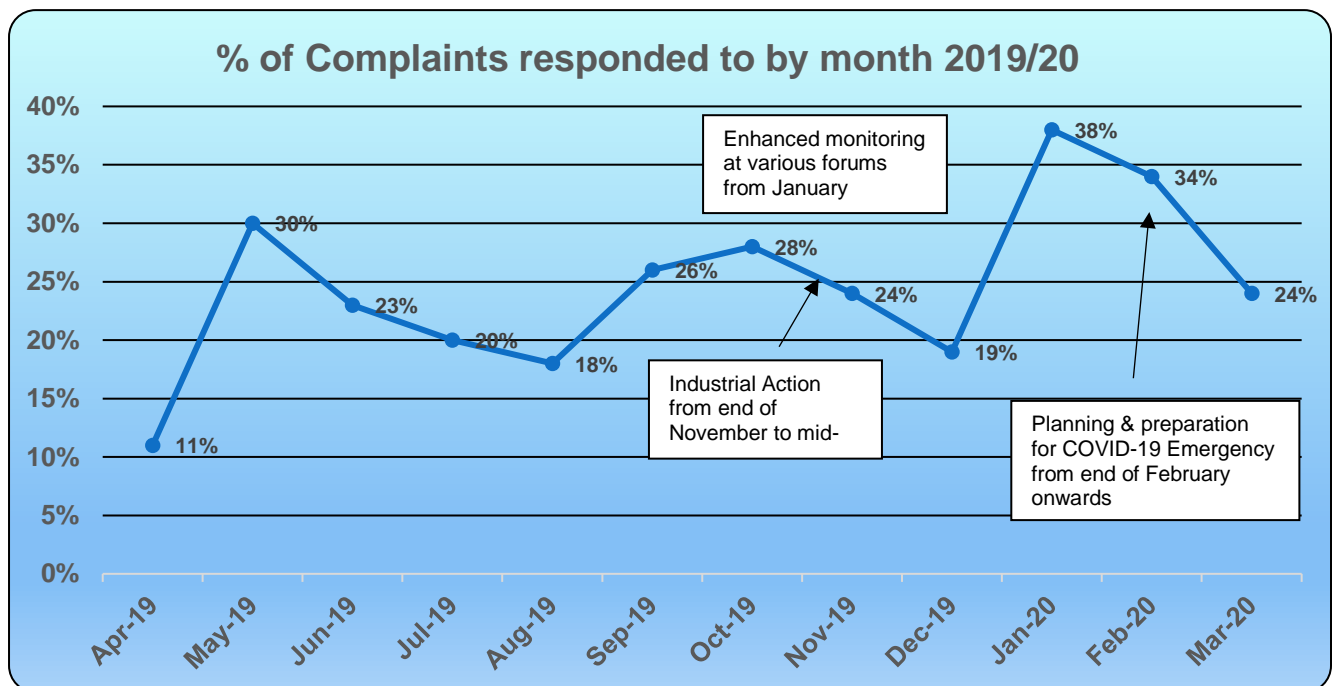
### Complaints received by Directorate:

This graph shows the breakdown by Directorate of formal complaints received during 2019/20 in comparison to last 2 years:



### Response times to complaints:

Over the year 85% of complaints were acknowledged within the target of 2 working days and 26% of complaints were responded to within the target of 20 working days.



The timeliness of response times to formal complaints has been an ongoing concern throughout the year. Some of the delays can be attributed to receipt of a number of complex complaints – involving in many cases – more than one service area as well as time and resources required for thorough investigation and development of responses at service level. The exceptional challenges encountered as a result of industrial action and the preparations for COVID-19 also impacted on response times for complaints.

The Trust continues to monitor timescales and promotes the need to provide timely responses. Performance measures for both compliments and complaints are included in the monthly health checks dashboards, in assurance reports to the Chief Executive and quarterly to governance forums at Directorate and Trust level. Whilst the Trust wishes to see improved response times, it places equal, if not more importance on the quality of responses and ensuring resolution for the complainants, relevant to the issues raised.

### **If people are dissatisfied:**

Sometimes people are not happy with the outcome of the investigation to their complaint. In the last year 10% of complainants contacted us to tell us they were not completely satisfied with the response provided. We encourage people to let us know if they are unhappy, and we consider other options to attempt to resolve their concerns. We routinely offer to meet complainants, as this allows the opportunity for more detailed discussions, face-to-face.

### **Northern Ireland Public Services Ombudsman (NIPSO)**

For those who remain dissatisfied, they have the right to approach the NIPSO Office directly. The Advice, Support Service and Initial Screening Team (ASSIST) is the public's first point of contact with the office. Where the ASSIST team decide that they cannot resolve a complaint, the case is forwarded to the Ombudsman's Investigations Team. In 2019/20 there were 17 requests for information from the NIPSO Office. Six cases were closed and not upheld, 11 are on-going.

### **Monitoring:**

The Trust is committed to using complaints/concerns as an opportunity to improve our services and care provided to patients and service users. The Trusts Complaints Department uses a database to record, update, manage and produce reports on complaints activity.

Where there are delays in Investigating Officers providing responses to complaints an escalation process is put into place. Complaints open over 3 months are escalated to the Trust's Chief Executive for attention.

A 'Rapid Review Group' was established in October 2018 and this group continues to meet weekly to review formal complaints opened on the database the previous week. Brief information is also provided on complaints that have been re-opened and on new complaints received from NIPSO. This meeting provides an early opportunity to review the complexity and grading of complaints and recommends actions to promote a positive and timely outcome. A monthly report by Directorate and Division is also provided to this Group on the number of working days that formal complaints are outstanding. Following the meeting this report is shared with relevant senior staff for action.

Reports are produced regularly for each Directorate's Governance Committee. These provide information on complaints received, subjects, response times, lessons learned as well as details of outstanding complaints. Quarterly information is also provided on the number of compliments received.

The Trust continues to provide monthly monitoring returns to the Health and Social Care Board (HSCB) regarding lessons learned from all complaints closed each month. There continues to be a low percentage of complaints which meets the requirement of the regional guidance to be responded to within the 20 working days timeframe. The Trust recognises that this is one of the key quality indicators for the Trust. In March 2020 the Trust developed an Overarching Safety and Quality Management System Improvement Plan which includes complaints response times. Progress in relation to proposed actions for improvement will be monitored by the Trust Governance Committee and Trust Board.

### Lessons Learned & Service Improvements from Complaints:

We welcome complaints so that we can learn lessons and improve our service. An action plan is completed, where appropriate, following investigation of complaints. We use this information to feed back to patients and staff on changes and improvements made.

Complaints are discussed with staff concerned and often the issues are brought to staff meetings and other professional forums for discussion on how services can be improved.

### You said, we did

**You said:**

The standard of record keeping was very poor

**We did:**

Practice Educator, with support from Clinical Nurse Specialist, completed a quality improvement project with the focus of improving three main themes:

1. Holistic documentation with emphasis placed on the discussion had with the patient and family;
2. Interpreting medical documentation and summarising the relevant detail within the nursing documentation;
3. Care planning.

**You said:**

Family member suffered distress due to considerable length of time he had to wait on ward to get a bed

**We did:**

Staff now ensure more detailed information is given to patients and their families when waiting to be admitted and they will also be offered tea when waiting any length of time. Also raised awareness of the need to ensure staff are visible on the ward, particularly when the handover is taking place. The need to ensure better communication with patients and family members if they have to wait to be admitted to the ward.

**You said:**

Patient was waiting a considerable length of time for surgery

**We did:**

Provided reassurance that the Trust is exploring the possibility of a regional clinical network arrangement for the provision of this procedure.

**You said:**

There was very poor communication from staff regarding patient's prognosis

**We did:**

Raised awareness amongst staff that, when dealing with patients and families facing a terminal diagnosis, they need to be more effective and sensitive in communicating with them

**You said:**

It was difficult to get a disabled car parking space when attending hospital

**We did:**

Provided reassurance that the Trust monitors closely the car parking at all the hospital sites and the recent audits for the Omagh Hospital site did not indicate any undue or unexpected increase in demand, however the site does experience pressures at peak times and the Trust is continuing to monitor this situation and assess the need for further additional spaces.

**You said:**

Staff failed to diagnose my fracture

**We did:**

Explained that, when the Radiology reports are printed these are sent to the referring doctor. For patients, who have had an abnormality which was not identified at the time of presentation, they would routinely be contacted to arrange further investigation. Acknowledged that, unfortunately, this did not occur on this occasion and reassured that the processes around which Radiology reports are vetted was being reviewed to ensure that this system is robust and that instances such as this will not occur in the future



### Learning from a NIPSO case:

A complaint on how the Trust dealt with an Adoption Application and how it was managed in line with the relevant legislation, policies, procedures and guidelines:

The learnings as a result of the investigation included:

- i. Agree a process for Trust staff to follow when it receives a request to join Link Maker or similar organisations;
- ii. Provide statistical information to prospective adoptive parents at the initial stages of the process; and
- iii. In relation to the provision of explicit consent to obtain medical information, ensure that 'applicants provide consent throughout their adoption journey as required'.

### Plans for the incoming year – 2020/21

- The Trust has a documented policy for the management of complaints which is currently being updated. Following the formal approval of the updated policy, an extensive training programme will be rolled out to staff. This will focus on Complaints Awareness Training dedicated for front line staff and Level 2 Investigating training dedicated for Investigating Officers.
- The Trust has recently purchased the DATIX Web Complaints Module and this will be rolled out during the 2020/21 year with an extensive training programme to support staff to input complaints information and learning at the front line so that lessons learned can be shared quickly.
- The Trust plans to take forward Care Opinion in the incoming year. This is an online user feedback service which will be introduced across Health and Social Care (HSC) in Northern Ireland, independent sector which interfaces with HSC and commissioned services in Community & Voluntary Sector. This platform enables people to share their experiences of health care and Care Opinion will publish feedback and responses from service providers on its website where both the individual providing the feedback and the wider public can see the outcome. Staff in the Complaints Department will contribute to its successful implementation.
- Promote timely recording of compliments on the Trust's online system using a range of communication methods to encourage staff to record all of the written positive feedback they receive.

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