

## WESTERN HEALTH & SOCIAL CARE TRUST COMPLIMENTS AND COMPLAINTS ANNUAL REPORT 2020/2021

### 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 2020 to 31 March 2021.

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 2020/2021 year:

- Processed 417 Formal Complaints and 3 Children Order Complaints;
- Resolved 83% (345) of the Formal complaints received;
- Acknowledged 93% (387) of the Formal Complaints Received within 2 working days;
- Received 2,768 compliments
- Developed and rolled out an interactive Complaints Awareness E-Learning Training package for all staff;
- Updated and approved the Trust's Complaints Policy;
- 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

***\*likely to increase due to delayed reporting***

## Complaints:

There has been a 16% reduction in the number of complaints received during the 2020/21 year in comparison to the 2019/2020 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 12,000 staff
- 7 hospitals
- 30 day centres
- 8 children's homes
- 11 health centres and clinics
- Approximately, 100,000 admissions to hospital, 20,000 operations, 120,000 emergency department attendances and 220,000 Out-patient attendances during 2020/21
- Approximately 17,000 social work contacts and 390,000 community nursing and health visitor contacts;
- Care is provided directly into thousands of people's homes

### Complaints this year:

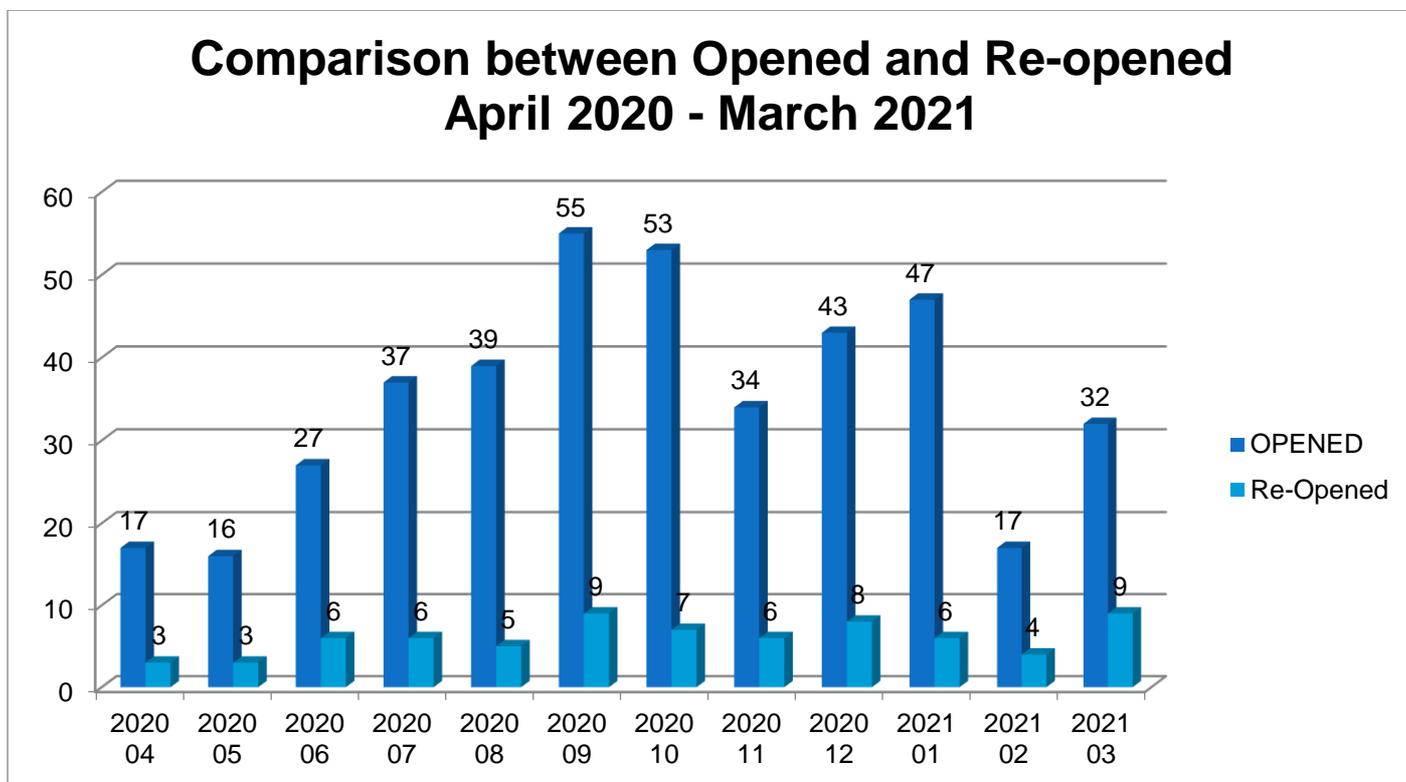
During the 2020/21 year a total of 417 Formal Complaints and 3 Children Order Complaints were received by the Trust. This compares with 497 complaints during the previous financial year.

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 2020/2021:



During the 2020/2021 year, out of the 417 Formal Complaints received, a total of 345 (83%) 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 3 Children Order complaints resolved by the service at the informal “problem solving” stage.

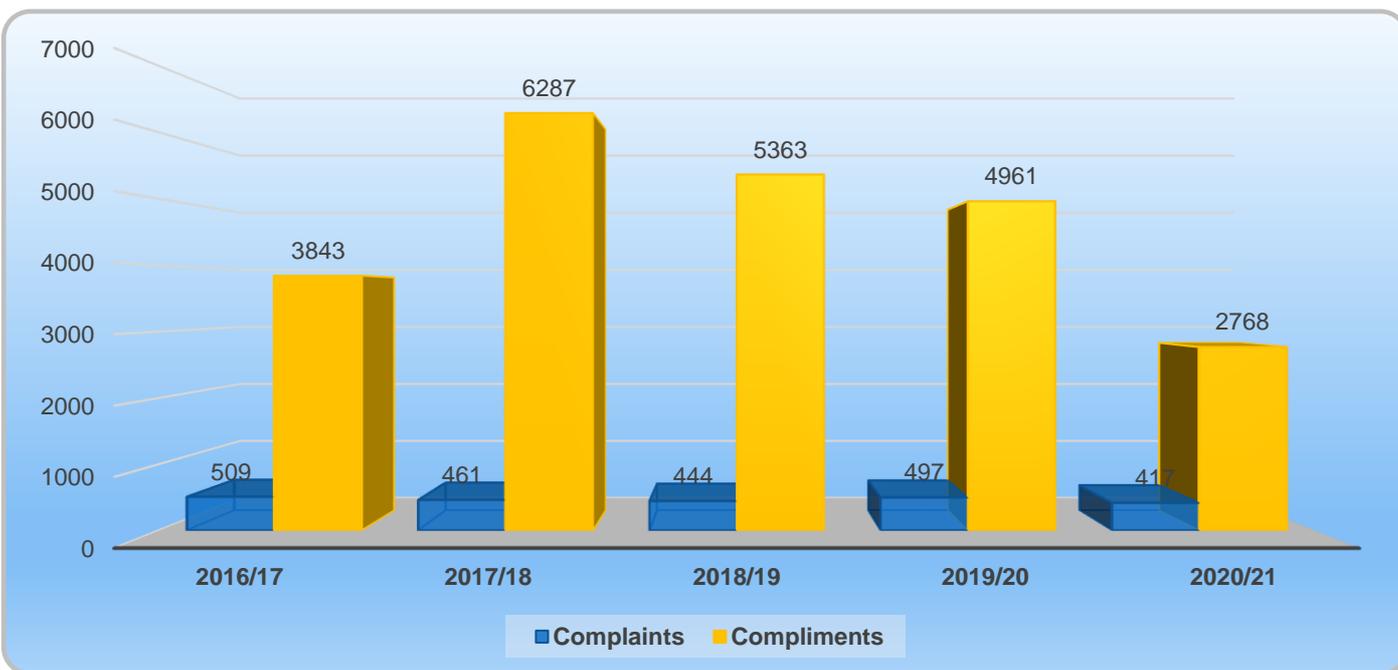
### Informal Complaints:

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:

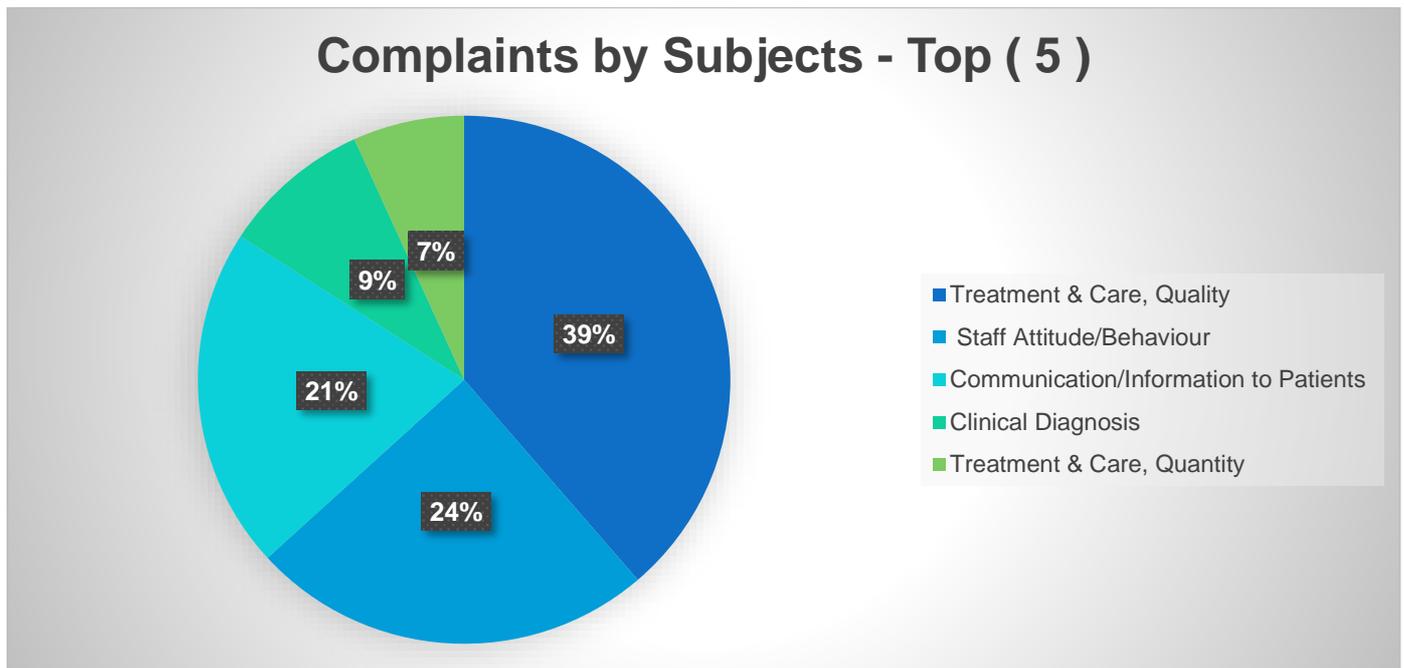
Whilst the Trust recognises that sometimes things go wrong, each year it receives thousands of letters, emails and social media comments of appreciation and expressions of thanks to acknowledge the excellent services provided. In 2020/21 the Trust received 2768 compliments. We are proud of our staff 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.



**Complaints by Subject – Top 5**

The top five categories of complaints received during 2020/21 are set out below.



### What people complained about:

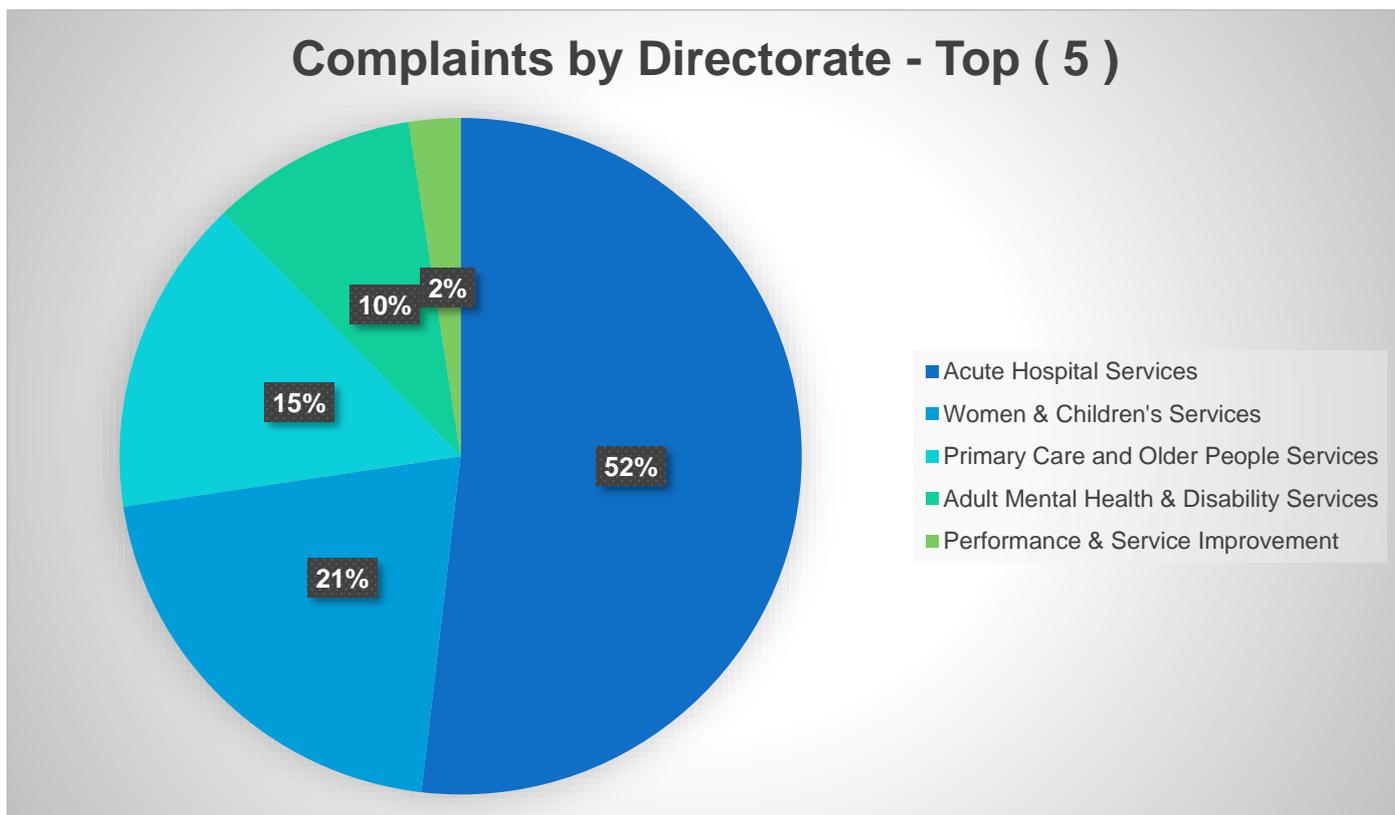
The table below shows all the complaints by subject for the past year (2020/21). The figures provide a breakdown of issues complained about, as a complaint can raise more than one issue. \*For 2020/21, 417 complaints were received which raised 627 issues.

|  |     |
|--|-----|
| Treatment & Care, Quality                                | 183 |
| Staff Attitude/Behaviour                                 | 116 |
| Communication/Information to Patient                     | 99  |
| Clinical Diagnosis                                       | 43  |
| Treatment & Care, Quantity                               | 32  |
| Discharge/Transfer Arrangements                          | 19  |
| Admission into Hospital, Delay/Cancellation (Inpatients) | 18  |
| Other  | 16  |
| Patient's Property/Expenses/Finance                      | 13  |
| Confidentiality  | 13  |
| Appointments, Delay/Cancellation (Outpatient)            | 12  |
| Policy/Commercial Decisions                              | 9   |
| Professional Assessment of Need                          | 9   |
| Patients' Privacy/Dignity                                | 6   |
| Records/Records Keeping                                  | 5   |
| Waiting Times, Outpatient Departments                    | 5   |
| Theatre/Operation Procedure, Delay/Cancellation          | 4   |
| Aids/Adaptations/Appliances                              | 4   |

|   |            |
|---|------------|
| Hotel/Support/Security Services             | 3          |
| Waiting Times, Accident & Emergency         | 3          |
| Delayed Admission from Accident & Emergency | 3          |
| Waiting Times, Community Services           | 2          |
| Access to Premises                          | 2          |
| Infection Control                           | 1          |
| Patient's Status/Discrimination             | 1          |
| Consent to Treatment                        | 1          |
| Transport, Late or Non-Arrival/Journey Time | 1          |
| Waiting Lists, Community Services           | 1          |
| Other Contracted Services                   | 1          |
| Environmental                               | 1          |
| Complaints Handling                         | 1          |
| <b>Totals:</b>                              | <b>627</b> |

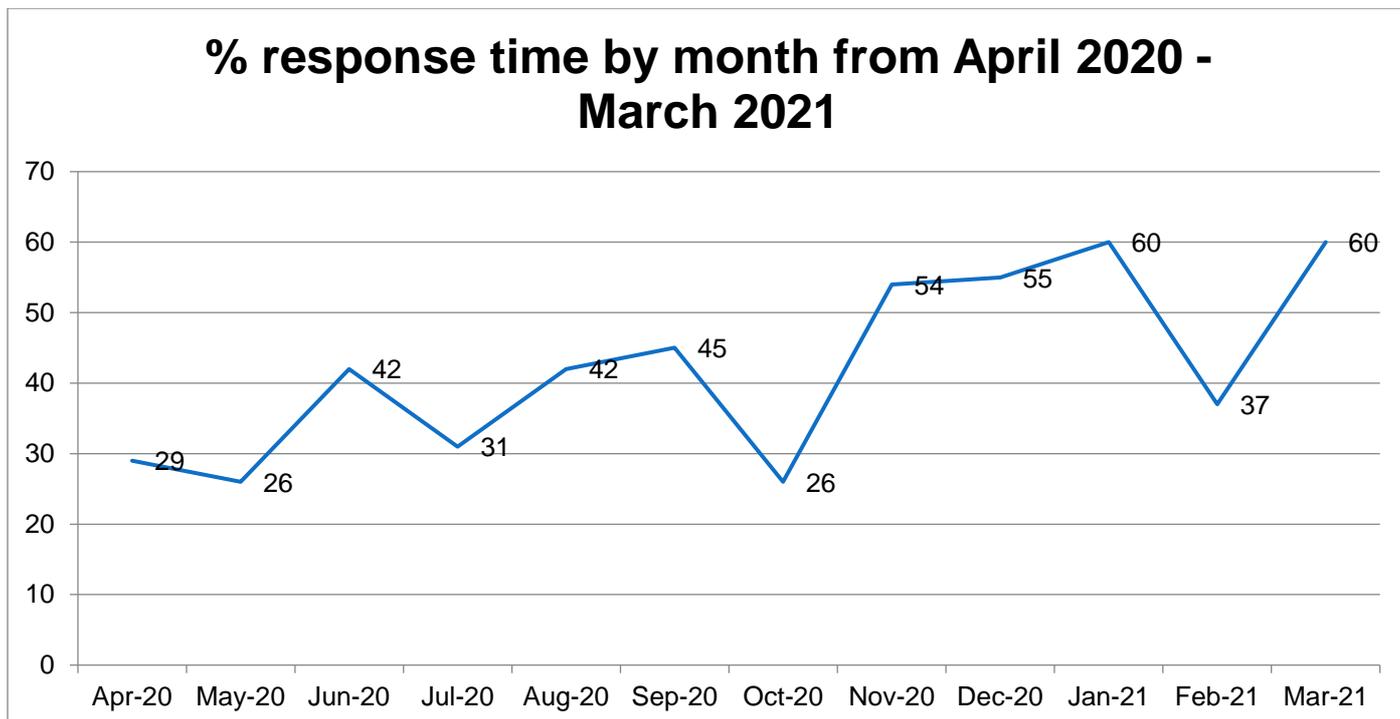
**Complaints received by Directorate:**

This graph shows the breakdown of formal complaints received by Directorate for the 2020/21 year:



**Response times to complaints:**

Over the year 93% of complaints were acknowledged within the target of 2 working days and 46% 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 due to the ongoing COVID 19 Pandemic also impacted on response times to 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 17% 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 2020/21 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:***

Complainant has raised a number of concerns relating to treatment and care provided to her late mother. Outlined cardiology history. Patient subsequently died. Asked specific questions to include why mother did not have annual appointments with cardiology as she was assured would be the case.

***We did:***

All medical colleagues must ask cardiology colleagues to review patients with prosthetic heart valves with concurrent infection that is not resolving.

All learning points will be incorporated into Junior Doctor Induction.

All learning points will be discussed at next Morbidity and Mortality Meeting. Learning will be part of medical student teaching at SWAH.

**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.

***You said:***

Complainant has raised concerns about the lack of continuity of care for his son from CAMHS and the lack of response from staff and how this is impacting on his sons overall health.

***We did:***

The issues highlighted will be taken forward with the team to encourage an environment of reflection, review and learning, and delivering a service that meets and supports the needs of the most vulnerable children.

**Learning from a NIPSO case:**

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

- (i) Was the patient's dose of Quetiapine appropriate?**
- (ii) Whether the Complainant's concerns regarding the level of sedation administered to his mother were adequately addressed by the Trust?**
- (iii) Whether the Trust's investigation of the Complainant's complaint was reasonable and in accordance with relevant guidelines?**

**The following recommendations were highlighted as part of their investigation;**

- The Community Health Team Manager completes routine audits to ensure a care plan is in place and risk assessments are updated;**
- Care plans and risk assessments are monitored during managerial supervision;**

- **An action plan will be completed and noted at the Directorate Governance meeting in relation to these recommendations;**
- **Information on medicine is provided by the prescribing Consultant,**

### **Plans for the incoming year – 2021/22**

- The Trust has a documented policy for the management of complaints which was updated in June 2021. The Trust plans to roll out an extensive training programme to staff which will focus 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 2021/22 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.
- 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.
- 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.
- Continuing to provide training to support improvements in how we respond to complaints.
- Continuing to promote the resolution of complaints on the frontline within wards and departments, and working to reduce the length of time taken to investigate and respond to complainants (particularly where responses have not been issued after 40 working days).



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