



Annual Complaints Report April 2015 - March 2016

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1. Introduction

Lincolnshire Community Health Services NHS Trust (LCHS) take a proactive approach to the management of complaints and considers them to be a vital source of information and learning from patients and service users. LCHS is committed to ensuring the effective and timely investigation and response of all complaints and aims to offer support to all staff involved in the complaints process to improve the quality of services and ensure a better patient experience.

Over the past year we have made significant improvements across the Trust in regards to how we manage the complaints process. During the period of 1st April 2015-31st March 2016, the Trust received a total of 142 'formal' complaints and responded to a further 185 informal concerns. The number of complaints and concerns received accounts for less than 0.01% of the number of patient contacts, which totalled over 2,322,439 during the reporting period. The Trust has continued to welcome, listen to and act on all aspects of patient feedback.

Posters and leaflets detailing how concerns can be raised and addressed, are displayed in public areas across the Trust, with 'easy to read' versions and versions in different languages available on request. Staff are encouraged to resolve concerns at a local level in the first instance, but where this is not possible, staff can direct patients/families to the PALS and Complaints Team who will be pleased to assist. Information is also available on the LCHS website providing details of how complainants can raise a complaint or concern. A dedicated email address and telephone number is available and training will be provided to staff in supervisory roles to promote the service across the Trust.

During 2015/16 a number of improvements were made to the complaints procedure following guidance issued by the Parliamentary and Health Service Ombudsman (PHSO) and feedback from patients and carers. The Trust's aim is to respond to complaints and concerns openly, honestly, compassionately, proportionately and fairly. As part of this approach the Trust continues to focus on the implementation of the six key principles for remedy outlined in the PHSO's report 'Your Complaint Matters':

- Getting it right
- Being customer focused
- Being open and accountable, and adhering to the 'Duty of Candour'
- Acting fairly and proportionately
- Putting things right
- Seeking continuous improvement

In a report published by the PHSO and Healthwatch in January 2015 entitled 'My expectations' the development of a user-led 'vision' of the complaints system is promoted as a sincere attempt to rethink complaint handling from the patient and service user perspective. It is a challenge to those charged with creating policy, practice guidelines and procedures and to those who receive and handle complaints, to recognise the complexity of the patient/service user experience and to understand what the outcomes of good complaint handling should be. This vision aims to align the health and social care sectors on what "good" looks like from the user

perspective. It also supports measurements of progress so that organisations can determine the actions they need to take to improve their own complaints processes. LCHS want all service users to be able to say:

- I felt confident to speak up and making my complaint was simple
- I felt listened to and understood
- I felt that my complaint made a difference
- LCHS will continue to make this a reality by putting the patient at the heart of the process by offering face to face meetings with complainants to fully discuss, understand and respond to any issues

The Trust will always seek to apologise for any substandard or inadequate care that has been provided and follow the duty of candour guidelines to ensure that comprehensive actions are taken to reassure complainants that everything is being done to prevent reoccurrences.

In line with the Statutory Instruments 2009, No. 309 'The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009', this report provides information on the number of complaints received by the Trust between 1st April 2015 to 31st March 2016 and details of the number of those complaints which were identified as well-founded. Information is also included on the general themes of complaints, improvements made as a result of complaints, the number of complaints which have been referred to the Parliamentary and Health Service Ombudsman (PHSO) and further steps that were taken to improve the complaints process in the upcoming year.

As an organisation we are committed to a compassionate approach in all interactions with our patients and when we fall short we expect to be held to account. The Trust believes it is important to listen carefully to what people tell us and that we are open, honest and transparent when responding to concerns or complaints. We do all we can to resolve concerns and complaints in a timely way, learn from our mistakes, put things right for the future, and improve the services and care that we provide.

As well as complaints we also receive compliments from patients, service users and their families about treatment they have received and praising the work of individuals, teams and services. Compliments are a constructive source of information and learning for the Trust and we will always seek to use these to share good practice and improve the services provided by LCHS.

PHSO investigations are also included in this report, together with actions taken by the Trust in response to these complaints.

All complaints receive a comprehensive investigation and response provided by the relevant services in line with the duty of candour principles. The relationship between the Complaints Team and clinicians is continually being strengthened in order to ensure that complainants receive a response that is, compassionate and appropriate.

2. Complaints Process

The Trust remains committed to improving overall patient experience and resolving complaints to the satisfaction of the complainant. We will always seek to implement improvements identified through this process and strive to achieve a personalised approach to managing complaints by listening to individual experiences, communicating with the complainant to agree an appropriate response, and ensuring that actions are taken to address issues raised in a timely manner. Investigation findings are used to further inform the Trust's policies and procedures and improve the safety and quality of services provided.

Trust staff always try to respond to concerns raised by patients, service users and their families and carers, as soon as they are aware of them in order to resolve minor issues at a local level. If this is not possible, issues are escalated through to the complaints process where they are recorded as a formal complaint.

When concerns are raised, complainants are routinely offered the option of pursuing matters as formal complaints should they wish to do so, regardless of the nature of the concern or whether or not we consider that a local resolution has been achieved. The Trust welcomes the opportunity to investigate complaints and always seek to learn from the experiences of patients.

All formal complaints are reviewed at a senior level within the Trust, with all written complaint responses being signed by the Chief Executive, or nominated deputy, as the 'Responsible Person' under the Statutory Instruments 2009, No. 309 'The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009'.

When a complaint is received, the complainant is offered a meeting or telephone call in the first instance in order to discuss their complaint with the nominated investigator. This is to ensure that all the correct information and facts have been recorded prior to the commencement of the investigation. All complainants are made aware of the support that can be provided by advocates during the complaints process and the Trust will always seek to provide as much help, support and advice to make the process as easy as possible. Once the investigation of the complaint has been completed, complainants are offered a further meeting to discuss the complaint findings and any learning which may have been identified.

Lessons learned are regularly reviewed and disseminated across the Trust through the internal governance structure. This ensures data is examined and interrogated at all levels of the organisation, with an emphasis being placed on implementing service improvements.

The Trust Board meets on a monthly basis and offer complainants an opportunity to bring their experience to Board through the 'Patient Stories' item on the agenda. In the past complainants have attended to give a personal account of their experience, providing the Trust Board with a valuable insight into the patient's journey. This allows for the gathering of important intelligence which can help to inform and shape services, processes and procedures for the future.

The management of complaints, trends and themes are regularly reported and monitored through the Trust's Committee's and at Board level. Patient stories are used at Trust Board to describe both positive and negative experiences to highlight what matters to our patients and to help inform our decision making.

The Care Quality Commission 'Your Complaint Matters' report highlighted the importance of having an understanding, honest and efficient complaints service within the NHS. The report identified the importance of supporting complainants, sharing the learning from complaints and investigating complaints with serious safety concerns as clinical incidents. The Trust is always looking at ways to review the complaints service, to establish how the service could improve to better support patients and staff.

Informal Concerns

Informal concerns are resolved locally and are usually queries or requests for information which do not require detailed investigation but which may require guidance, signposting or information. These issues are recorded and dealt with either by our PALS and Complaints Team or by a relevant member of staff. If the matter is not resolved to the complainant's satisfaction, the concern is then managed as a formal complaint.

Complaints

The Trust aims to resolve all complaints speedily and efficiently and, during the investigation, keep the complainant informed of the progress.

Each complaint is triaged and graded by a designated Senior Manager. This helps to determine the level of investigation required and whether any immediate additional actions need to be taken, such as a Serious Incident Review by Root Cause Analysis, or liaison through HM Coroner or involvement of the Trust Safeguarding Team.

A timeframe is agreed with the complainant at the start of the investigation and although the Trust aim to resolve the majority of complaints in 35 working days a longer timescale may be required for more complex cases. We have aligned our investigation process to national incident reporting timescales to ensure consistency. The Trust's focus is to provide a high quality, thorough and candid investigation into complaints through which the Trust can resolve issues raised by complainants and improve its services.

3. Analysis of Complaints

Over the course of the last year, LCHS has seen an overall increase in the combined number of patient contacts, attendances and admissions into its services.

During 2015/16 the Trust received a total of 142 complaints compared with 123 during 2014/15, an increase of 15.44%.

There has been a significant increase in patient activity during this period partially due to the Trust taking over the operation of the Peterborough MIU October 2013 and the opening of Butterfly Hospice in August 2014.

The total number of complaints per 1,000 patient contacts/attendances/admissions stood at 0.14 for 2014/15, increasing to 0.16 for 2015/16. The main volume of complaints for this reporting period were in health services provided in Out of Hours, community nursing, Urgent Care, inpatient care, Minor Illness and Minor Injury Unit, Minor Injuries and community response/rehabilitation. These seven areas accounted for approximately 73% of the total number of complaints received.

During 15/16, approximately 50% of all complaints were fully upheld, a slight increase from the 2014/15 figure of 42%.

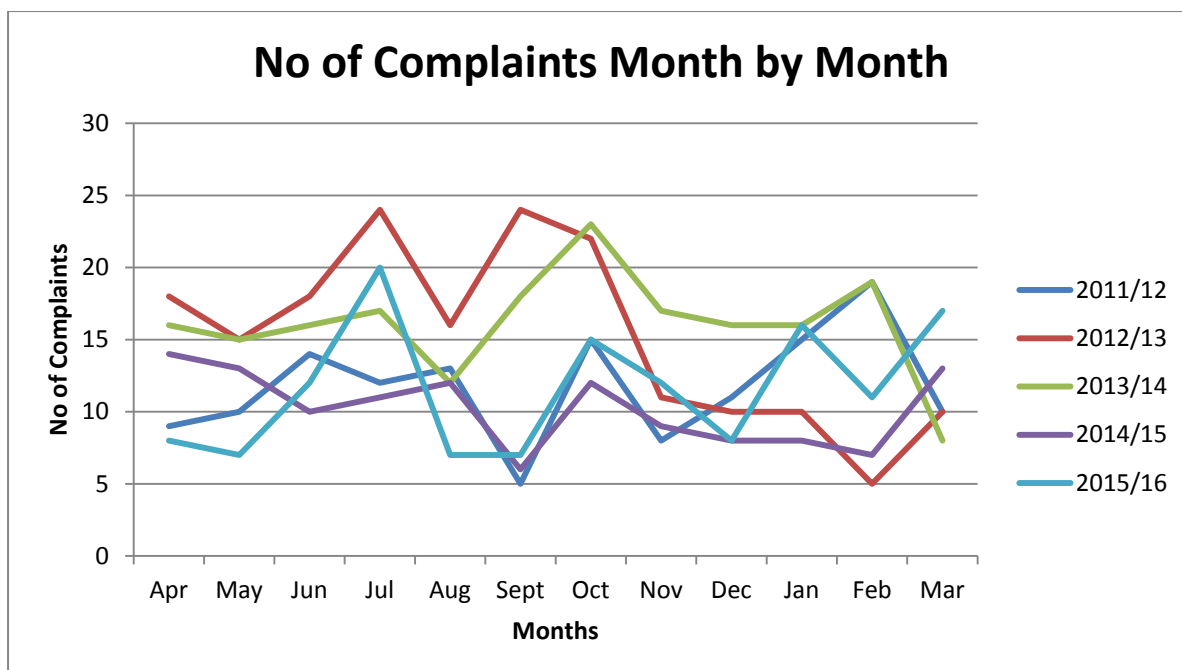
Information contained within this report will be fed back through Quality Scrutiny Group and the Quality and Risk Committee in order that further analysis of overall number of complaints and the increasing number of complaints being upheld, can be carried out and improvements made across the Trust.

A complaint breakdown by service is detailed below:

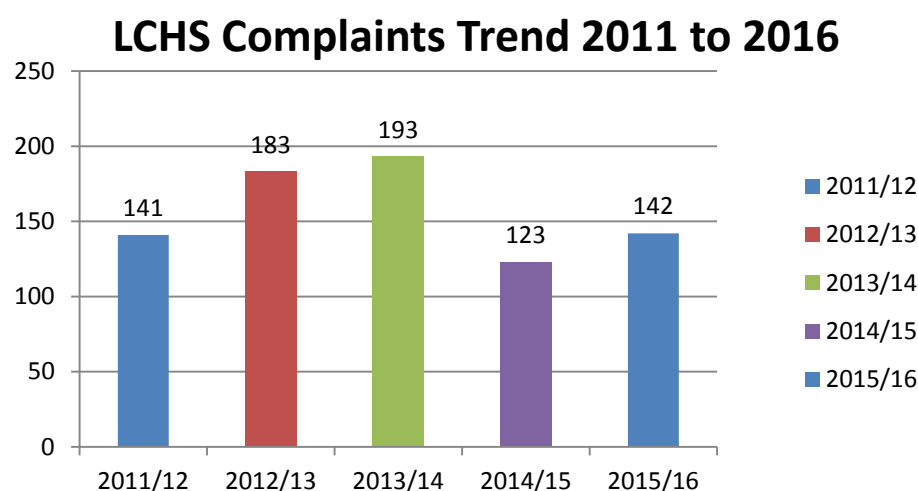
	Total No. of Complaints	No. of Complaints Upheld/Partially Upheld	Percentage of Complaints Upheld/Partially Upheld
Out of Hours	28	20	71%
Community Nursing	21	16	76%
Urgent Care	19	5	26%
Inpatient care (do not use for incidents)	11	7	64%
Minor Injury and Illness Unit	9	6	67%
Community Response/Rehabilitation Team/ILT	8	6	75%
Minor Injuries	8	4	50%
Paediatric Speech and Language Therapy	5	4	80%
School Nursing East Lindsey	3	2	67%
Community Dentistry	2	1	50%
Health Visiting East Lindsey	2	2	100%
Health Visiting West Lindsey/Lincoln	2	2	100%
Paediatric Physiotherapy	2	2	100%

Podiatry	2	1	50%
Primary Care Access	2	1	50%
School Nursing West Lindsey/Lincoln	2	1	50%
Adult Community Physiotherapy	1	1	100%
Assertive in Reach	1	1	100%
Chief Executive's Office	1	0	0%
Children's Domiciliary Care Service	1	1	100%
Complaints Team	1	1	100 %
Contact Centre Rapid Response	1	0	0%
Contracting and Performance	1	1	100%
Diabetes	1	1	100%
Estates	1	0	0%
Health Visiting Boston/Sth Holland	1	1	100%
Health Visiting Sth Kest/Nth Kest	1	0	0%
Human Resources and OD Ops	1	0	0%
Informatics	1	0	0%
Occupational Therapy	1	0	0%
Rapid Response Service	1	0	0%
School Nursing Sth Kest/Nth Kest	1	1	100%
Total	142	88	

There does not appear to be any significant trends when the complaints data for all four years is analysed on a month by month basis. However, when comparing the data from 2013/14 and 2014/15, the level of complaints do follow a similar pattern, with peak months being July and October, and dips being evident in September and February.



When analysing the year on year trend, the graph below identifies that the number of complaints received during 2015/16 was at a similar level to those received in 2011/12. However, the information also shows a 15% increase from the number received during 2014/15.



4. Complaints Themes

The main areas of complaint follow similar themes to those recorded during the previous year.

	Complaint not upheld	Complaint partially upheld	Complaint upheld	Total Complaints Received
Totals:	54	44	44	142
Nursing care	12	10	9	31
Attitude	5	10	9	24

Medical care	13	5	5	23
Access to	3	3	4	10
Assessment	4	1	4	9
Appliances/products/equipment	3	1	2	6
Communication - Written	4	1	1	6
Treatment	1	4	1	6
Communication - Verbal	0	3	1	4
Consent	2	0	1	3
Care other	1	1	1	3
Prescribing	1	2	0	3
Waiting times	1	0	2	3
Cancellation	1	1	0	2
Administration	0	0	1	1
Communication	0	1	0	1
Comments requested	1	0	0	1
Confidentiality	0	0	1	1
Discharge	0	0	1	1
Discrimination	1	0	0	1
End of life care	0	0	1	1
Medication	0	1	0	1
Patient Transfer	1	0	0	1
Total	54	44	44	142

Complaints around nursing and medical care, and staff attitudes remain the main areas of concern for the Trust and will continue to provide the focus for improvement into 2016/17.

During 2015/16 the Out of Hours Service received the highest number of complaints relating to medical care, nursing care, staff attitude, waiting times, treatment and prescribing. The number of contacts seen by this service in 2015/16 was 102,523.

The total number of complaints upheld and partially upheld during 2015/16 stands at 88, representing approximately 62% of complaints recorded compared to the number upheld during 2014/15 being 52, approximately 42% of complaints recorded. In 2015/16, the Trust will continue to implement improvements with a view to reducing the total number of complaints being both received and upheld or partially upheld.

The Trust received 185 concerns in 2015/16 compared with 174 in 2014/15, an increase of approximately 6%. Two of these concerns progressed to formal complaints and related to Community Nursing and School Nursing.

5. Acknowledgement and Response

The Trust standard for acknowledging a complaint is 3 working days and the Trust aims to achieve this for all complaints received, in line with the Statutory Instruments 2009, No. 309 'The Local Authority Social Services and National Health Service

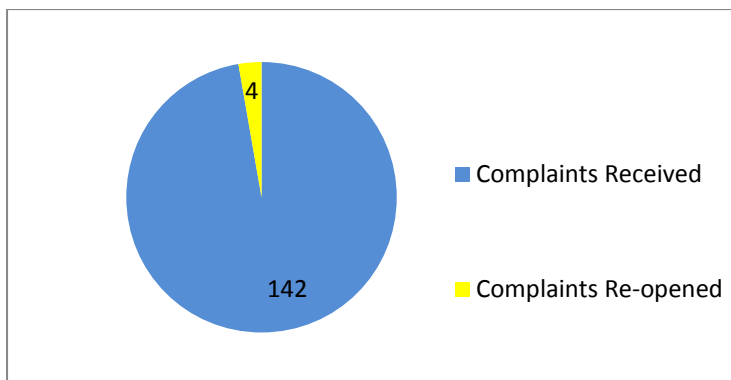
Complaints (England) Regulations 2009'. During 2015/16, 100% of complaints received were acknowledged within this timescale.

Once a complaint has been received and formally acknowledged, a timeframe for a response will be agreed with the complainant. The Trust aim to provide a response to all complaints within 35 working days, however, from time to time this may not be possible and response times may need to be extended in order for the Trust to carry out a full and comprehensive investigation. Should this be required, agreement will be sought from the complainant and a new timeframe agreed.

6. Re-opened Complaints

Re-opened complaints are a new performance indicator developed to identify the effectiveness of complaints management.

There were 4 re-opened complaints in 2015/16 compared to 21 in 2014/15 representing a significant decrease of 80%. This is as a result of a change in process where complaints are now not closed for a further 1 month after a response is provided, to ensure that the complainant has received all the answers to their questions.



7. Complaints Referred to the Parliamentary and Health Service Ombudsman (PHSO)

The PHSO are independent of the NHS and government and provide patients with a point of recourse for a complaint. When complainants feel that they have been unable to resolve a matter through local resolution they have the option to refer the matter to the PHSO. Their role is to investigate complaints to ensure that individuals have been treated fairly.

During 2015/16, 3 formal complaints were referred to the PHSO. Two cases were returned and not upheld; one case is yet to be concluded.

We also received 4 responses back from cases dealt with during the previous year, of which 3 were not upheld and one was found to be partially upheld with a recommendation of a further apology from the Trust. The Trust complied with this recommendation and issued an apology within the time limit set by the PHSO.

All complainants receive information from the Trust about the role of the PHSO and are routinely advised of their right to contact the PHSO should they not be satisfied with any aspect of the outcome of their complaint.

8. Learning Lessons

The Care Quality Commission report 'Your Complaint Matters' recommends following a 'user led' approach for raising concerns and complaints. The organisation supports these recommendations by:

- Ensuring making a complaint is simple.
- Ensuring the complainant felt that they are being listened to, supported, understood, and kept informed of the progress of the complaint.
- Making sure the complaint makes a difference and that complainants are aware of the outcomes following investigation of the complaint.
- Making the complainant feel that responses are personal to them and specific to the nature of their complaint.

All of these steps aim to ensure that complainants feel confident in making a complaint in the future.

The complainant should also feel that the complaint had been handled fairly and feel happy to advise and encourage others to also make a complaint should they feel it is required. They should understand how complaints help to improve services.

Lessons are reviewed monthly at both the Quality Scrutiny Group and Quality and Risk Committee, with a summary report being submitted to the Quality and Risk Committee and Trust Board on a quarterly basis. Recommendations to address the issues raised are actioned and implemented through services, as appropriate.

Reflecting over the past year, all aspects of clinical treatment, communication and staff attitudes have featured heavily in a number of complaints. Staff are routinely being provided with feedback from complaints to allow them to address issues raised. As a result of this analysis and complaints feedback additional customer care training has been provided to staff members, a communication skills element is now included on induction and mandatory update training for all staff has been carried out to continue to publicise and engage staff on the six C's.

- Care
- Compassion
- Competence
- Communication
- Courage
- Commitment

To further improve the complaints process the Complaints Team carried out a deep dive investigation into re-opened complaints and reviewed the way in which the Trust deal with the closure of complaints. This is to ensure complainants are completely

happy with the response before the complaint is finally closed. Following this review there has been an 80% reduction of reopened complaints.

9. Service Improvements

Reviewing and Improving the Complaints Process

The Trust is continually looking at ways to improve, particularly in the investigation process and quality of responses provided to complainants. The Trust continues to seek ways in which further improvements could be made to reduce the average length of time taken to respond to an individual complaint. In all cases this must be balanced against the requirements of undertaking a comprehensive and transparent investigation and the quality of the response. All cases are triaged and a timescale agreed at the outset to reflect the level of complexity and detail of investigation needed. There has been a significant reduction in the backlog of historical complaints.

The Trust have trained staff in complaints handling and investigation techniques in order that complaints are answered at ward level where appropriate. As a result, the average number of re-opened complaints has reduced considerably. The Trust recognises the need to make further improvements on completing complaints investigations and responding to patients within the initial agreed timeframes and this work will continue throughout 2016/17.

We continue to monitor the percentage of complaint responses provided in the agreed timescales and complainants are kept informed of any complexities or delays in investigation, either through formal written letters, emails or telephone calls.

To improve complainant satisfaction with the complaints process

Action has been taken over the last 12 months to improve the way in which the Trust responds to complaints and the overall quality of the investigation and responses. We hope to see continued progress in complainant satisfaction as a result of new processes that have been put in place. The Trust will continue to monitor and develop this throughout 2016/2017.

Improved Reporting

We continue to monitor and improve the quality and accuracy of the data recorded for complaints. The K041 National reporting requirements has changed and as a Trust we will need to ensure that complaints are recorded correctly to reflect these changes. The frequency in which the K041 is submitted has now increased from annually to quarterly. Ongoing emphasis will remain on the importance of reporting consistent and accurate information and the new reporting structure also requires the Trust to identify how many outstanding complaints remain at the end of each quarter. The quarterly process includes active monitoring of complaints closures to reflect this. Where multiple complaints appear in one episode of care, these will now be reported to capture all concerns and it is, therefore, anticipated that the number of complaint received may increase during 2016/2017 as a result of this change. Future

reporting will also include the percentage of complaints responded to within agreed timescale by divisions.

The priorities for the complaints service for 2016/2017

One of the main priorities for 2016/17 will be to improve response times to ensure patients and families receive a timely answer to the issues they have raised. In addition to a review of the Trust's complaints policy, the Complaints Team will be seeking to increase the support provided to services to ensure that deadlines are met with regards to complaint responses. The Trust will further strengthen our service by providing training for staff who are directly involved in complaints handling.

The Trust and its staff are committed to providing an excellent and responsive service to patients and their relatives, ensuring their concerns are fully addressed in an open and transparent manner. We are constantly looking at ways of improving the complaints service and have identified the following new improvements which will be implemented during 2016/17.

These include:

- Implementation of a revised complaints process.
- Additional complaints investigation training for relevant managers.
- Introduction of a satisfaction survey once the complaint has been resolved.
- More 'drop in' clinics to promote the role of the Complaints Team across services.
- Improvements in the quality of all written responses.
- The Complaints Team will continue to build expertise in data analysis to improve the organisations insight and lessons learned from complaints.
- Continue to build strong working partnerships with staff throughout the Trust, to ensure a seamless, fair and efficient process of resolving issues for patients and their relatives, in a timely and compassionate manner.
- Further analysis of complaints in the services which saw an increase in complaints during 2015/16

10. Compliments

Over the past 12 months, the Trust has received numerous compliments and letters of appreciation for the work carried out by services and specific members of staff. The Trust are always very appreciative of letters of support and the kind comments received from patients and their families, and always ensure that these are directly passed on to the staff involved.

Although we are pleased to receive such compliments, we never take these for granted and will always seek to share any examples of good practice across the organisation.

11. Summary

The Trust continue to assess the way in which the complaints process is delivered within LCHS and strive to implement service improvements in line with learning identified through existing complaints and other national guidance.

Complaints and compliments are a rich source of information and learning for the Trust and we will always seek to use these as fully as possible to improve the services provided by LCHS for the benefit of the local community.

Further information on the complaints process can be accessed via the LCHS website on: www.lincolnshirecommunityhealthservices.nhs.uk.

Or by contacting the complaints team on 01522 309752 or by emailing LHNT.LCHSComplaints@nhs.net.