**Introduction:**

The Complaints Annual Report reviews the complaints received by the Western Health and Social Care Trust for the period 1 April 2016 to 31 March 2017.

The Trust welcomes and actively encourages complaints and compliments about our services. From time to time 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 learn and improve our services. Whilst we aim to give the best service to all our patients and clients, 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.

**Complaints this year:**

During 2016/2017 a total of 509 formal complaints which includes 4 Children Order Complaints were received by the Trust. This compares with 452 complaints during the previous financial year of 2015/2016.

The continued awareness training provided to staff on the Health & Social Care Complaints Procedure highlights the emphasis around enhanced local resolution, encouraging staff to resolve complaints at a local level.
Facts & Figures 2016/17

509 formal complaints were received by the Trust
99% of the formal complaints received were acknowledged within 2 working days
73% of the formal complaints received were responded to within 20 working days
3843 recorded compliments were received during 2016/17 compared to 3379 for the previous year - an increase of 13.7%

Complaints

The number of complaints continues to be low considering the large geographical area the Trust covers and the number of contacts Trust staff have with patients and clients. The Trust:

- Provides a wide range of different health and social care services from a number of hospitals, community facilities and peoples own homes;
- Serves a population of approximately 300,000, 16% of Northern Ireland, in a catchment area of over 4842km²;
- Has approximately 12,500 staff.

Compliments:

Whilst the Trust recognises that sometimes things go wrong, each year it receives thousands of letters and emails of appreciation and expression of thanks to acknowledge the excellent services provided.

We are proud of our staff and ensure that positive feedback is shared and celebrated. Our staff certainly appreciate feedback from their patients and clients, and knowing when things go well.

As part of a pilot exercise that will run for the quarter January – March 2018 initially, to provide quarterly statistics reports to the Permanent Secretary with regard to the number and types of compliments received by all of the Health and Social Care Trusts. The Department of Health will establish a process to record and report these. There is a new Compliment Return Form and Definitions of Subjects for the recording of Trust compliments. This form can be found on the Trust’s intranet site under useful documents. This return is now required on a quarterly basis as opposed to the previous monthly return and will require more detail around the categorization of compliments received, i.e. Quality of Treatment and Care, Staff Attitude and Behaviour, Information and Communication, Environment, Other.

In 2016/17 the Trust received 3846 compliments:

<table>
<thead>
<tr>
<th>Year</th>
<th>Compliments</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012/13</td>
<td>403</td>
</tr>
<tr>
<td>2013/14</td>
<td>510</td>
</tr>
<tr>
<td>2014/15</td>
<td>468</td>
</tr>
<tr>
<td>2015/16</td>
<td>452</td>
</tr>
<tr>
<td>2016/17</td>
<td>509</td>
</tr>
</tbody>
</table>

We have sincere gratitude for all the staff for the wonderful treatment and care of our daughter, their kindness and professional expertise. It is important to acknowledge their first-class work.

I was in A&E for 7 hours, the media is so quick to criticise our Health Trusts, but I have nothing but praise for the dedication of your staff who worked in a most professional manner and I wish to pass on my appreciation.

I was treated with kindness & compassion, everyone was so kind to me they made a terrible situation better—thank you.

The Complaints department were very helpful and sympathetic. An excellent service from them.

I want to compliment all the staff on their compassionate care for me. Please share my sentiments with all, for the steadfast and kind work they carry out under pressure and long hours.
Complaints by Subject—Top 5

The top 5 categories of complaints received during 2016/17 are set out below:

The chart below shows ALL the complaints by subject for the past year (2016/17). The figures are per issue of complaint, as a complaint can have more than one issue. For 2016/17 509 complaints were received and these raised 942 issues, compared with 2015/16 452 complaints and 828 issues.

<table>
<thead>
<tr>
<th>SUBJECT</th>
<th>2016/17</th>
<th>2016/17 %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treatment &amp; Care, Quality</td>
<td>223</td>
<td>23.6</td>
</tr>
<tr>
<td>Communication/Information to Patients</td>
<td>178</td>
<td>18.8</td>
</tr>
<tr>
<td>Staff Attitude/Behaviour</td>
<td>107</td>
<td>11.3</td>
</tr>
<tr>
<td>Treatment &amp; Care, Quantity</td>
<td>69</td>
<td>7.3</td>
</tr>
<tr>
<td>Admission into Hospital, Delay/Cancellation (Inpatients)</td>
<td>60</td>
<td>6.3</td>
</tr>
<tr>
<td>Clinical Diagnosis</td>
<td>60</td>
<td>6.3</td>
</tr>
<tr>
<td>Professional Assessment of Need</td>
<td>58</td>
<td>6.1</td>
</tr>
<tr>
<td>Appointments, Delay/Cancellation (Outpatient)</td>
<td>31</td>
<td>3.2</td>
</tr>
<tr>
<td>Other</td>
<td>30</td>
<td>3.1</td>
</tr>
<tr>
<td>Discharge/Transfer Arrangements</td>
<td>22</td>
<td>2.3</td>
</tr>
<tr>
<td>Waiting Times, Outpatient Departments</td>
<td>22</td>
<td>2.3</td>
</tr>
<tr>
<td>Patients’ Privacy/Dignity</td>
<td>20</td>
<td>2.1</td>
</tr>
<tr>
<td>Confidentiality</td>
<td>12</td>
<td>1.3</td>
</tr>
<tr>
<td>Environmental</td>
<td>11</td>
<td>1.2</td>
</tr>
<tr>
<td>Waiting Times, Accident &amp; Emergency</td>
<td>10</td>
<td>1.0</td>
</tr>
<tr>
<td>Records/Records Keeping</td>
<td>8</td>
<td>0.8</td>
</tr>
<tr>
<td>Infection Control</td>
<td>5</td>
<td>0.5</td>
</tr>
<tr>
<td>Patient’s Property/Expenses/Finance</td>
<td>3</td>
<td>0.3</td>
</tr>
<tr>
<td>Patient’s Status/Discrimination</td>
<td>2</td>
<td>0.2</td>
</tr>
<tr>
<td>Hotel/Support/Security Services</td>
<td>2</td>
<td>0.2</td>
</tr>
<tr>
<td>Waiting Times, Community Services</td>
<td>2</td>
<td>0.2</td>
</tr>
<tr>
<td>Policy/Commercial Decisions</td>
<td>2</td>
<td>0.2</td>
</tr>
<tr>
<td>Theatre/Operation Procedure, Delay/Cancellation</td>
<td>1</td>
<td>0.1</td>
</tr>
<tr>
<td>Transport, Suitability of Vehicle/Equipment</td>
<td>1</td>
<td>0.1</td>
</tr>
<tr>
<td>Delayed Admission from Accident &amp; Emergency</td>
<td>1</td>
<td>0.1</td>
</tr>
<tr>
<td>Complaints Handling</td>
<td>1</td>
<td>0.1</td>
</tr>
<tr>
<td>Aids/Adaptations/Appliances</td>
<td>1</td>
<td>0.1</td>
</tr>
</tbody>
</table>

Totals: 942
**Complaints received by Directorate**

This graph shows the breakdown by directorates of formal complaints 2016/17 in comparison to the previous year 2015/16 (per issue).

**Response time to complaints**

99% of complaints were acknowledged within the target of 2 working days and 73% of complaints were responded to within the target of 20 working days. The Trust continues to monitor timescales to ensure complainants are provided with timely responses. However our emphasis is on the quality of responses and ensuring resolution for the complainants, relevant to the issues raised.

**If people are dissatisfied**

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

In the last year 15% of complainants contacted us to tell us they were not completely satisfied.

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

For those people who remain dissatisfied, they had the option to approach the NIPSO directly. In 2016/17, there were 8 complainants who approached the NIPSO for investigation of their complaint.
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 4 complaints dealt with at the informal “problem solving” stage. The majority were resolved at this point.

Monitoring

The Complaints Department has and will continue to take action to increase the number of complaints responded to within 20 working days. This includes regular reports to management and relevant groups on the performance of each Directorate as well as increased follow-up with Investigating Officers. Summaries of outstanding complaints are also provided on a regular basis to Assistant Directors. Complaints staff encourage staff to meet with Complainants when it is felt that this will promote a more positive and timely outcome.

A complaints handling flowchart is in place to ensure that actions are taken to address any delays in receiving responses from the Investigating Officers. In accordance with the flowchart the Complaints Manager referred 7 complaints during the 2016/17 year that were open for over 3 months to the Trust’s Chief Executive. Following this action was taken to ensure that a response to the complaint was issued.

The Trust is committed to using complaints/concerns as an opportunity to learn and improve services and care. In order to record and monitor complaints activity, the Complaints Department is required to maintain a database of complaints and provide regular reports to the Complaints Forum, Directorates and other relevant Committees. These reports highlight themes and trends across the Trust to ensure learning takes place.

The Complaints Department also provides information on lessons learned as a standing item for the Share to Learn Quality and Safety Newsletter.

The Trust continues to provide a monthly monitoring return to the Health and Social Care Board (HSCB) regarding lessons learned from all complaints closed within each month.

This year the decision was taken to amalgamate the Complaints Forum and the Patient Client Experience Group. This allows discussion and learning from both positive and negative patient and client experiences of health and social care. The group meets quarterly, jointly chaired by a Director and Non-Executive Director, and has service user representation from each of the Directorates.
Lessons Learned & Service Improvements from Complaints

We welcome complaints so that we can 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 changes and improvements made.

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

In 2016/17, as a result of complaints received and investigated, a number of service improvements/learning has been implemented across the Trust such as:

Broken Communication

The HSCB hosted its third annual Learning from Complaints event on 13 June 2016.

The Nursing Services Manager, Trauma & Orthopaedics, highlighted a complaint received in the Trust from a family regarding the medical and nursing care provided to their late father. The family raised a number of concerns to include diuretic management, poor nutrition and lack of communication.

The following key learning was shared:

- Recognition of the importance of having honest and frank discussions with patients and family members, particularly before admission to surgery in relation to risk and outcomes;
- The need for effective, continuous communication by the Physician with family members regarding the patient’s care plan;
- The importance of the specialist nurses communicating with the family about the medical care to be provided;
- The importance of patients and their families being aware of “who’s who” within the ward. In this regard, signs and cards are now displayed throughout the hospital along with relevant telephone numbers;
- Within the Acute Fracture Ward, repeat audits have been implemented regarding nutrition standards. Educational sessions have also been developed especially for new staff. The ward has ensured that meal requests have been integrated with the electronic meal system. Mealtimes are protected and are re-enforced with family involvement;
- Regular meetings now take place with patients and their families from Critical Care;
- Education on Dementia Standards has been provided to include implementation of Dementia Champions;
- Information leaflets focusing on delirium have been distributed throughout the Trust;
- The complaint also highlighted a need to re-enforce and maintain changes especially with staff turnover.

Laboratory Specimens

A complaint was received which raised concerns regarding the fact a sputum sample, which the patient had left in the Treatment room of the Health Centre for analysis, did not arrive at the Laboratory at South West Acute Hospital. Following the investigation of this complaint, it was agreed that an alternative measure would be put in place to monitor the activity of samples that are transported to the Laboratory by carrying out a quarterly audit of what goes into the collection box. A follow up will also be completed with the Laboratory to ensure these samples have been received.

Learning from an 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 complaint investigated during the year was in relation to failure to provide an antibiotic following a Cystoscopy procedure, inadequate discharge advice and poor communication. The following learning was taken forward as a result of the Ombudsman’s recommendations:

- An Urology Antibiotic Prophylaxis Guideline is now in place;
- Cystoscopy patient information leaflets have been developed;
- The importance of considering a patient’s role as carer was considered by Lead Nurses and inclusion of a prompt in the Nursing Documentation Booklet for Day Cases is being taken forward.
Informal Complaints & MLA Enquiries

The complaints team also regularly liaise with staff across the Trust to help resolve informal complaints and respond to enquiries from Member’s of the Legislative Assembly (MLA’s), local Councilors and other public representatives. A total of 232 MLA enquiries were handled by the Complaints Department in 2016/17 and responded to directly by the Directorate.

The Complaints Department continues to work with Service Directorates to ensure a quick resolution of issues which may be resolved without the need for an investigation of a formal complaint. 141 informal complaints were resolved this year by complaints staff seeking local resolution.

Plans for the incoming year—2017/18

A complaints handling quality improvement project will commence next year. This will include surveys from complaints staff, complainants and investigating officers to gain important opinions and any ideas on how to improve the current process.

COMPLAINTS DEPARTMENT
TRUST HEADQUARTERS
MDEC BUILDING
ALTNAGELVIN HOSPITAL
GLENSHANE ROAD
LONDONDERRY
BT47 6SB

Contact Email address: complaints.department@westerntrust.hscni.net compliments@westerntrust.hscni.net

Complaints Department Direct Line: 02871 611226
Main Hospital Number: 02871 345171