Patient and client feedback - an overview

Complaints / Compliments
Annual Report
2017-18
The Belfast Trust is the largest integrated health and social care Trust in the United Kingdom.

We deliver treatment and care to approximately 340,000 citizens in Belfast and provide the majority of regional specialist services to all of Northern Ireland.

We have an annual budget of £1.3bn and a workforce over 20,000 (full time & part time). Belfast Trust also comprises the major teaching and training hospitals in Northern Ireland.

In the patient-centred environment of the Belfast Trust, patients, relatives and carers are encouraged to express their views about the treatment and services that they receive.

Although most patients have positive experiences of our services there may be times when treatment or care do not meet expectations especially when something has gone wrong or fallen below standard.

By listening to people about their experience of healthcare, the Trust can identify new ways to improve the quality and safety of services and prevent similar problems happening in the future.

We place a real focus across the Trust on making sure that lessons from complaints are taken on board and followed up appropriately, sharing these lessons across other Service Areas and Health and Social Care Trusts where the learning can be applied in settings beyond the original ward / department.
What we do

Our staff deliver a range of both community and hospital based care including:

- emergency medicine, anaesthetics and
- theatre services, cancer services, surgery and
- specialist medicine, nephrology and transplant
- palliative care; occupational therapy; physiotherapy; imaging services; and child health;
- podiatry; and neuro rehabilitation services, adult social
- and primary care incorporating mental health services,
- learning disability services. Care for older people,
- physical and sensory disability and psychological
- services, maternity and women’s services, trauma
- and orthopaedics, children’s community services,
- and social services.

We deliver services and providing care for residents of Belfast
and the Borough of Castlereagh, as well as delivering a variety of
specialist services to the greater Northern Ireland population.

During the last year we cared for 150,000 inpatients;
600,000 outpatients; 65,000 day case patients and
we delivered 5,412 babies. Our district nurses carried
out 324,754 visits; and we provided 7,500 community
care packages. There were over 160,000 new attendances
at our three Emergency Departments and we cared for
65,000 non elective patients. We were also responsible
for 350 children on the Child Protection Register and
750 Looked After Children.

What you said

The most frequent reasons for complaints about our services this year are shown in order of frequency below:

Top 5 Complaints Subjects 2017-18
How we learn

The Trust’s response to feedback about our services is based on principles of good complaint handling:

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

How we respond - timeliness*

<table>
<thead>
<tr>
<th>Timeframe</th>
<th>2015-16</th>
<th>2016-17</th>
<th>2017-18</th>
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<tbody>
<tr>
<td>≤ 20 working days</td>
<td>13%</td>
<td>31%</td>
<td>39%</td>
</tr>
<tr>
<td>21-30 working days</td>
<td>57%</td>
<td>40%</td>
<td>12%</td>
</tr>
<tr>
<td>&gt; 30 working days</td>
<td>30%</td>
<td>29%</td>
<td>40%</td>
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How we improve

We use a number of different approaches within the Trust to gain information and identify areas for improvement in relation to how we deal with complaints. During 2017-18 these included:

- A number of **Key Performance Indicators** were established to track key complaints management areas. These include time taken to provide responses; complaint subjects; and numbers of complaints resolved by staff within their wards / departments (ie rather than requiring patients to use the formal complaints procedure to address concerns). Data is produced regularly to inform progress in these areas,

- Our **Complaints Review Group** (whose members include Non-Executive Directors, Medical Director, patient / carer representative, and representatives from service areas) meets 4 times a year to review and monitor complaints and identify shared learning for the Trust and beyond.

- **Shared Learning templates** are produced regularly by Trust Service Areas. These describe anonymised patient experiences that have highlighted ways in which our delivery of treatment and care can be improved. These templates are shared widely both within the Trust and to other HSC organisations to help avoid similar problems being encountered by other service users.

- Internal **Performance Reports** are provided to our Trust Board 4 times a year. These reports include details of reasons for complaints; distribution of complaints across Service Areas and clinical specialties; and statistics about the timeframes within which our responses are provided.

- Complaints data reports are provided 4 times a year to the Department of Health for reviewing and monitoring.

- Monthly reports containing (anonymised) details of all Formal Complaints received by the Trust are also shared with the Health and Social Care Board for reviewing and monitoring.

Who Complains?

In 2017-18 63% of complaints were made by the person directly affected. The chart below shows who raised complaints on behalf of others during this time.

*Although we aim to respond to complaints within 20 working days, complex complaints (particularly those that involve a range of services / departments / organisations, or where independent expert opinions are sought) can require additional time to investigate. While we continue to seek improvement in the timeliness of our replies, we feel that this must not be at the cost of providing a quality response to complainants.*
What you said - the detail

The services provided by Belfast Health and Social Care Trust are organised into Directorates, each of which responds to Complaints received about the clinical specialties and departments within their remit. The graph below shows the distribution of complaints across these clinical Directorates over the past 3 years.

The numbers of complaints received by each area are typically proportionate to their activity levels and to the nature and complexity of the services provided, with the larger clinical Directorates receiving greater numbers of complaints.

All complaints received by the Trust are assessed against the Trust’s risk evaluation matrix and are graded as either Low, Medium, High or Extreme by the Complaints Team.

This grading determines the most appropriate action to be taken in response to the complaint, including the type of investigation to be undertaken, and notification of senior staff to the issues identified.

The chart opposite shows an overview of the complaints received during 2017-18 by their grade.
General Enquiries & Local Resolutions

“General Enquiries” are mainly received by the Complaints Team via telephone. Enquiries and concerns raised in this way are not subject to the HSC Formal Complaint Procedure, and can generally be resolved relatively quickly. Examples include: enquiries about position on the waiting list, clients unable to contact specific wards/departments, or clients who request that their concerns are not raised as a formal complaint.

The Trust also continues to promote the resolving and recording of complaints and concerns at service level e.g. in wards and departments. These cases are also monitored by the Complaints Team under a heading of “Service Area Resolution”.

The table below shows the number of enquiries and service area resolutions recorded 2013-2018

![Graph showing number of enquiries and service area resolutions from 2013 to 2018]

Complaints Awareness Training is made available to all staff to encourage and facilitate the resolution of patients’ concerns at this frontline level. However all service users may subsequently request that their concerns are further investigated formally under the HSC Complaints Procedure.

Ombudsman Cases

When patients are not fully satisfied with the outcome from the Trust’s complaint processes they can choose to subsequently raise their concerns with the Northern Ireland Public Services Ombudsman. All complainants are provided with information about referring their issues to the Ombudsman at the point at which the Trust completes their investigations and closes the case with the complainant.

During 2017-18, 11 new cases were accepted for investigation by the Ombudsman regarding complaints previously raised with the Trust, and we continued to work with the Ombudsman on cases raised during previous years.

We have processes in place within the Trust to promote the sharing of learning from Ombudsman reports and recommendations, and also to review progress with Action Plans developed in response to Ombudsman findings. In this way we make certain that any service improvements are implemented not only in the areas where the complaint originally arose, but also in other areas where there is potential for similar issues to arise.
Compliments

Throughout the year the Trust continued to receive compliments about many aspects of our services. A total of 7,602 compliments were formally recorded during 2017-18 and the table below shows the numbers of both complaints and compliments we have received over the past 5 years.

Compliments are always appreciated as they provide our patients and clients with an opportunity to share their positive experiences with our staff members, and allow the Trust to learn from areas of good practice and share what is working well in one area across others.

As such we encourage service users to tell us when they have been happy with their experiences. Compliments can be shared with us by phone, face-to-face with staff, in writing, or by email via our new dedicated mail box: compliments@belfasttrust.hscni.net

During 2017-18 we began working with DoH on a pilot process for reporting compliment details, and are supporting our staff in gathering and sharing this information.

Improving how we Listen, Learn and Improve

We work hard to ensure that concerns or criticisms raised by patients are dealt with in an effective way. In particular we aim to make sure that the process of making a complaint is easy for patients; that patients’ issues are investigated in a fair, thorough and timely manner; and that appropriate actions are taken in response to complaint investigation findings in a way that fully resolves the matter for the complainant.

- The Trust has established a range of Key Performance Indicators that include not only the time taken to respond to complaints when raised, but also common issues of complaint particularly communication and provision of information, and staff attitude and behavior. These indicators are used by the Trust to monitor Service Area performance and to ensure specific focus and review of associated issues. The indicators are discussed at quarterly Trustwide meetings attended by senior staff and learning / areas of good practice are shared between different Service Areas to inform improvement.

- Learning from the issues raised in complaints continues to be included in the Trust’s wider “Shared Learning” system. This system makes sure that key improvements are identified (for example following complaints or incidents experienced in wards and departments) and details provided across the Trust and to other Northern Ireland healthcare organisations where relevant to avoid similar experiences happening elsewhere.

- The Complaints Department supports our managers and staff working in wards and departments to help ensure that comprehensive and full responses are provided to all complaints in an appropriate and timely way. During 2017-18 we took an average number of 29.1 working days to provide responses to complaints compared with a Northern Ireland average of 27 working days across all HSC Trusts.

In order to improve the timeliness of our response to complainants, some members of the Complaints Team undertook Quality Improvement methodology training during 2017-18 and commenced a pilot project aimed at identifying ways of improving turnaround times for complaint response letters.

- Although we have a focus on making sure our complaint replies are provided in as timely manner as possible, we feel that this must not be at the cost of the quality of the responses. As such, the Trust worked in 2017/18 to develop and pilot a series of checklists to assist staff in writing high quality complaints response letters. These checklists prompt staff to ensure that all the issues or questions raised by complainants are responded to, and that the content and language used in the letters meets the standards our staff would hope for themselves in a response being received by their own loved ones. In addition, the Medical Director reviews a 5% sample of all draft complaint responses each month and provides feedback on potential improvements. During 2017-18 this model was extended so that the Chief Executive also now receives a 5% sample for Quality Assurance review purposes.
Learning from Complaints

The Trust endeavours to ensure that where any patient had an experience within our care that did not meet the standards that we expect, this experience is reviewed and any learning is identified and used to inform changes in the way that we deliver our services. This learning is shared across Trust wards / departments where relevant to help avoid other patients experiencing similar issues in the future.

Some examples of how complaints have led to improvements within the Trust during 2017-18 include the following:

**Complaint 1**

A patient was admitted to a ward ahead of surgery planned for the following day. Due to an increased number of admissions to the hospital later that evening it became necessary to transfer the patient to another ward. As it was after 11pm when the patient was transferred, staff decided not to contact the family at that time to advise them of the patient’s new location. The family had been due to telephone the hospital the following morning and it was thought that, rather than disturb the family at such a late hour, the information regarding the transfer could be communicated the next day. Unfortunately the patient’s husband had not yet been contacted to be advised of his wife’s new location before he arrived to the hospital on the morning of her surgery and as a result he was unable to find his wife to visit her before her operation took place.

Following investigation of this patient’s complaint the Trust has worked to improve its systems for allowing the location of patients to be checked by Switchboard staff and communicated to relatives. In particular, work has been undertaken to ensure provision of accurate information from wards which is updated on a regular, timely basis. The Trust also described this patient’s experience in a Shared Learning letter that was circulated across the Trust so that all wards were reminded of the need to keep families updated when patients are moved.

**Complaint 2**

An error was made on a patient’s prescription which led to the patient receiving an incorrect dosage of their medication for the 2 week duration of their treatment. The ward pharmacist and Consultant reported this mistake immediately upon discovery, initiated an investigation into how the error had occurred, and spoke to the family to advise them of the error and apologise that this had happened.

Although the clinical team were confident that the patient was unlikely to come to any harm as a result of the incident, upon review of this complaint by the Northern Ireland Public Services Ombudsman it was felt that more effort could have been made to explain to the family members that no harm had been caused by the overdose either in the short term and long term. In particular it was felt that the family should have been provided with a better explanation that the blood tests following the incident were found to be normal and that the patient’s ongoing treatment was able to progress as required. It was found that this further reassurance would have been a comfort to the family at what was a distressing time for them. These findings were communicated to staff to ensure that in the future family members are given effective reassurance in such circumstances to avoid unnecessary worry and distress.

As a result of this incident, a review of Pharmaceutical Services procedures for dispensing this particular type of drug was undertaken by the Trust, and improvements made to help avoid similar errors occurring in the future. In addition, the process for managing incidents in that clinical area was changed substantially, with incident forms now being discussed on a weekly basis at a multidisciplinary meeting and decisions taken regarding any further actions required as a result of each incident.
What we will be doing in 2018/19

We want to be sure that complaints we receive are appropriately investigated; responded to in reasonable timeframes and in a manner that reflects the key Trust values; and that learning from complaints is used to inform potential improvements for the future.

Key pieces of work will be taken forward during 2018/19 to achieve these aims:

⇒ Focusing on early resolution of complaint issues at the frontline in wards and departments

⇒ Reducing the length of time taken to investigate complaints and provide responses to people who have complained, particularly addressing complaints where responses have not been issued after 40 working days

⇒ Improving the quality and content of responses provided to people who have complained

⇒ Ensuring that learning from complaints continues to be highlighted and used to identify how things can be done better to improve service delivery throughout the Trust

⇒ Establishing an audit system to review closed complaints in order to identify ways in which our complaints management processes can be enhanced

⇒ Providing training for the Complaints Team in a Human Rights based approach to complaints handling

We will continue to promote collaborative working on a number of levels to progress these areas:

⇒ between Service Areas & the Complaints Team, including improvements in the data and information provided by the Complaints Team to staff

⇒ between the Trust and external bodies (e.g. Northern Ireland Public Services Ombudsman, Patient Client Council)

We will review the membership and remit of the Trust’s Complaints Review Group to ensure that information gained from service user feedback continues to be effectively reviewed and used to drive improvement across the Trust.

We will develop an online toolkit to support staff when they undertake complaints investigations and writing of complaint responses.

The Complaints Team can be contacted at:

Belfast Health and Social Care Trust - Complaints Department
Musgrave Park Hospital
7th Floor McKinney House
Stockman’s Lane
Belfast BT9 7JB

Tel: (028) 9504 8000

Email: complaints@belfasttrust.hscni.net  compliments@belfasttrust.hscni.net