

Complaints Annual Report 2012 - 2013

Foreword

This is the sixth Complaints Annual Report for the South Eastern Health & Social Care Trust covering the year 1 April 2012 to 31 March 2013 which I am presenting as the Director with responsibility for complaints.

The Trust has a Lessons Learnt Sub Committee, as part of the Governance and Risk Management infrastructure. The role of this committee is to ensure that lessons learnt have been put into practice on an organisational wide basis.

The overall number of complaints received has risen to 962 this year. Whilst we endeavour to ensure that our services fully meet the expectations of our patients and clients at all times, we wish to know when they do not and in these circumstances we welcome complaints to enable the Trust to take the appropriate remedial action to prevent a recurrence.

I would like to express my gratitude to Trust staff for their continued dedication to the resolution of complaints and for their sensitive handling of issues that are important to complainants.

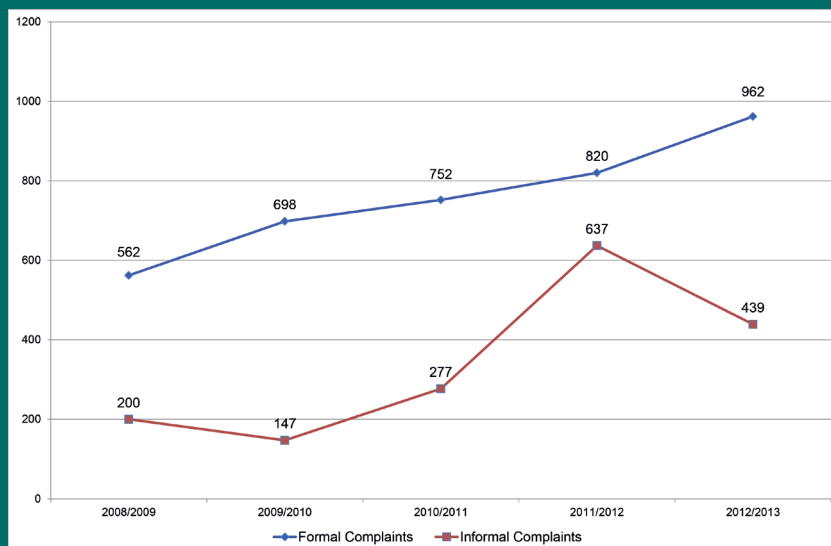
Eamonn Molloy

Director of Human Resources & Corporate Affairs



Complaints this year

During the past year (2012-2013), the Trust received a total of **962** formal complaints. The chart below shows the number of formal and informal complaints received over the past year in comparison with the 4 preceding years.



There has been a **17%** increase in formal complaints in the past year. However, the number of complaints continues to be low, considering the large geographical area the Trust covers and the volume of contacts Trust staff have with patients and clients.

The Trust:-

- Provides services from the Ulster, Lagan Valley, Downe, Newtownards, and Bangor Hospitals
- Applies 60% of resources to community based services, supporting people in their homes
- Serves a population of 440,000
- Has approximately 11,500 staff
- Provides over 250 different health and social care services.

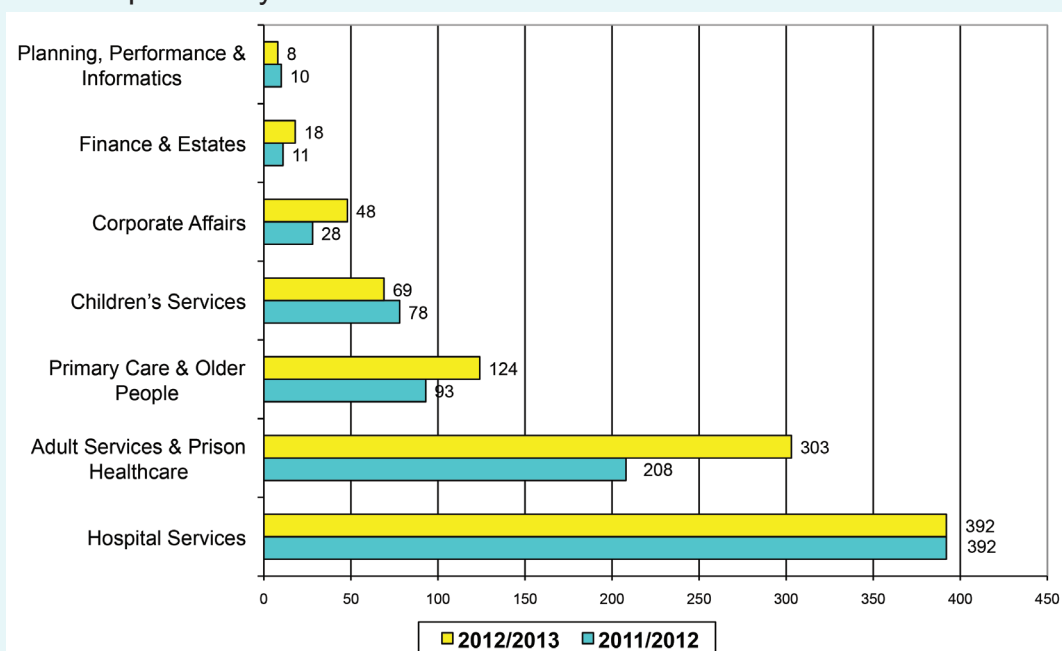
What people complained about

The chart below shows the number of formal complaints by subject for the past year (2012/2013) in comparison to the previous year (2011/2012). The figures are per issue of complaint, as complaints can have more than one issue each. For 2012/2013 we had complaints made by **962** complainants and these raised **1459** issues, compared to 2011/2012 figures of **820** complainants and **1190** issues.

The top three subjects (excluding Prison Healthcare) of complaint this year again were about quality of care, communication and staff attitudes. This is similar across all the Health & Social Care Trusts.

Subjects	2011/2012		2102/2013	
	Count	Percentage	Count	Percentage
Treatment & Care, Quality	247	20.8%	301	20.6%
Communication/Information to Patients	159	13.4%	201	13.8%
Staff Attitude/Behaviour	163	13.7%	191	13.1%
Prison Healthcare	176	14.8%	267	18.3%
Appointments, Delay/Cancel (Outpatients)	44	3.7%	50	3.4%
Clinical Diagnosis	33	2.8%	50	3.4%
Access to Premises	20	1.7%	30	2.1%
Policy/Commercial Decisions	28	2.4%	30	2.1%
Environment	26	2.2%	29	2.0%
Treatment & Care, Quantity	20	1.7%	28	1.9%
Records/Records Keeping	18	1.5%	25	1.7%
Discharge/Transfer Arrangements	17	1.4%	21	1.4%
Aids/Adaptations/Appliances	19	1.6%	19	1.3%
Waiting Times, A&E Departments	30	2.5%	18	1.2%
Admission into Hospital, Delay/Cancel (Inpatients)	22	1.8%	16	1.1%
Patients' Property/Expenses/Finance	20	1.7%	16	1.1%
Confidentiality	13	1.1%	13	0.9%
Patients' Privacy/Dignity	9	0.8%	13	0.9%
Contracted Regulated Establishments/Agencies	7	0.6%	12	0.8%
Theatre/Operation/Procedure, Delay/Cancel	6	0.5%	11	0.8%
Hotel/Support/Security Services	11	0.9%	10	0.7%
Infection Control	16	1.3%	10	0.7%
Waiting Times, Outpatient Departments	10	0.8%	10	0.7%
Contracted Services, Other	2	0.2%	9	0.6%
Delayed Admission from A&E	5	0.4%	9	0.6%
Patients' Status/Discrimination	5	0.4%	9	0.6%
Professional Assessment of Need	10	0.8%	9	0.6%
Waiting Lists, Community Services	11	0.9%	8	0.5%
Other	43	3.6%	44	3.0%
Totals:	1190	100%	1459	100%

This graph below shows the breakdown by directorates of formal complaints for 2012/2013 in comparison to the previous year.



Response Times

The majority of complaints which we received were acknowledged within 2 working days. We strive to investigate and respond to complaints within the target of 20 working days. However, due to the complexity of some complaints, this is not always possible.

In the past year, **2012/2013**, **43%** of complaints were responded to within the timescale. This is a slight drop from the previous year (**46%**). Response times will continue to be closely monitored during the forthcoming year to ensure complainants are provided with timely responses.

If people are dissatisfied

Sometimes people are not always happy with the outcome of the investigation into their complaint.

We would 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, on a face-to-face basis.

In the last year **13%** of complainants contacted us to tell us they were not entirely satisfied.

Ombudsman

For those people who remained dissatisfied, they may approach the NI Commissioner for Complaints (Ombudsman) directly.

In **2012/2013**, there were **3** complainants who approached the Ombudsman for investigation of their complaint. Of these, **1** was not taken on by the Ombudsman and **2** are ongoing.

Prison Healthcare

The South Eastern Trust is responsible for Prison Healthcare in Northern Ireland. All complaints relating to health care in prisons or young offenders' centre are dealt with through the Trust's complaints process.

In **2012/2013** there have been **338** informal complaints, ie. dealt with by healthcare staff. However, **225** formal complaints were also made. The majority were able to be resolved at that point except **1** who asked the Ombudsman to investigate the complaint; this was not taken on by the Ombudsman.

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 Representations & Complaints Procedure.

Over the year, there were **21** complaints dealt with under this procedure and these were all resolved at the informal 'problem-solving' stage.

Compliments

While we accept that sometimes things go wrong, thousands of letters of appreciation and expressions of thanks are received to acknowledge the excellent services provided. Our staff certainly appreciate knowing when things go well.

Monitoring

During this year the Trust's Lessons Learnt Sub Committee, which reports to the Corporate Control Committee, chaired by the Chief Executive, met on a quarterly basis.

The role of the sub committee is to ensure that the Trust has in place the necessary controls to manage its risk in relation to complaints, incidents and litigation claims. Its role is also to ensure that the lessons learnt have been put into practice on an organisational wide basis.

Lessons Learnt / Improvements from Complaints

We welcome complaints and the opportunities they provide us with to learn lessons and improve our services. An action plan is completed, where appropriate, for complaints. We use this information to feed back to patients and staff on the changes and improvements made.

Complaints are discussed with the staff concerned and often the issues are brought to staff meetings for discussion as to how services can be improved. A number of improvements have been put in place over the year 2012/2013 following complaints. Here are some examples in some departments:

Hospital Services:

- Following a complaint where a X-ray report which showed a fracture was not followed up, a 'red flag' system has been set up for any reports which show significant abnormality
- When a specialist feeding tube was found to have more fluid than expected when removed, the manufacturers were made aware. Specific training was commissioned for medical and nursing staff as a result of the review of this case
- As a result of a complaint about the delay in a death certificate being issued, the Trust has trained a group of senior nursing staff with the necessary skills, to verify the death of a patient in circumstances where a doctor cannot attend promptly and so prevent families in the future experiencing a distressing delay
- Following complaints about content of appointment letters, the standard template letter was reviewed and amended in a view to making it more personal.

Adult Services:

- As a result of a complaint about the food on a mental health ward, a number of initiatives were commenced – protected time for meals with no interruptions from nursing staff or medical staff or visitors; the timings of the meals were reviewed to allow a more relaxed and sociable experience; procedures were created for medications which helped reinforce the protected time for meals; and any issues discussed at the patients' forum
- When issues raised about patients with similar names on same ward, a safety briefing was added to the nursing handover which takes place between each shift and there is also a weekly meeting with patients where they can raise any concerns or issues.

Primary Care & Elderly Services:

- Following a complaint regarding the level of noise from the Trust day centre, a meeting was arranged with local residents and a number of measures were agreed for any future events, ie. PA / loud music will not be played outside building; steps will be taken to manage traffic / parking; Local Council will review the Trust plans to ensure they comply with regulations and bye laws
- When concern was raised about the uncomfortable chairs in the waiting area, seating was reviewed and further appropriate chairs ordered.

Children's Services:

- When concern was raised about the reason for school nurse contact with family, a review of the School Nursing Service Information Leaflet was undertaken
- Following a complaint about lack of support from social workers and a feeling of discrimination, training was arranged for staff in equality and diversity.