

Board of Directors (in Public)

Item 5.7*

Subject: Complaints Process Annual Review – 2019/20
Date of Meeting: Tuesday 28th July 2020
Prepared by: Laura Allwood, Patient & Family Support Manager
Presented by: Sue Pemberton, Director of Nursing & Quality
Purpose of Report: To Note

BAF Ref	Impact on BAF
1.1, 1.2	For assurance

1. Executive Summary

The purpose of this paper is to provide the Committee with the assurance that the raising of concerns and complaints through the complaint process is monitored for its effectiveness and efficiency, whilst providing the upmost in compassion and understanding to those raising a concern/complaint. It is also to provide assurance that our processes are in line with our Trust Policy, Making Experiences Count – NHS and Adult Social Care Complaints Process.

The Trust is committed to resolving any concerns at the earliest opportunity and this is often achieved through the patient, relative or carer discussing their concerns directly with the Patient and Family Support Team in the first instance. In 2018-19 the Trust received 36 formal complaints. This is a decrease of 26.5% compared to the previous year when 49 were investigated and the year 2019-20 the number remained static at 36. This is due to proactive action, at the earliest opportunity, to review and resolve concerns raised.

Of the 36 complaints investigated, 8 were fully upheld, 13 were partially upheld and 13 were not upheld (unfounded) and did not require action or learning. Of the 36 complaints, all complaints were acknowledged within 3 working days via telephone, followed by a letter. To add to this 24 of the complaints were responded to within the negotiated timeframe (25 working days), and 10 required an agreed extension. 34 of these were all investigated fully and closed, 2 remain open due to the covid 19 outbreak, as the complaints process was paused nationally, between the end of March and end of June 2020.

No complaints were referred to the Parliamentary Health Service Ombudsman within the twelve month period of 2019-20.

2. Background

The Trust has a Complaints Policy in line with the NHS Adult Social Care Complaints Process & Regulations on which its complaints processes are based. All complaints received are reviewed by the Chief Executive, the Director of Nursing & Quality and the Deputy Director of Nursing and shared with the relevant Divisional Triumvirate for investigation. The Patient & Family Support

Manager is the Trust's designated complaints manager and lead investigator.

3. Complaints

3.1 Parliamentary Health Service Ombudsman Referrals (PHSO)

No complaints received in the timeframe have been referred to the PSHO for investigation at the time of this report. They paused their complaint process due to the Covid-19 outbreak between April to June.

One current complaint referred to the ombudsman from August 2019 (original complaint received by the Trust in October 2018 and dealt with via the complaints process) regarding the communication and care of a patient awaiting a TAVI. A response was sent to the ombudsman on 7/9/19 and we have now received a provisional recommendation in March 2020 from the PHSO that has been sent to the NHSR (NHS resolution) for acceptance in June 2020.

3.2 Learning from complaints that were upheld/partially upheld – requiring action

Every effort is made to address each issue highlighted within complaints to the satisfaction of the complainant, even if, after investigation, evidence reveals the allegations made in the complaint were unfounded. Twenty one complaints were considered upheld or partially upheld, meaning they required action and learning. Those complaints not considered upheld were offered apologies that they had cause to raise a complaint and a detailed explanation was provided in the written response. All action plans identified through the investigatory process are presented by the responsible lead, at the Divisional Governance meetings. Any cross divisional actions or learning is detailed in the report; this enables each Division to have a clearer understanding, of recurrent themes across the organisation. All learning that can be shared corporately forms part of the organisational learning processes. Complaints' learning is shared via the Learning and sharing agenda to ensure that learning is cascaded widely across the organisation.

3.3 Complaints Management – Quarterly Complaints Panels

To provide assurance of robust complaints management to the Non-Executive Directors, Quarterly Complaints Panels were held on three occasions during 2019/20, with the review for quarter four planned for July 2020. The purpose of this panel is to provide assurance that complaints are being managed robustly and effectively. This also demonstrates that lessons are being shared widely and embedded across the organisation.

4. Recommendations

The Board are asked to receive assurance that the complaints process, management and procedure is robust and monitored for effectiveness and is based upon the Trust's Complaints Policy, with the sharing of learning from each complaint review, being disseminated within the appropriate divisions and teams.