

# Concerns, Comments, Complaints and Compliments

## Annual Report 2012-2013



## 1. Executive Summary

1. The Trust adheres to the Local Authority Social Services and National Health Service Complaints (England) Regulations. This gives sets out a single approach to dealing with complaints. It gives organisations the flexibility they need to deal with complaints effectively. It also encourages a culture that seeks and then uses people's experiences to make services more effective, personal and safe. (reference 1).

The Trust also complies with the NHS Constitution which sets out that patients have a right to have their complaint dealt with efficiently, and properly investigated, and to know the outcome of any investigation into a complaint.

2. The purpose of this report is to provide information on informal concerns and formal complaints received by the Trust through the Customer Care Team (previously Patient Advice and Liaison Service (PALS) and formal complaints process) between 1 April 2012 and 31 March 2013.

The PALs service and complaints staff were amalgamated in 2012 and a Customer Care Team has been established to effectively manage concerns raised by patients, relatives and carers.

3. During 2012/2013 there were 1,597 informal contacts into the Customer Care Team. 1,374 (86%) of these contacts reported one or more concerns. 60% of these were resolved within 3 days by the Customer Care Team or through liaison with the teams involved: nursing staff, clinicians and allied health professionals.
4. The key themes identified raised through informal concerns were: appointment delays and cancellations, communication, and medical and nursing care.
5. There were a total of 197 complaints recorded from 1 April 2012 to 31 March 2013. This compares to 192 complaints received for the previous year.
6. The number of complaints received from MPs on behalf of constituents was 12 in 2012/13 compared to 8 in the previous year.
7. The grading all complaints is calculated using the Trust's risk categorisation Matrix. 132 complaints were graded low harm, 65 moderate and none graded as major. This grading reflects the status when the complaints were regraded following our response rather than when they first came in.
8. The top 5 trend categories identified in the formal complaints received were medical care, nursing care, communication, attitude and appointment cancellation/delay.

9. A performance report is provided on a monthly basis to the Trust board and bi-monthly to the Patient Experience Committee. These discuss informal concerns raised and formal complaints and describe learning that has occurred as a result and plans for future improvement to patient experience.
10. The Trust's Complaints Review Panel is responsible for providing information and assurances to the Patient Experience Committee that it is effectively managing all issues relating to the management of complaints.
11. This report outlines ongoing improvement plans for the service for 2012/13 and sets out the progress made both by the divisions and the Customer Care Team who continue to work in partnership to meet the needs of patients and families when they are dissatisfied.
12. Total number of re opened complaints was 33 (17%). The Trust is participating in a Complaint Survey co-ordinated by the Patients Association to try and understand whether our complaints process is satisfying our complainants. The results of this survey will help to identify where improvements can be made to existing complaints management practice.

(<http://www.patients-association.org.uk/Default.aspx?tabid=232>).

## 2. Informal Concerns Received by the Trust

### 2.1 Overview

During 2012/2013 there were 1,597 informal contacts into the Customer Care Team. 1,374 (86%) of these contacts reported one or more concerns.

**TABLE 1**

The following table shows the number of informal contacts received each quarter.

Qtr 1	Qtr 2	Qtr 3	Qtr 4
Apr – Jun 2012	Jul – Sep 2012	Oct – Dec 2012	Jan – Mar 2013
387	358	407	445

**TABLE 2**

The following table shows the number of informal contacts by the type of enquiry.

Contacts	Qtr 1	Qtr 2	Qtr 3	Qtr 4
Concerns	347	305	346	376
Compliments	40	53	61	69

## 2.2 Issues Raised Through Informal Concerns

Although 1,374 contacts raised concerns for this Trust, many of these were about more than one issue. Therefore, the number of issues raised is much higher than the number of contacts.

Table 3, shows the number of informal issues raised by the type of category. Table 4, overleaf, shows the top 5 issues raised by category.

**TABLE 3**

The following table shows issues raised by the type of category

<b>Issue Type</b>	<b>Number of issues raised 2011/2012</b>	<b>Number of issues raised 2012/2013</b>	<b>Trend</b>
Access to NHS Services	3	1	▼
Admission Arrangements	16	10	▼
Appointments – Delay and Cancellation	276	306	▲
Attitude of Staff	180	165	▼
Bereavement	9	5	▼
Care - Medical and Nursing	237	261	▲
Care of Older People – Medical and Nursing	177	172	▼
Communication	583	558	▼
Confidentiality	16	12	▼
Cultural	0	0	▶
Discharge	108	84	▼
Discrimination	4	5	▶
Entitlement to NHS Services	1	0	▼
Environment	68	99	▲
Equipment	31	29	▼
Hotel	19	10	▼
Infection Control	23	19	▼
Organisational	104	97	▼
Other	19	13	▼
Privacy and Dignity	20	13	▼
Property	102	96	▼
Records	17	23	▼
Time	45	57	▲
Transport	8	8	▶
Treatment – Delay and Cancellation	183	152	▼
<b>Total</b>	<b>2,249</b>	<b>2,195</b>	<b>▼</b>

The total number of issues has decreased by 54 on the year of 2011/2012 (2,249).

**TABLE 4**

The following table shows the top 5 types of issues raised by Category.

<b>Issue Type and Number</b>	<b>Issue Category</b>	<b>Number Received 2011/2012</b>	<b>Number Received 2012/2013</b>	<b>Trend</b>
Communication – 558 (583)	Between Health Professionals	120	103	▼
	Calls not Answered/Messages not Returned	20	21	▲
	With Patients – Face to Face	149	153	▲
	With Patients - Telephone	70	69	▼
	With Patients - Written	80	76	▼
	With Relatives – Face to Face	79	73	▼
	With Relatives - Telephone	52	51	▼
	With Relatives - Written	10	11	▲
	Other	3	1	▼
Appointments – 306 (276)	Cancellation of Appointment	146	156	▲
	Delay in Appointment	119	140	▲
	Appointment Time	8	10	▲
	Other	3	0	▼
Care – 261 (237)	Medical – Delay in Medical Review	19	34	▲
	Medical – Delay in Treatment	25	21	▼
	Medical – Diagnosis Problems	32	42	▲
	Medical – Medication Error/Delay	29	36	▲
	Medical – Operation Adverse Outcome	5	15	▲
	Medical - Other	37	32	▼
	Nursing – Delay Answering Call Bells	6	4	▼
	Nursing – Falls Assessment	0	0	▶
	Nursing – Medication Delay/Problem	22	16	▼
	Nursing – Nutritional Issues	11	12	▲
	Nursing – Oral Hygiene	1	1	▶
	Nursing - Other	31	22	▼
	Nursing - Personal Care	17	18	▲
	Nursing – Pressure Ulcer Care	2	2	▶
Scientific/Technical	0	6	▲	
Care of Older People – 172 (182)	Medical – Delay in Review	12	5	▼
	Medical – Delay in Treatment	18	10	▼
	Medical – Diagnosis Problems	8	14	▲
	Medical – Medication Error/Delay	23	15	▼
	Medical – Operation Adverse Outcome	2	6	▲
	Medical – Other	23	18	▼
	Nursing – Delay Answering Call Bells	7	8	▲
	Nursing – Falls Assessment	3	6	▲

Issue Type and Number	Issue Category	Number Received 2011/2012	Number Received 2012/2013	Trend
	Nursing – Medication Error/Delay	17	12	▼
	Nursing – Nutritional Issues	20	17	▼
	Nursing – Oral Hygiene	4	0	▼
	Nursing – Other	13	22	▲
	Nursing – Personal Care	28	27	▼
	Nursing – Pressure Ulcer Care	3	6	▲
	Scientific/Technical	1	5	▲
	Other	0	1	▲
Attitude of Staff – 165 (180)	Administration	36	25	▼
	Anaesthetist	1	1	▶
	Consultant	25	29	▲
	Doctor	31	20	▼
	HCA	8	12	▲
	Midwife	7	3	▼
	Nurse	57	59	▲
	Nurse Specialist	3	5	▲
	Porter	1	2	▲
	Scientific/Technical	5	7	▲
	Security	4	2	▼
	Other	2	0	▼

### 2.3 Examples of Service Improvement

The following are examples of service improvements made as a result of issues raised from informal concerns:

- ✓ Through a contact raising an issue regarding staff on ward 3 being unsure in the use of pic lines (peripherally inserted central catheters), extra training was put on for the staff. This is now to continue on a rolling program.
- ✓ Patients and public commented on people smoking in the Trust grounds and leaving cigarette ends and made suggestions made for signage regarding the hand hygiene. Improvements were made to signage.
- ✓ Upgrades were made to disabled facilities on the Surgical Specialties ward.
- ✓ Patients are asked to return a 24 hour blood pressure monitor at a certain time. Some patients were unsure of why this was and thought it may not be that important, resulting in some being returned back late. The letter was revised to advise patients the reason for needing the monitors back at a certain time.

- ✓ All departments in Diagnostics and Clinical Services Support Division received dementia training.
- ✓ A delay in observations and medication were highlighted on CAU. It was also suggested that families are shown around the unit. There was an improved handover of patients from assessment to the inpatient area, including showing family around and introducing them to nurse taking over care. More visibility of ward manager/deputy ward manager on ward rounds, handovers and co-ordinating during busy periods. Availability was made to parents to discuss concerns. Improved use of documentation, reviewing existing documentation and teaching new staff on documentation.

## 2.4 Compliments

The Trust receives many compliments each month in the form of letters, 'thank you' cards, e-mails and 'How are we doing' cards. In 2012/13, 223 contacts reported 644 separate compliments directly to the Chief Executive or the Customer Care Team.

**TABLE 5**

The table shows the number of compliments received by Division

<b>Division</b>	<b>Number Received</b>
Corporate	3
Diagnostics and Clinical Support Services	40
Emergency Care	265
Estates and Facilities	22
Surgery and Cancer	264
Women's, Children's and Sexual Health	49
Other	1
<b>Total</b>	<b>644</b>

In addition to the above, each ward and department log the number of compliments they receive and then forward to the Customer Care Team to collate. For this financial year, 126 letters, 1,489 'thank you' cards and 1,420 gifts were received by wards and departments.

## Community Presentations

The Customer Care Team have given two presentations to third sector organisations. These were the Wistaston Womens Institute and Marks and Spencer retired employees.

## Ethnicity Data

**TABLE 6**

The following table shows the ethnic background of people who raised an informal concern 2012/2013.

Ethnicity	Complainant	
	Number	%
White British	1342	82
White Irish	5	0.3
White – Any other Background	6	0.43
White/Black Caribbean	1	0.07
White/Asian	1	0.07
Any other Asian Background	1	0.07
Any other Ethnic Group	1	0.07
Not Stated	32	2.3
Pakistani	1	0.07
Black British/African	1	0.07
<b>TOTAL</b>	<b>1391</b>	<b>100</b>

### 3. FORMAL COMPLAINTS

#### 3.1 Overview

There were a total of 197 complaints recorded from 1 April 2012 to 31 March 2013. This compares to 192 complaints received for the previous year.

The Trust places a high priority upon the handling of complaints and aims to do everything possible to ensure that complaints are dealt with speedily and efficiently, complainants are treated courteously and sympathetically and are involved in decisions about how their complaints are handled and considered.

**TABLE 6**

The following table shows the number of complaints received each quarter.

Qtr 1	Qtr 2	Qtr 3	Qtr 4
Apr – Jun 2012	Jul – Sep 2012	Oct – Dec 2012	Jan – Mar 2013
57	45	44	51

Of the complaints received:

- 23% were fully upheld; 49% were partially upheld; 25% were not upheld.

#### 3.2 Performance

- 81% of our complaints were acknowledged within three working days of receipt.



### 3.3 Issues Raised in Complaints

Although 197 complaints were received, many of these were about more than one issue. Therefore, the number of issues raised is much higher than the number of complaints received.

Table 7 provides an analysis of complaints by type.

**TABLE 7**

Issue	Number Received 2011/12	Number Received 2012/13	Trend
Medical Care	131	159	▲
Nursing Care	88	72	▼
Communication	99	102	▲
Staff Attitude	49	50	▲
Appointment Cancellation/Delay	21	21	▶
Discharge	18	19	▲
Treatment Cancellation/Delay	12	9	▼
Privacy and Dignity	10	5	▼
Car Parking	7	3	▼
Medical Records	6	8	▲
Organisational	6	2	▼
Confidentiality	6	2	▼
Loss of Personal Property	4	6	▲
Transfer Arrangements	3	2	▼
Infection Control	3	0	▼
Equipment	2	2	▶
Consent to treatment	2	5	▲
Discrimination	2	0	▼
Mixed Sex Accommodation	2	0	▼
Hotel Services – Food	1	1	▶
Hotel Services - Cleanliness	1	1	▶
Transport	1	0	▼
Condition of Ward	0	0	▶
Admission Arrangements	0	4	▲
Death Certification/PM arrangements	0	0	▶
Physio - mobilisation	0	2	▲
<b>Total</b>	<b>484</b>	<b>475</b>	

The top 5 trend categories identified in the formal complaints received were as follows:

- Medical care (e.g. concerns relating to diagnosis and treatment, known complications of treatment, medication issues).
- Nursing care (e.g. medication issues, nutritional support, general issues relating to care, falls, continence).
- Communication.
- Attitude.
- Appointment cancellation/delay (for appointment, admission and waiting time in outpatient clinic).

### 3.4 Complaints by Service

**TABLE 8**

The following table shows the number of complaints raised relating to services compared to the previous year.

<b>Service</b>	<b>2011/12</b>	<b>2012/13</b>
Inpatient	120	106
Outpatient	41	46
A&E	17	34
Maternity	11	8
Community Services	3	0

### 3.5 Complaints made by complaints directly to Central and Eastern Cheshire Primary Care Trust (CECPCT)

Under the new complaints guidance, complainants may complain to the commissioner rather than the provider of NHS services and in 2012/13, CECPCT received 9 complaints about services provided by the Trust. These have been logged as formal complaints by CECPCT and are not included in Trust data as formal complaints.

### 3.6 Complaints referred to the Ombudsman

The Trust works hard to ensure that all people who have raised a complaint feel that their concerns have been taken seriously and that their complaint has been resolved to their satisfaction. Those complainants who remain dissatisfied with the response they have received from the Trust are advised that they may request an Independent Review of their complaint by the Parliamentary Health Service Ombudsman. The Ombudsman's Principles, published in March 2009, set out her expectations in regard to good complaint handling, and the Trust's Complaints Policy is aligned to this person centred approach. It is important, therefore, that investigations are carried out thoroughly. The Trust must be able to demonstrate a good audit trail on how the outcome of an investigation was concluded if required.

In 2012/13 there were five requests for complaint review made to the Ombudsman. One of these was not accepted for review and was closed. The remaining four continue to be investigated:

Two complaint investigations were concluded by the Ombudsman. The first complaint was upheld and required an action plan to be completed. This was undertaken and the complaint was formally closed by the Ombudsman in February 2013. The second was partially upheld and an action plan was requested to be sent to the complainant and Ombudsman by April 2013.

### **3.7. Lessons Learnt from formal complaints**

Lessons learnt from complaints are disseminated through the following:

- Ward staff meetings.
- Ward managers' meeting.
- Discussion at divisional governance meetings.
- Individual debriefing/staff appraisal.
- Training and education sessions with staff groups including induction and customer care training.
- Case presentations to medical and nursing staff.
- Feedback to patients and relatives.

#### **Examples of actions taken in response to complaints include:**

- ✓ Relatives experienced difficulty in accessing information whilst on the ward. In response to this, the Nurse Co-ordinator Role had been introduced on wards to act as a communication link for relatives.
- ✓ Patient information sheets have been developed for patients attending the Treatment Centre who undergo general anaesthetic.
- ✓ The members of the dedicated Home Birth Team have been reintegrated into the community teams to share their expertise and to support the midwives in attending home births. Training and advice for the community midwives has been facilitated as a supplement to the annual mandatory training.
- ✓ Posters, with the contact details for the ward manager, matron and lead nurse, are displayed in the ward area and encourage patients and relatives to raise any concerns they may have.
- ✓ A chart has been developed to record that a patient's oral care has been assessed and given.
- ✓ Discharge Co-ordinators now work alongside Nurse Co-ordinators on the wards to improve patients' arrangements for discharge.
- ✓ A flexible cystoscopy guideline has been developed for medical trainees and is available on the Trust intranet.

### 3.8. Ethnicity Data

**TABLE 10**

The following table shows the ethnic background of people who made a complaint in 2012/2013.

Ethnicity	Complainants	
	Number	%
White British	133	67.5%
Irish	0	0%
White Other	0	0%
Asian or Asian British	0	0%
Mixed	0	0%
Black or Black British	0	0%
Other Ethnic Group	1	0.5%
Undisclosed	63	32%
<b>Total</b>	<b>197</b>	<b>100%</b>

### 4. Areas for development in 2013/14

1. To further reduce the number of re-opened complaints, ensuring that the response to complainant's addresses all concerns.
2. Continue to ensure that complaints are linked to risk governance if serious untoward incidents are identified.
3. To incorporate into Customer Care sessions for staff the communication of positive feedback to wards and departments.
4. To survey complainants to assess the level of satisfaction with complaint handling and attend the Patient's Association panel meetings to benchmark complaints anonymously with other Trusts.

### 5. Conclusion

This annual report will be received by the Patient Experience Committee and the Complaints Review Panel for comment.

QuEst is asked to note the content of this report and, in line with statutory requirements, give approval for it to be published on the Trust's internet site.

**Reference 1** – DH Guide - Listening, responding, improving: a guide to better customer care. The guide has been developed to help complaints professionals work with colleagues to make their organisations better at listening, responding and learning from people's experiences. It is designed to be accessible to anyone working in health and social care organisations who is involved in receiving feedback and resolving concerns and complaints from patients, service users and their representatives. Additional advice sheets for complaints professionals have also been produced covering a range of issues.