

WESTERN HEALTH & SOCIAL CARE TRUST COMPLIMENTS AND COMPLAINTS ANNUAL REPORT 2023/2024

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 2023 to 31 March 2024.

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. While 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 practices amongst our staff. In addition, compliments can help boost morale.

- Processed 647 Formal Complaints
- 98% of formal complaints received were acknowledged within 2 working days.
- 3,070 written compliments were received during 2023/24 compared to 2,282 for the previous year
- 35% decrease in the number of complaints reopened compared to the 2022/2023 period.
- 849 trust staff have completed Complaints Awareness Training on the HSC Learn Platform; this is a 26% increase compared to the 2022/2023 period.
- 100 trust staff have completed face-to-face Investigating Officer Training provided by Complaint Officers.

Complaints:

There has been a 2% decrease in the number of complaints received during the 2023/24 year in comparison to the 2022/2023 year. This number should be viewed in the context of 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 4,842km² and has approximately
- 12,000 staff
- 7 hospitals
- 30 day centres
- 8 children’s homes
- 11 health centres and clinics
- Care is provided directly into thousands of people’s homes

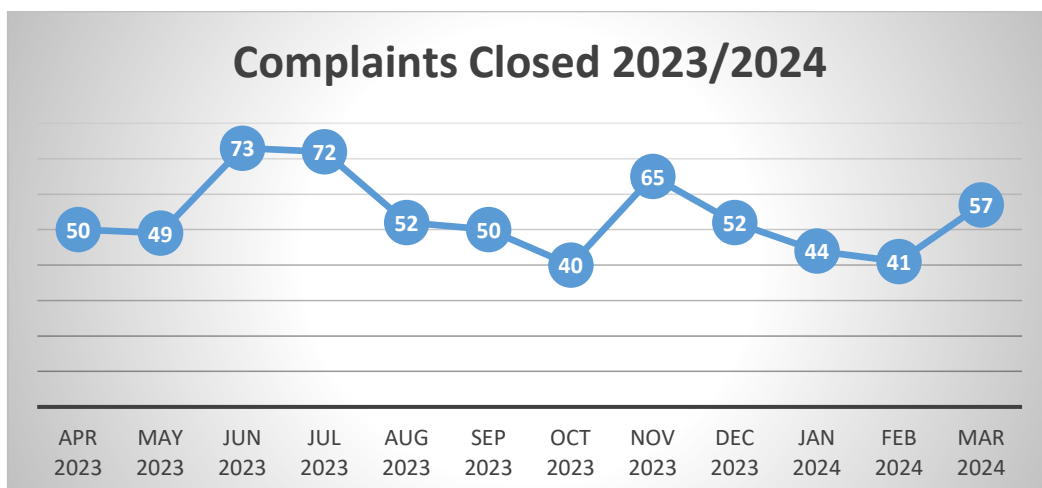
Complaints this year:

During the 2023/24 year, a total of 647 Formal Complaints were received by the Trust. This compares with 660 complaints during the previous financial year but it is important to note that still represents a 42% increase on pre-covid 5 year average.

Our Online Complaints Awareness e-training module (completed by 849 staff members in 2023/2024) based on the Health and Social Care Complaints Procedure highlights the emphasis around enhanced local resolution and encourages staff to resolve complaints at a local level.

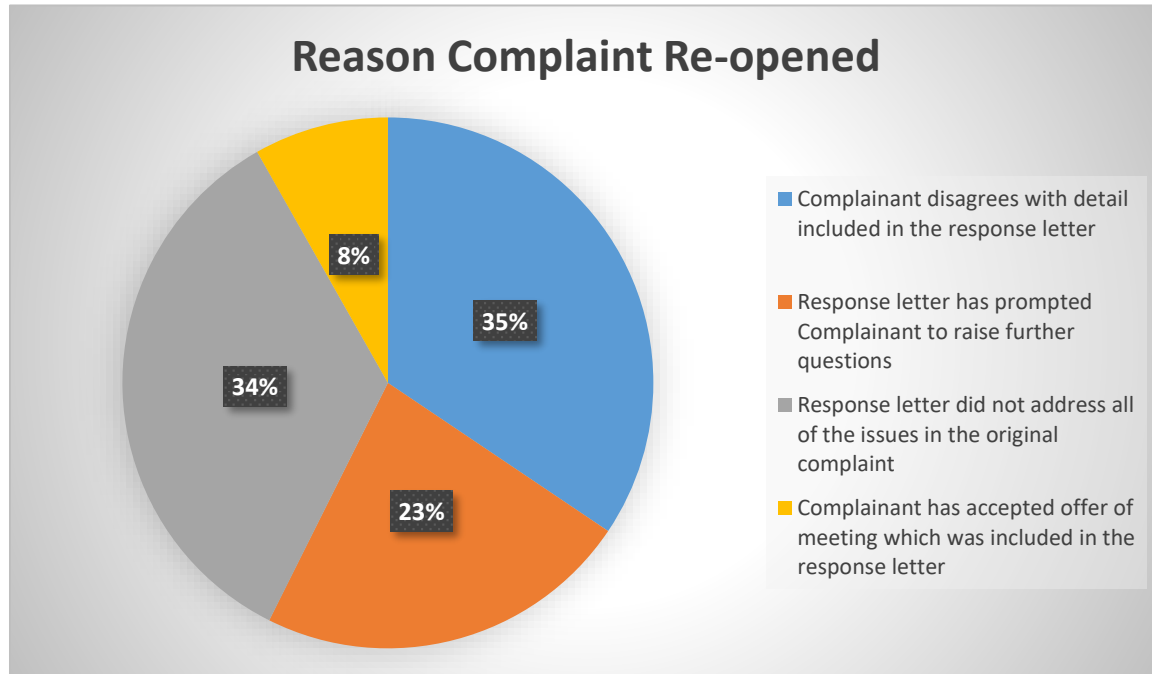
Complaints resolved during 2023/2024:

During the 2023/2024 year, out of the 647 Formal Complaints received, a total of 447 (69%) were resolved. If the complainant was dissatisfied with the Trust’s response, a complaint was reopened if appropriate. The following graph provides a breakdown by financial year of complaints closed.



Of the 447 closed complaints, there were 47 reopened (10.5%); this is a decrease from 2022/2023 (12%).

Reasons for complaints being reopened:



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. It is acknowledged that informal complaints are underreported and consideration is being given to a more robust process for accurate recording in this area. During 2023/24, 75 Informal complaints were recorded, this is a 12% increase over 2022/2023 period. Of these, 92% were resolved successfully.

Compliments:

While 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 2023/24, the Trust received 3070 compliments that is a 35% increase over the 2022-2023 period. 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.

The Complaints team and the Care Opinion team continue to work together to share compliment and complaint themes with a view to collating all patient and service user experiences, with a view to disseminating this learning to enhance our services.

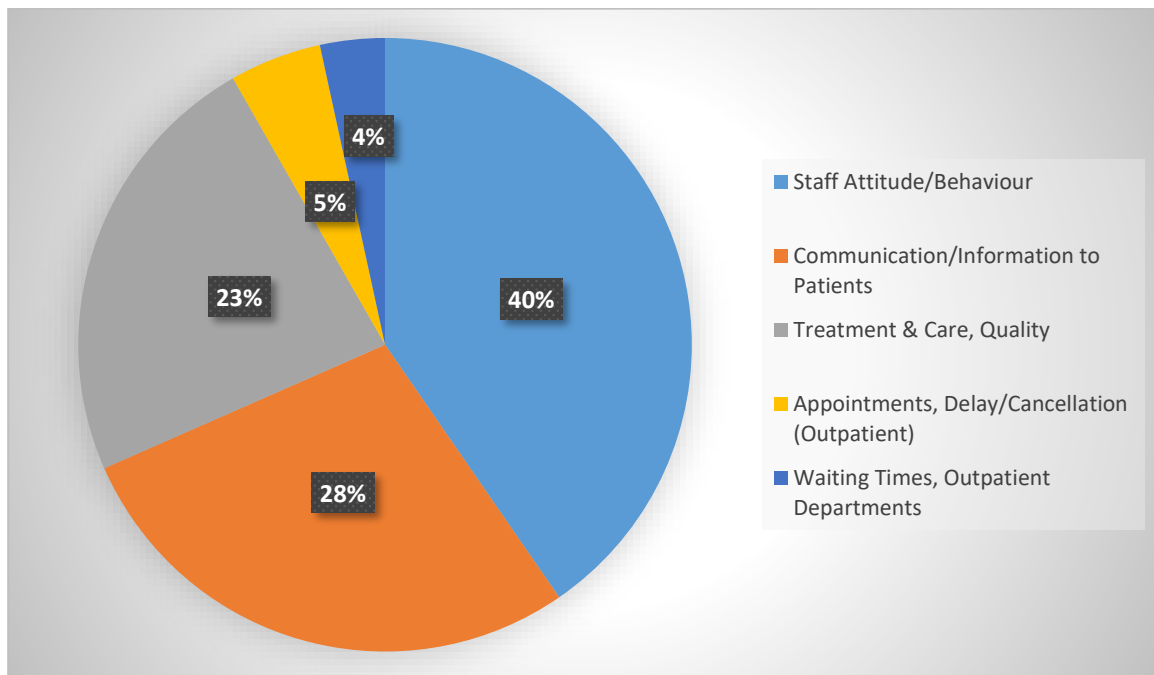
	2019/20	2020/21	2021/22	2022/23	2023/2024
Complaints	497	417	524	660	647
	(+12)	(-16%)	(+26%)	(+26%)	(-2%)
Compliments	4961	2768	2512	2282	3070
	(-7%)	(-44%)	(-9%)	(-9%)	(+35%)

As we can see from the above data, compliments figures have risen for the first time in many years.

Complaints by Subject – Top 5

The top five categories of complaints received during 2022/23 are set out below.

Complaints by Subject (Primary) - Top (5)



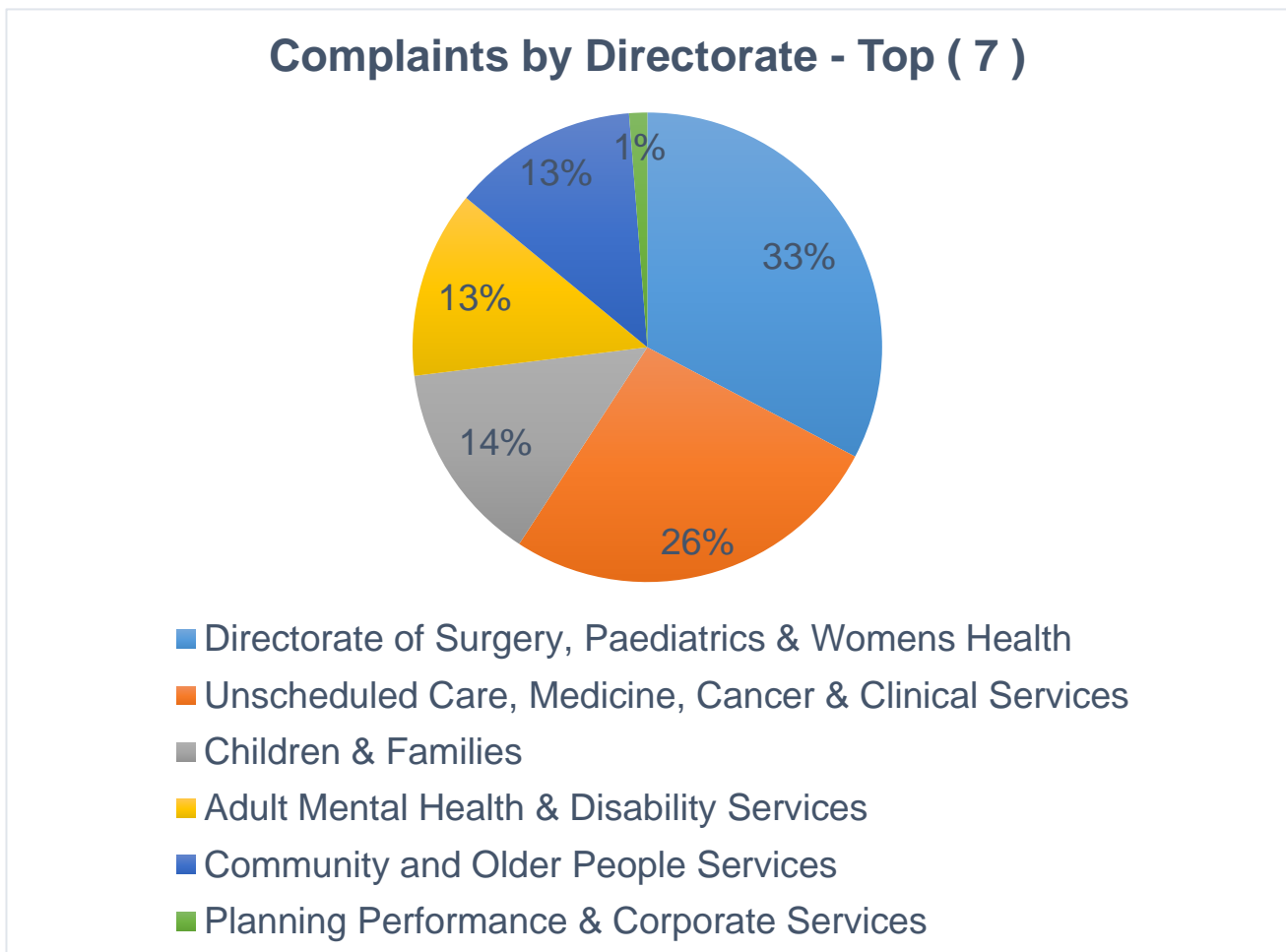
What people complained about:

The table below shows all the complaints by subject for the past year (2023/24). The figures provide a breakdown of issues complained about, as a complaint can raise more than one issue.

For 2023/24, 647 complaints were received which raised **1,407** Subjects. Please see the below table which provides detail on the Top 5 Subjects Reported:

Treatment & Care, Quality	438
Communication/Information to Patients	288
Staff Attitude/Behaviour	245
Professional Assessment of Need	91
Waiting Times, Outpatient Departments	52
Totals:	1114

This graph shows the breakdown of formal complaints received by Directorate for the 2022/23 year:



Response times to complaints:

Over the year 98% of complaints were acknowledged within the target of 2 working days and the average number of working days to provide a substantive response was 65 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 the receipt of a number of complex complaints – involving in many cases – more than one service area as well as the time and resources required for thorough investigation and development of responses at the service level.

The Trust continues to monitor timescales and promotes the need to provide timely responses. Performance measures for both compliments and complaints are included 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 into their complaint. In the last year 5% 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 decides that they cannot resolve a complaint, the case is forwarded to the Ombudsman's Investigations Team. In 2023/24 there were 10 case requests for information from the NIPSO Office. 6 cases were screened in and are on-going, 3 cases were not upheld by NIPSO and 1 complaint was withdrawn from NIPSO by the complainant.

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.

'Rapid Review Group' 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 Strategic Planning and Performance Group (SPPG) formerly the Health and Social Care Board (HSCB) regarding lessons learned from all complaints closed each month.

Complaints to Serious Adverse Incidents:

In 2023/24 there were five complaints received which resulted in a serious adverse incident (SAI). Upon analysis 20% (1) of these complaints already had an incident recorded, which was under investigation when the complaint was submitted to the Trust. 80% (5) of these complaints triggered an investigation.

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 an 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.

Learning outcomes are monitored through the Trusts assurance Framework quarterly within The Governance Committee and also through the Improvement Through Involvement Committee to ensure that all patient's voices are heard.

You said, we did

Complainant said:

There was no communication regarding father's discharge and only found out about this when the Nursing Home informed her that her father had arrived there.

We did:

Staff have implemented a system where nursing staff proactively contact families on a daily basis with an update.

Complainant said:

I have concerns about the attitude of a social worker and the lack of follow up with issues relating to a vulnerable adult.

We did:

Reassurance given that Social Workers receive extensive training in areas highlighted in complaint. Case should have been kept open until there was clear communication and a robust plan in place for the client.

You said, we did

Complainant said:

She had concerns regarding possible deterioration in her husband's eyesight due to delay in him receiving notification of an appointment.

We did:

Miscommunication between Optician and patient led the patient to believe that an email would be sent to Ophthalmology Consultant. This caused confusion for the patient. It identified a need to explain the referral pathway to patient and his wife. Optician was also contacted regarding the referral process. Learning will be shared with all key staff involved in the patient pathway and who have been involved in the patient's care. Feedback will then be provided to the Booking Team, Optometrists, Nursing and Consultant Teams.

Complainant said:

They had concerns about a data breach regarding their client's information.

We did:

Principal SW apologised that the information was shared inappropriately and for the distress this caused to the complainant and offered to meet to apologise in person. Service manager advised this was reported to the Information Commissioner's Office. Lessons to be learned in relation to confidentiality and the sharing of information.

Learning from a Northern Ireland Ombudsman Case

If a complainant is not happy with the Trust's final response to their complaint they can request a further review by the Ombudsman.

A final report received from the NI Ombudsman's Office following their investigation into a complaint focussed on the following issues:

i) Whether the care and treatment received by the patient was reasonable and in line with relevant standards and guidelines.

The following recommendations were highlighted as part of their investigation:

- i) Ensure all staff are reminded of the importance of timely catheterisation in the management of acutely unwell patients;
- ii) Encourage relevant staff to attend further training relevant to appropriate care of critically ill surgical patients;
- iii) Include the requirement for timely catheterisation in the Surgical Team's induction material;
- iv) Ensure those staff involved in the care of acute pancreatitis are familiar with current relevant guidance. This will be reflected within their personal appraisal/revalidation process;
- v) Remind the Surgical Team of the critical care referral and escalation process.

These recommendations have now been taken forward by the Trust.

Plans for the incoming Year – 2024/2025

- Continued rollout of the Complaints Datixweb system amongst all Directorates
- Continued support to be provided to all Complaints Investigating Officers through the provision of level 2 Investigating Officer Training
- Preparation for the rollout of the new Ombudsman's Complaints Handling model within the Trust in April 2025.
- Continuing to highlight learning from complaints and Ombudsman cases, and use this to identify how things can be done better to improve service delivery throughout the Trust. The Improvement through Involvement Committee will be utilised to enhance this system.
- Implementation of recommendations from internal audit findings to improve the Complaint handling process.
- The Complaints department has begun an in-depth review of the complaint handling process to ensure compliance with the Trust Equality Scheme and to ensure the complaints department promotes equality and good relations in regards to complaint handling. This review is currently identifying areas for

improvement. The complaints department is actively working with the Trust Equality team and externally with the Equality Commission for support to identify best practices.

- Training requirements for Complaints staff to support and enable a more effective process for management of complaints aligned to the new regional Complaints Handling Procedure.

