

Complaints Annual Report

2014/15



1. INTRODUCTION

This is the complaints annual report for Hampshire Hospitals NHS Foundation Trust (HHFT) for the period 1 April 2014 to 31 March 2015. Hampshire Hospitals NHS Foundation Trust (HHFT) serves a population of approximately 600,000 and provides one high-quality service across three hospitals in Andover, Basingstoke and Winchester and outlying sites.

The National Health Service Complaints (England) Regulations 2009 requires that all Trusts provide an annual report on the handling and consideration of complaints. This report provides detail of the required inclusions and will be made public on the Foundation Trust website and sent to commissioners of the Foundation Trust services.

2. COMPLAINTS MATTER

Patient care is at the heart of what we do and we are committed to improving the experience of our patients. At Hampshire Hospitals NHS Foundation Trust we receive lots of positive feedback about the services we provide but we know that we do not always get it right. It is important to us that people find it easy to raise their concerns and complaints with us and that they feel their feedback is welcomed and taken seriously.

We understand that every concern or complaint is an opportunity to learn and make improvements in the areas that patient's, their relatives and carers say matter most to them. We understand that handling concerns and complaints effectively matters for people who use our services who deserve an explanation when things go wrong and want to know that a tangible change has been made to prevent something similar happening to anyone else.

It is always our aim to address concerns and resolve problems quickly and effectively at the point of care to ensure the satisfaction of all involved. We believe that putting things right immediately on the ward or department will have the most positive impact upon the quality of care and on complaint handling. However should it prove impossible to resolve an issue, then ensuring that people know how to make a complaint, that it is simple to make a complaint and that they feel their complaint has made a difference is our priority.

Effective concerns and complaint handling is an important part of ensuring that people receive high quality care. The Trust's Concerns and Complaints policy sets out our procedures to ensure we listen and respond to complaints and that they are properly investigated and monitored. Following initial assessment of the complaint a lead investigator, appropriately qualified and sufficiently removed from the incident is identified to carry out an independent investigation that is proportionate to the complexity and seriousness of the complaint. Where the facts determine an independent investigation cannot be carried out by Trust staff an external opinion may be commissioned. The learning from each complaint is used to improve things for the people who use our services as well as for the staff working in them.

Complaints matter to us. We take all negative feedback very seriously and our Chief Executive sees all complaints when they arrive and reviews all responses personally before they are sent. Complaints handling and any trends or themes identified from them are shared and discussed regularly by the Executive Team and the Board of Directors and are reviewed within each of the divisions across the organisation on a monthly basis.

3. SUMMARY OF NHS COMPLAINTS PROCEDURES

3.1 The NHS complaints regulations

In April 2009 the NHS Complaints Procedure was amended and the latest NHS (Complaints) Regulations came into force. The Local Authority Social Services and NHS Complaints (England) Regulations 2009; are a Statutory Instrument that all Trusts including Foundation Trusts have a duty to implement. Whilst the procedures are not prescriptive, the regulations set out various obligations on NHS bodies in relation to the handling of complaints. Since 1 April 2009, there has been a single approach across Health and Adult Social Care to dealing with complaints. The regulations set out a two stage complaint system:

Stage 1 Local resolution – working with the complainant to understand and resolve their concerns in a timely and proportionate fashion

Stage 2 Referral to the Parliamentary and Health Service Ombudsman (PHSO) – if local resolution is not successful and people are dissatisfied with the way their complaint has been handled, the complainant can refer their case to the Ombudsman for review.

The national complaints legislation requires that concerns raised by the public are responded to personally and positively and that lessons are learnt by the local organisation. The local resolution stage focuses on the complainant and enabling organisations to tailor a flexible response that seeks to ensure all complainants receive a positive response to their complaint or concern. It places an emphasis on resolving them as fairly and as quickly as possible and ensuring that lessons are learned and shared to improve the experience of care.

The Parliamentary and Health Service Ombudsman is a free and independent service, set up by Parliament. Their role is to investigate complaints that individuals have been treated unfairly or have received poor service from government departments and other public organisations and the NHS in England. If local resolution is not successful, the complainant can refer their case to the Ombudsman for review. The Ombudsman makes the final decisions on complaints about the NHS for individuals. They use what they learn from complaints to help public services get better.

3.2 The NHS Constitution

The NHS Constitution, published in January 2009, sets out the rights of patients when making a complaint:

- To have any complaint made about NHS services dealt with efficiently and to have it properly investigated;
- To know the outcome of any investigation into a complaint;
- To take a complaint to the independent Health Service Ombudsman, if they are not satisfied with the way it was dealt with by the NHS;
- To make a claim for Judicial Review if they think they have been directly affected by an unlawful act or decision of an NHS body;
- To compensation when they have been harmed by negligent treatment.

The NHS Constitution also makes the following pledges which the NHS commits to achieve:

- To ensure patients are treated with courtesy and receive appropriate support throughout the handling of a complaint;
- To acknowledge mistakes which happen, apologise, explain what went wrong and put things right quickly and effectively;
- To ensure that the organisation learns lessons from complaints and uses these to improve NHS services

3.3 The principles of good complaint handling

The Trust actively encourages staff closest to the care and services being received to deal with concerns and problems as they arise so that they can be remedied quickly and be responsive to individual need and circumstances. Such timely intervention can prevent an escalation of the complaint and achieve a more satisfactory outcome for all involved. The approach to complaints handling across the Trust is based on the principles of good complaints handling. These have been published by the Parliamentary and Health Service Ombudsman and endorsed by the Local Government Ombudsman and the principles are:

- Getting it right
- Being customer focused
- Being open and accountable
- Acting fairly and proportionately
- Putting things right
- Seeking continuous improvement

4. ANNUAL COMPLAINTS FIGURES

HHFT is organised into three clinical divisions. They are Surgical Services, Medical Services, and Family and Clinical Support Services, each of which are led by a Medical Director and Operations Director, collectively supported by Corporate Services as the fourth division. The formal complaint numbers during 2014/15 have been collected for each site and division and the number and type of complaints received for HHFT have been closely monitored and analysed in order to identify themes and trends and inform future improvements moving forward.

A total of 608 formal complaints were received by the Trust during 2014/15. The 608 complaints were represented across the divisions and are outlined in the table below:

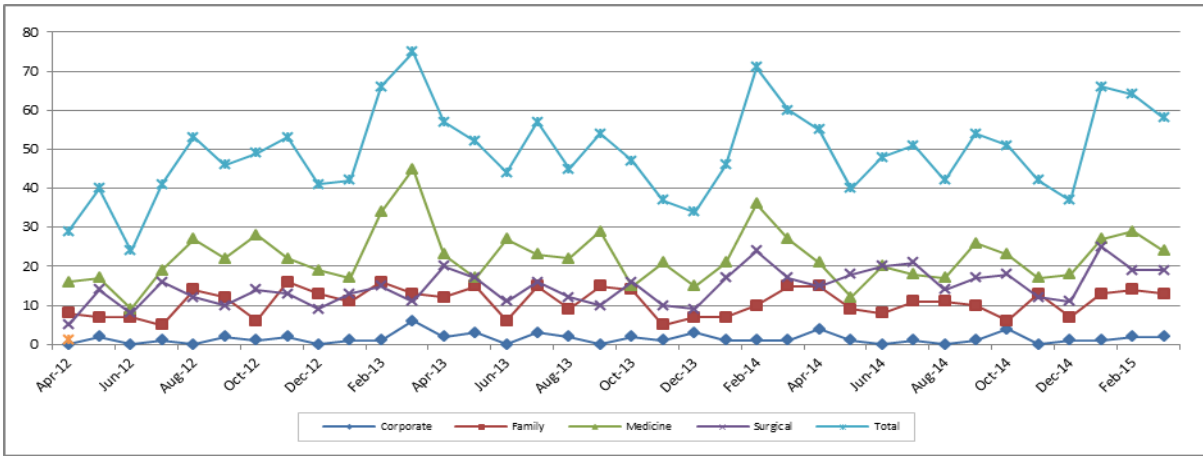
Division	Number of formal complaints 2012/13	Number of formal complaints 2013/14	Number of formal complaints 2014/15
Family & Clinical Support Services	134	131	130
Medical Services	267	276	252
Surgical Services	139	180	209
Corporate, Operations & Support Services	17	19	17
TOTAL	557	606	608

There is a 9% increase from the 557 formal complaints received in 2012/13. A difference of less than 10% for formal complaints is not considered significant when reporting the national annual complaints figures referred to as the KO41a collection. The largest increase occurred within surgical services and is represented by the increase in proportion of complaints relating to waiting times, communication and information.

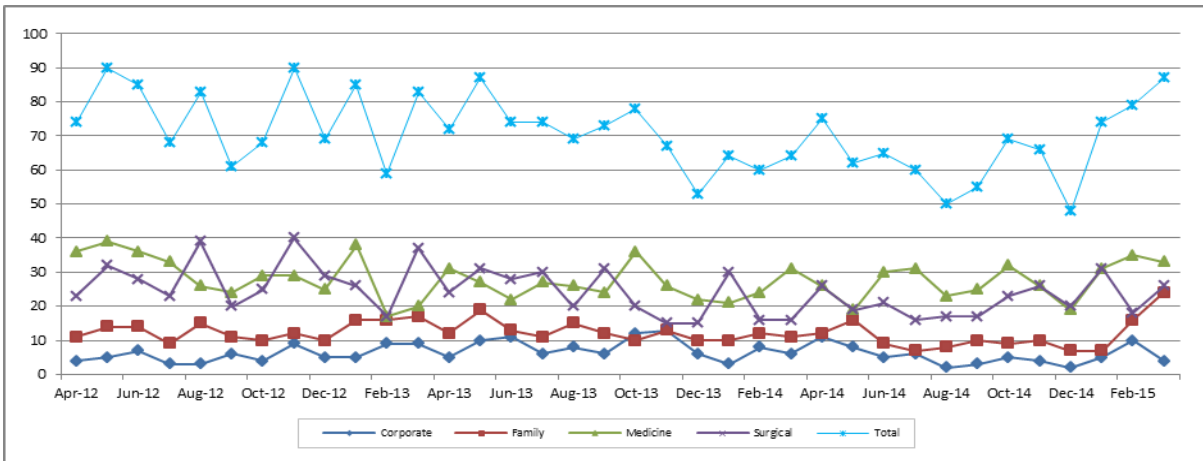
This year we have reviewed the total number of complaints as a percentage of overall patient activity. During 2014/15 there have been less than 2.5 complaints per 1000 inpatient admissions (0.24%) less than 0.5 complaints per 1000 outpatient attendances (0.04%) and less than 1 complaint per 1000 Emergency Department attendances (0.07%).

LISTENING LEARNING RESPONDING

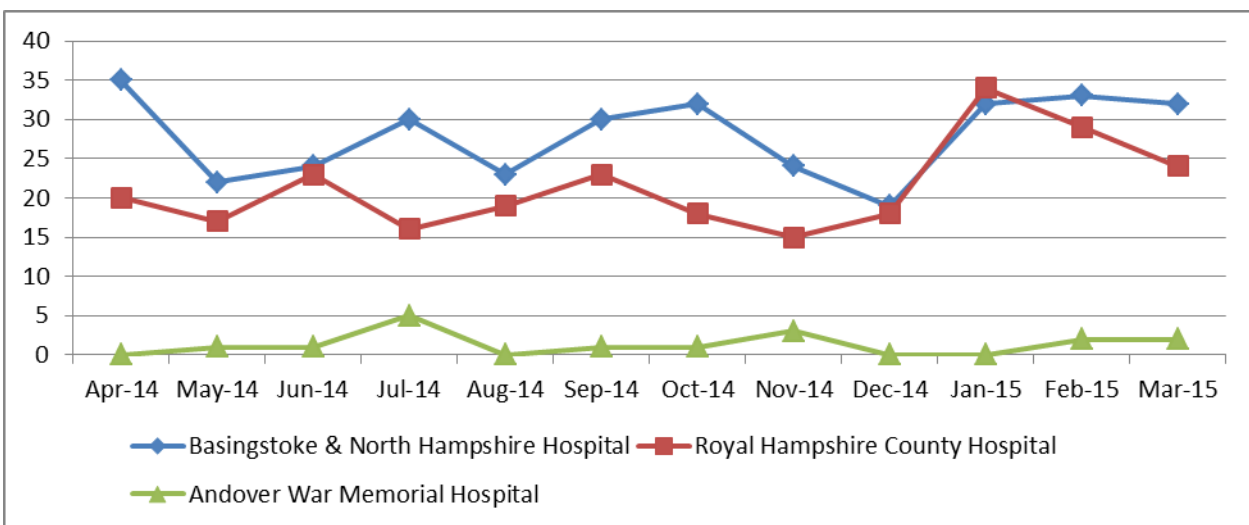
The number of complaints received per month for each division since April 2012 is presented in the graphs below:



The number of concerns received per month for each division since April 2012 is presented in the graph below:



The number of complaints received per month for each site since April 2014 is presented in the graph below:



5. RESPONDING

When an individual complains they are referring to their experience and therefore, all complaints for the period 01 April 2014 – 31 March 2015 were considered upheld by the Trust and handled accordingly.

The following definitions are used to provide clarity about whether an issue of concern is handled within the NHS complaints procedure and to ensure that the Trust provides the most appropriate response:

Complaint – A complaint can be defined as an expression of dissatisfaction with the service provided (or not provided) or the circumstances associated with its provision which requires an investigation and a formal response in order to promote resolution between the parties concerned.

Concerns - A concern can be defined as a matter of interest, importance or anxiety which can be resolved to the individual's satisfaction within a short period of time without the need for formal investigation and formal correspondence. Concerns are received by staff throughout the organisation. Where it has not been possible to resolve the concern quickly (i.e. by the end of the next working day) and to the satisfaction of the person/s raising it, they will be asked if they would like their concern investigated as a formal complaint under the NHS Complaints Regulations (2009). All concerns whether resolved by the next working day or not, will be recorded and reported and reviewed, collated and analysed along with the data recorded from complaints.

In many respects, the distinction between a 'concern' and a 'complaint' is artificial. Both indicate some level of dissatisfaction and require a response. It is important that concerns and complaints are handled in accordance with the needs of the individual case and investigated fairly and proportionately.

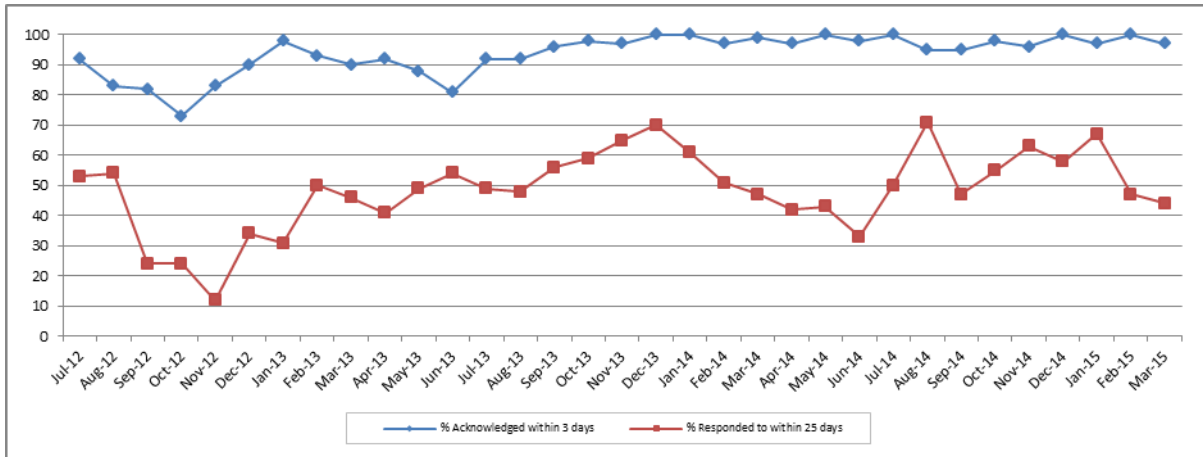
All concerns and issues raised are recorded. During 2014/15 834 concerns were raised with the customer care team who worked with staff within the Divisions to resolve the concerns and issues raised. All of the concerns raised are reported in the same way as complaints.

In order to ensure that people feel safe and supported to make a complaint, everyone is directed to additional information, advice and advocacy support. The Hampshire residents' health complaints advocacy service is available through Hampshire Healthwatch and is provided by the Citizen Advice Bureau. All complainants are signposted to the Parliamentary and Health Service Ombudsman (PHSO) (stage 2 of the NHS complaints process) in case they are dissatisfied with the results of our investigation and complaint handling.

The Trust follows the Department of Health guidance and legislation (the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009) which outlines the requirement to acknowledge all formal complaints within three working days. Under the current legislation Trusts have six months in which to resolve a complaint to the satisfaction of the complainant, providing a more flexible agreement with each complainant. HHFT aims to provide a response in as timely a manner as possible, working to an internal benchmark of 25 working days.

LISTENING LEARNING RESPONDING

The graph below displays the percentage acknowledgement rate within 3 days and the percentage responded to within 25 working days from July 2012 to March 2015.



Throughout 2014/15 the Trust achieved an average 98% acknowledgement rate within the required 3 working days. This is an improvement from the 94% achieved in 2013/14.

We aim to respond to all complaints within 25 working days. If it is clear on receipt of the complaint or at any point during the investigation that the investigation cannot be completed on time, for example when a complaint is more complex or requires a joint response from services/organisations a new timeframe will be agreed with the complainant. In 2014/2015 we responded to an average of 51% of complaints within the 25 working days timeframe with a range of between 33% and 71%.

It has been a challenge across all divisions to achieve the 25 working day response timeframe particularly at times of increased clinical pressures. Many of the complaints closed outside of the agreed timescales were either complex ones which involved more than one service area or organisation, or those which raised additional issues during the course of the investigation and complaint handling.

Improving the number of responses made within 25 working days will remain one of our aims for 2015/16 as a continued commitment and desire to improve the effectiveness and responsiveness of our complaints handling.

6. CATEGORIES OF COMPLAINTS

Complaints are recorded and categorised to help the organisation identify themes and trends and identify improvement actions in response to the findings. A monthly complaints report is produced to enable the Trust to monitor the categories of complaints and concerns so that any issues can be addressed accordingly at both Trust wide and divisional level.

The Trust returned the required annual KO41a collection to the NHS Information Centre in May 2015. The return records the number of written complaints received about hospital and community services made by (or on behalf of) patients received between 1 April 2014 and 31 March 2015. The data includes all complaints upheld and is broken down by service area (who was complained about) and by subject area (what was complained about) and will be published by the NHS Information Centre in July / August 2015.

The subject for the categorisation of formal complaints is presented here, based on the KO41 categories.

Subject / Category	Total number of complaints
Admissions, discharge and transfer arrangements	45
Aids and appliances, equipment, premises (including access)	7
All aspects of clinical treatment	308
Appointments, delay/cancellation (in-patient)	16
Appointments, delay/cancellation (out-patient)	55
Attitude of staff	59
Communication/information to patients (written and oral)	82
Failure to follow agreed procedure	4
Hotel services (including food)	7
Mortuary and post mortem arrangements	1
Patients' privacy and dignity	3
Patients' property and expenses	6
Personal records (including medical and/or complaints)	12
Policy and commercial decisions of trusts	1
Transport (ambulances and other)	2
Grand Total	608

The most common themes for complaints during the year were:

- Care;** central to the Foundation Trust's values and remains a focus of training, supervision and appraisal of staff. Themes from complaints continue to be used to inform training priorities. Complainants have shared their experiences as part of training or at listening events to support improvement in patient experience. Members of the patient voice forum have participated in value based recruitment activities ensuring that the patient voice is represented as we seek to recruit staff who clearly demonstrate their commitment to caring with compassion.
- Communication and information;** there continues to be a focus on effective communication skills at induction based on our customer care standards and as part of on-going staff training. Encouraging and enabling staff to avoid problems and concerns arising in the first place and to seek and welcome feedback so that any issues and concerns can be dealt with quickly and satisfactorily is a priority. Patients, their relatives and carers have told us how important it is to them to need to be kept informed about their care and treatment and there are several developments to improve the handover of information between staff to improve the information provided about medicines and about discharge from hospital.
- Appointments, delay/cancellation;** are areas identified for improvement as part of the Trusts transformation programme. There are 2 key programmes of work. Working together to improve the experience of patient's having surgery and using our outpatient services by removing unnecessary delays, reducing waiting times and exploiting the use of technology for the benefit of patients and to improve efficiency and productivity.

These themes have become a focus locally for quality improvement initiatives and the Trusts transformation programme. The Trust has set out the standards of behaviour expected as the Trust stays focused on caring for our patients with compassion.

7. COMPLAINTS AND THE PARLIAMENTARY AND HEALTH SERVICES OMBUDSMAN (PHSO)

If a complainant is dissatisfied with the way their complaint has been dealt with by the Foundation Trust and local resolution of their complaint has not been satisfactory, they can take their complaint to the independent Parliamentary and Health Service Ombudsman (PHSO) for review.

In 2013, the PHSO launched its five year strategy which changes the way it deals with complaints. Their new approach means they will conduct full investigations into more complaints than previously and make recommendations for action based on the outcome of their investigation.

There were six open referrals with the PHSO at the start of 2014/2015. Five of these were closed during the year and one remains open. Of the five closed two were not upheld, two were partly upheld and one upheld following investigation.

Five new referrals relating to care provided by the Trust were received by the Ombudsman in 2014/2015 representing 0.8% of the total number of formal complaints received. Of these, three of the new referrals have been closed and were not upheld following investigation and two are still open.

The PHSO publishes anonymised case summaries as examples of the complaints they handle. A new set of summaries is published once every quarter. Most of the summaries that are published are cases that the PHSO has upheld or partly upheld as these cases provide clear and valuable lessons by showing what changes need to be made to avoid similar mistakes happening again. However, case summaries will not be published when the circumstances make it inappropriate to do so or when the complainant does not want a summary of their case published. Following the same principles, the recommendations and Trust response to those referrals closed in 2014/15 are outlined below:

PHSO recommendation	HHFT action
Formalise improvements to remind staff of the procedures for cast removal and the escalation process to follow in the event of a failed removal	Clear instruction and guidance for the removal of casts in place A clear procedure for escalation in place
An action plan is produced to address the causes of delay for treatment in A&E and related communication problems that contributed to the delay. Provide an explanation of the factors contributing to the delay.	The Emergency Department (ED) at the Royal Hampshire County Hospital has been restructured. The Acute Medical Unit (AMU) has been reorganised Improvements made to information management within ED and AMU The ED will not be used as overflow capacity for patients expected in AMU Improvements in the prevention and management of infectious disease outbreaks Customer care training for staff in ED and AMU.

8. CUSTOMER CARE TEAM

We seek to provide a 'no wrong door' approach to receiving concerns and complaints. Concerns and complaints are received by staff throughout the organisation and via the customer care team by email, telephone, in person or in writing. All staff are encouraged to actively seek and welcome feedback with the aim of resolving concerns quickly and effectively. Managers and clinical service leads support staff to find solutions quickly and informally. Our 'We're here to help' leaflets and posters provide information on how to raise concerns and make formal complaints. These are located throughout the Trust and information is available on the Trust's website.

We encourage patients or their friends and family to talk to the nurse, doctor or member of staff looking after them so they can try to help quickly at the point of care. If they would prefer to speak to someone more independent they can contact our customer care team who will seek to facilitate early resolution to concerns. Our two Customer care offices are situated near the front entrance to the hospitals.

Our customer care team provide a central point of contact and are available to receive feedback provided in person, by telephone and in writing via email and letter or on NHS choices for example. The customer care team are committed to providing an excellent and responsive service to ensure that concerns are fully addressed in an open and transparent manner. The team aim to make it easy for people to raise a concern or complaint and to feel confident that they have been listened to and taken seriously and that the right to care, treatment or services will not be compromised. The team are available to guide people to other sources of information and support including advocacy. All the feedback received by the team is shared with staff for their review and action.

9. COMPLIMENTS AND COMMENTS

Many compliments are received from patients, their relatives and carers about the care provided. 508 compliments and thank yous were made in writing to the Chief Executive's office during 2014/15 and were formally recorded and shared with our staff and are outlined in the table below:

2014/15	Number of thank yous received
April-14	54
May-14	37
June-14	40
July-14	45
August-14	38
September-14	37
October-14	34
November-14	33
December-14	38
January-15	52
February-15	45
March-15	55
Total	508

Many more letters and cards are sent directly to our wards and departments thanking staff for the care they received. These are not formally recorded but are shared with staff to recognise the excellent care they provide every day.

To give the public an opportunity to acknowledge staff's care and compassion, Hampshire Hospitals NHS Foundation Trust hosts an annual **Director of Nursing Awards (DONA)** ceremony for staff at all sites in Andover, Basingstoke and Winchester. This award publicly celebrates our nurses and midwives, and nursing and midwifery teams. Nominations are made by members of the public for an individual or a team for their care, commitment and compassion. Last year, there were 259 nominations from members of the public for staff to receive a DONA award.

The Trust also presents a monthly **WOW! Award** recognising when staff go the extra mile. At Hampshire Hospitals, the WOW! Awards were first introduced in 2009 and more than 100 WOW! award nominations are now received each month from patients and staff. This is an incredible achievement and recognition of our staff's commitment. Nominations are considered by a panel which includes Foundation Trust governors and a small number of winners are chosen who are surprised in their workplace by Chief Nurse Donna Green and presented with a certificate. WOW! Award winners are invited to a quarterly celebration lunch with their colleagues, the board of directors and Foundation Trust governors, to celebrate their work in going the extra mile in customer service, innovation or patient safety.

HHFT was nominated alongside five others in the 'Best NHS Trust' category 2014, at the national WOW! awards event, a programme which recognises outstanding customer service.

Staff Nurse Carrie-Ann Watts was a finalist in the 'WOW! That's Really Special' category after being nominated for her care for a patient with a debilitating and painful condition that frequently led to long stays in hospital. The nomination explains how Carrie-Ann took ownership of the situation, going above and beyond to make sure that the patient's condition was understood by other colleagues, and caring for her not just medically but as a whole person.

The Critical Care Unit at Basingstoke and North Hampshire Hospital was nominated in the 'WOW! What a team category'. The whole team were nominated after working with a patient who was critically ill with streptococcal pneumonia. The family's nomination explained that the team had shown care, support and dignity at all times and that they had seen "the NHS at its absolute best".

NHS Choices provides another valuable way for patients to provide online feedback to us about their care. The site allows patients to rate their experience at a hospital, out of five stars. The ratings are averaged over the last two years which provides an overall star rating. At the end of the year, our hospitals received the following ratings on NHS Choices:

Basingstoke and North Hampshire Hospital - 4 stars based on 107 ratings

Royal Hampshire County Hospital - 3.5 stars based on 81 ratings

Andover War Memorial Hospital - 4.5 stars based on 25 ratings

All comments posted on the site are reviewed by the Chief Executive and are sent to the relevant staff within the divisions for their review and action. Individuals leaving comments of concern are encouraged to contact the customer care team to discuss them more fully in an attempt to listen, respond and learn.

10. LEARNING FROM COMPLAINTS

The Trust values the opportunity that each complaint brings to learn and improve and recognises the importance of sharing the learning from complaints across the organisation for the benefit of our patients and staff. We continue to strive to demonstrate the changes that have made as a result of the learning from complaints and to sustain the changes for long term improvement.

We act on feedback to make improvements to our services wherever possible. In response to the complaints received this year we have taken the following actions:

Action to remedy

- Allergen information available for patients and staff updated by catering department
- Lockable doors installed on ward that require swipe access for patients and visitors to leave to increase patient safety on ward
- Three different types of drinking cup ordered to trial on the wards to support patient hydration
- Document developed to guide care in last few days or hours of life
- Parking attendants to monitor traffic flow and usage of taxi bays at front of hospital
- Nutrition and hydration assistant role introduced
- Charlie's day unit ward sister working with the dietician and catering department to review the menus available for children.
- Noise at night monitored by ward sisters and spot checks carried out
- Welcome pack being developed for maternity wards to include layout of ward, how call bells work and how to access support whilst on the ward
- Multidisciplinary team working to implement new ways to ensure carers are updated and involved in decisions about care and discharge planning.
- Written information developed to reinforce the verbal information provided about deep vein thrombosis and pulmonary embolism prophylaxis following joint replacement surgery.
- Removal of nursing desks, replaced with small working areas in each bay to ensure nursing staff are more visible and available to patients being piloted across the Trust
- Supply chain manager in contact with suppliers to negotiate delivery times to avoid future noise disruption for patients
- Action taken to ensure that staff receiving referrals are aware of the processes required for referral and the role of the referral centre for dental patients

Shared lessons

- Presentation of a patient scenario at staff training to highlight the importance of communication and consent
- Complainant invited to attend ward meeting to share their experience and ideas for improvement
- People who have raised concerns and complaints invited to participate in patient listening session "Through your eyes" to share their experience with staff.
- Feedback shared with staff in supervisory meetings on a 1:1 basis
- Lessons learned from complaints shared with teams for understanding and improvement

Changed policies and procedures

- Revised discharge summaries given to patients to include a listing of all medications
- Use of insulin passports reviewed and promoted to help reinforce improved monitoring and care for diabetic patients
- Following review of the policy for MRSA swabbing a new template has been introduced for the recording of MRSA results and process for checking results
- Additional monitoring process implemented to check all patients falls alarms
- Patients taking oral chemotherapy to be identified ahead of their clinic appointment to ensure prescription prepared in advance
- Orthopaedic team have implemented handover at the patient's bedside
- Improvements made to the process for ordering CT scans for renal colic
- Change in procedure for contacting patients for last minute cancellations of appointments
- Introduction of food charts for patients with dementia to ensure that food intake is monitored and assistance provided where necessary
- Ophthalmology service reviewing clinic templates and providing additional clinics
- Changes made to the referral process for patients requiring hydrotherapy treatment to avoid delay.
- Outpatient department moving to an electronic pathology requesting system

Staff training

- Links made with Parkinson's UK to arrange specific ward training
- Bespoke customer care and communication training tailored to specific wards and departments
- End of life teaching and guidance to include more detailed information on how to deal with agitation
- Mandatory insulin training available on the intranet for all staff involved with monitoring and administering medications
- Admin team reminded of correct process for cancelling dual appointments
- Nutritional link nurse for Victoria ward delivering specific teaching around meal service
- Additional training and monitoring put in place to ensure expected levels of cleanliness are maintained
- Emphasis on junior doctor training to improve the writing of discharge summaries
- Information about new referral system to be included in induction programmes for all new doctors to the gynaecology department

12. KEY ACHIEVEMENTS 2014/15

Following the publication 'Hard Truths' the government response to the Francis inquiry into the failings at Mid Staffordshire NHS Foundation Trust, the PHSO, the Local Government Ombudsman (LGO) and Healthwatch England committed to developing a user-led 'vision' of the complaints system. The vision aims to align the health and social care sector on what good looks like from the perspective of people raising concerns and complaints about health and social care. It builds on work that has previously been carried out by patient led organisations such as the Patients Association and National voices. The Care Quality Commission (CQC) will use the framework in its new inspection regime and the PHSO will integrate it into the principles of good complaint handling. It will also be used to monitor and manage performance by NHS England as part of the NHS Outcomes Framework.

We understand that complaints are an important part of feedback and that they are a strong indicator of patient experience. We will consider how to use the framework as a definition of 'what good looks like' for our patients to measure our progress and identify actions needed to improve our complaint handling. We

share the vision that we want all people using our services to be able to say 'I feel confident to speak up and making my complaint was simple'. 'I felt listened to and understood.' 'I felt that my complaint made a difference.' Whilst many of the statements of the user led vision are part of existing practice in our complaints handling, we have taken the following actions to support continued improvement;

- Participated in a service evaluation led by Hampshire Healthwatch to understand perceptions and expectations of people making a complaint.
- Introduced 'Ask Mary' an email address for people to contact our chief executive directly with their enquiries and their comments, concerns and compliments.
- Held patient listening sessions "Through your eyes" where staff have the opportunity to listen first hand to the 'patient story' shared by people who have raised concerns and complaints with us.
- Involved patients and volunteers in staff training, service improvement initiatives and in value based recruitment activities.
- Provided 'investigation' training and 'human factors' training for staff who handle incidents and complaints to ensure that investigations are proportionate and fair.
- Used complaint case scenarios and learning from complaints within customer care and communication skills training.
- Provided complaints training for staff involved in handling and responding to concerns and complaints
- Developed an 'easy read' version of our complaints leaflet "We're here to help"
- Promoted early contact and conversation with complainants to understand their issues of concern, to determine complexity and reach agreement about how best to respond.
- Facilitated opportunities for local resolution meetings
- Established a data quality audit to monitor and review the standard of data collection in relation to complaints.
- Used other sources of data alongside complaints data to explore themes of patient experience including the friends and family test survey responses and 'mystery shopper' calls to patients who have recently used our services.
- Developed forums to ensure closer working with the divisions as part of our concerns and complaints handling.
- Introduced an updated survey to evaluate the satisfaction of our complaint handling
- Improved the process for assessment and escalation of serious complaints
- Developed various ways of sharing the themes and learning from complaints at divisional and ward/departmental level.
- Used the opportunity of patient satisfaction surveys and our programme of regular 'walk rounds' and our team of volunteers to increase the awareness of how to raise concerns and complaints for patients, their relatives and carers
- Introduced the 'speak in confidence' system to provide another way for staff to feel safe to raise any concern they have and feel confident that they will be listened to and some action taken. The system enables staff to raise things anonymously.
- We have used the themes from complaints, concerns, the Friend and Family Test feedback and patient surveys to inform service improvement activities at divisional, specialty and ward level. We used this variety of feedback in 2014/15 to inform our quality priorities for 2015/16.

13. IMPROVEMENTS PLANNED FOR TRUST WIDE COMPLAINTS HANDLING FOR 2015/ 2016

The statements of expectations outlined in the user-led vision for raising concerns and complaints in health and social care developed by the PHSO, Healthwatch England and the Local Government Ombudsman will provide a framework of our improvement work programme for 2015/16.

Diagram 1: A user-led vision for raising concerns and complaints in health and social care
'My expectations for raising concerns and complaints' PHSO, Healthwatch England, LGO (2014)



1. Considering a complaint

- Increase the awareness of patients and others about how to make a complaint or raise a concern when they first start to use a service.
- Raise awareness and understanding of Advocacy support with staff and with patients

2. Making a complaint

- Provide more training for staff in handling concerns and complaints effectively
- Increasing the opportunities for 'no wrong door', promoting the various channels for raising a concern or making a complaint
- Increasing our contact with local Advocacy support services and promote advocacy support

3. Staying informed

- Encouraging early contact for each complaint and concern raised
- Providing guidance for staff on holding effective local resolution meetings
- Providing each complainant with a named point of contact

4. Receiving outcomes

- Increase the percentage of people who receive a response within 25 working day
- Evidence our values 'CARE' in our responses to complaints
- Provide guidance for effective responses e.g. plain English, clear outcomes and evidence of learning and actions taken for improvement
- Provide training and support for staff to ensure the effectiveness and independence of investigations

5. Reflecting on the experience

- Increase the means of collecting feedback on which to judge how well complaints and concerns are handled including through satisfaction surveys and listening sessions.
- Benchmark our complaints handling against the Patient Association Good practice standards for NHS complaints handling
- Upgrade our complaints management system to support the new requirements of the national KO41a complaints data collection to publish quarterly complaints data and improve the usefulness of reporting to identify themes and
- Undertake analysis of complaints logged for staff attitude and manner to allow improved understanding and enable improvements in practice in response to our quality priority to reduce the number of complaints relating to staff attitude and manner in 2015/16.