



**Lincolnshire Community
Health Services**
NHS Trust



Annual Complaints Report
April 2016 - March 2017

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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. LCHS is committed to ensuring the effective, timely investigation and response to all complaints. The Trust aims to offer support to all staff involved in the complaints process to improve the quality of services and ensure a better patient experience.

Significant improvements have been made in the complaints process, over the past year, in order to encourage patients to feel more empowered in raising issues sooner rather than later. By tackling these issues in a more proactive way the Trust have been able to resolve these quickly and swiftly, rather than allowing them to develop into more serious issues and culminating in a formal complaint.

During the period of 1st April 2016 to 31st March 2017, the Trust received a total of 167 formal complaints and responded to a further 316 informal concerns. This represented an increase of just under 18% in the number of formal complaints received and 71% in the number of concerns, compared to 2015/16.

Although the Trust has seen an increase in complaints and, more significantly so in the number of concerns received, these only equate to 1 complaint/concern for every 4,036 patient contacts.

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. Patients are actively encouraged to raise issues to allow staff the opportunity to resolve concerns at a local level in the first instance. However, where this is not possible, staff can direct patients/families to the Patient Advice and Liaison Service (PALS) and Complaints Team who are always pleased to offer assistance and will endeavour to facilitate an agreed resolution. 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 is offered to staff in supervisory roles, to promote the service and encourage a culture where complaints and concerns are welcomed as an opportunity to improve patient care and provide an outstanding service to the community.

The Trust continues to welcome, listen to and act on all aspects of patient feedback and reports are regularly reviewed and monitored at all levels of the Trust in order to gather intelligent learning on where service improvements can be made.

2016/17 saw a number of improvements being made to the complaints service following guidance issued by the Parliamentary and Health Service Ombudsman (PHSO), a review by the Trust's internal auditors and feedback received from patients and carers. The Trust's aim is to respond to complaints and concerns openly, honestly, compassionately, proportionately and fairly, and 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 2016 to 31st March 2017 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.

2. Complaints

2.1 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 in a timely manner. Investigation findings are used to further inform the Trust's policies and procedures and improve the safety and quality of care provided.

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

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'.

Each complaint is triaged and risk graded by a designated Clinical Assurance Manager, to agree the level of investigation required and whether any immediate actions need to be taken, such as a Serious Incident Review by Root Cause Analysis, 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 aims to resolve complaints well within 35 working days, some cases of a more complex nature may require agreement of a slightly longer timescale. These cases are relatively uncommon but are still resolved within the statutory limits detailed in the NHS Complaints (England) Regulations 2009.

All complaints receive a comprehensive investigation and a response is 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.

When concerns are raised, complainants are always offered the option of pursuing the matter as formal complaint, regardless of the nature of the concern or whether the Trust consider that a local resolution has or could be achieved. The Trust welcomes the opportunity to investigate complaints and will always seek to learn from the experiences of patients to improve patient care.

All formal complaint investigations 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.

In addition, 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 as possible, to make the process as easy as it can be for the complainant.

Once the investigation of the complaint has been completed, complainants are offered a meeting to discuss the complaint findings and any learning which may have been identified. Whether or not the complainant wishes to accept this offer and take part in a meeting, a written response signed by the Chief Executive or his nominated deputy is always sent to the complainant to confirm the investigation findings.

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 offers 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 their experiences to highlight what matters to our patients and to help inform our decision making.

2.2 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, or if the issue is deemed to be more serious, the concern is escalated and managed as a formal complaint. During 2016/17 the Trust saw a 71% increase in the number of concerns received. Whilst this represents a significant increase, this is believed to be as a direct result of improved awareness amongst frontline clinicians in identifying these type of concerns and a more proactive approach to encouraging our patients and service users to 'speak up'.

3. Analysis of Complaints

During 2016/17 the Trust received a total of 167 complaints compared with 142 during 2015/16, an increase of just under 18%. This represents 0.086 complaints per 1,000 patient contacts/attendances/admissions, an increase of 0.025 from 2015/16.

The main volume of complaints for this reporting period were raised in the Urgent Care and Integrated Community Team areas, the largest services within the Trust. Complaints in

these areas accounted for approximately 72% of the total number of complaints received in the Trust.

During 2016/17, 166 of the 167 total complaints received (99.4%) were acknowledged within 3 day timescale. The one failure in the 3 day acknowledgement timescale was as a result of a delay in the notification of a concern being escalated from a concern to a complaint. As a result of this Trust staff have been reminded of the need for the timeliness of such notifications.

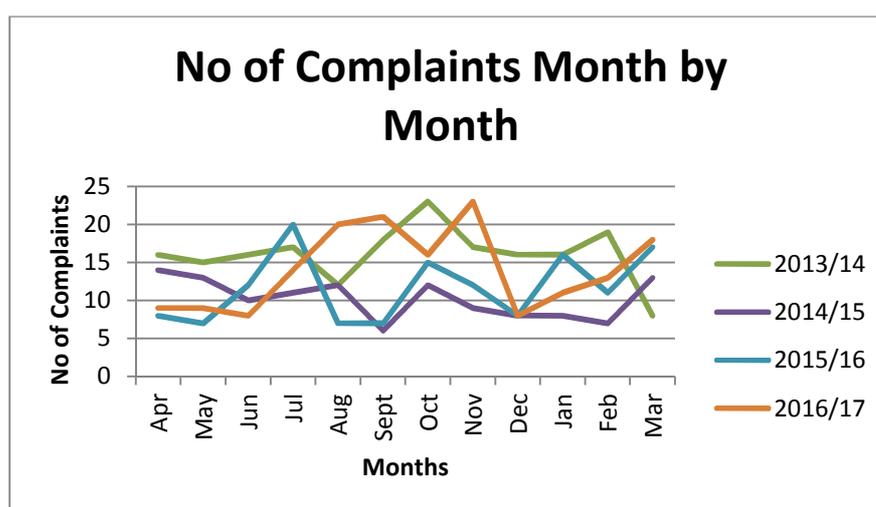
Once a complaint has been investigated and a response has been sent, complaints are categorised as being 'upheld', 'not upheld' or 'partially upheld'. The 'partially upheld' classification is applied when one or more parts, but not all, of the complaint are upheld. During 16/17, approximately 70% of all complaints were fully or partially upheld, an increase from the 2015/16 figure of 50%.

A complaint breakdown by service is detailed below:

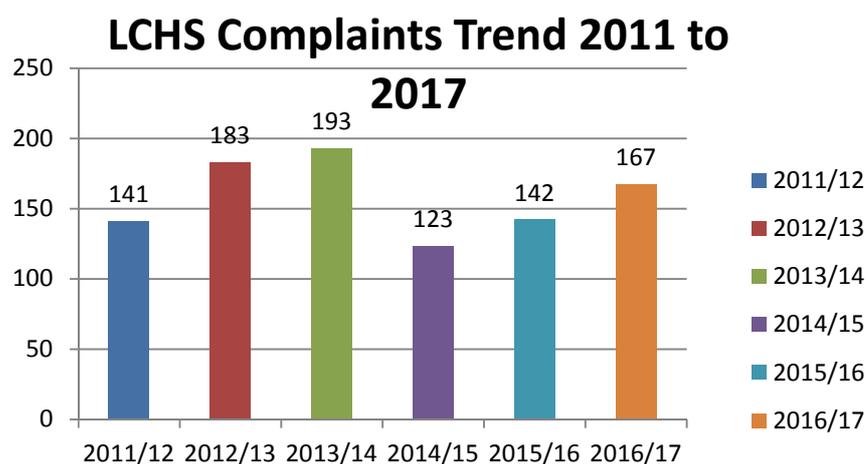
	Total No. of Complaints	No. of Complaints Upheld/Partially Upheld	Percentage of Complaints Upheld/Partially Upheld
Community Nursing	43	33	77%
Out of Hours	30	17	57%
Urgent Care	16	11	69%
Inpatient care (do not use for incidents)	15	12	80%
Minor Injury and Illness Unit	12	6	50%
Children's Therapy	7	4	57%
Minor Injuries	6	4	67%
Community GP Practices	5	3	60%
East Lindsey 0-19	4	4	100%
Sexual Health Service	4	4	100%
Lincoln South 0-19	4	3	75%
South Holland 0-19	3	3	100%
Walk in Centre	3	3	100%
Community Dentistry	2	2	100%
Podiatry	2	0	0%

South Kesteven 0-19	1	1	100%
Boston 0-19	1	0	0%
Children's Domiciliary Care	1	1	100%
Clinical Assessment Service	1	1	100%
Community Surgery	1	1	100%
Out Patients	1	1	100%
Primary Care Access	1	0	0%
Adult Community Physiotherapy	1	1	100%
Macmillan	1	1	100%
Cardiac Rehabilitation	1	1	100%
MSK Physiotherapy	1	0	0%
Total	167	117	70%

There does not appear to be any significant trends when the complaints data is analysed on a month by month basis. However, when comparing the data from previous years 2016/17 does seem to follow a slightly different pattern with a peak in the number of complaints being received in August and November, rather than the peaks in July and October, as seen in previous years.



When analysing the year on year trend, the graph below identifies that the number of complaints received during 2016/17 was less than those received in 2012/13 and 2013/14, but higher than those in the past two years, 2014/15 and 2015/16.



4. Complaints Themes

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

	Total Complaints Received
Nursing care	29
Medical care	23
Communication	21
Attitude	20
Waiting times	11
Assessment	9
Treatment	8
Dignity	7
Access to	6
Cancellation	5
Care other	5
Prescribing	4
Safeguarding	3
Confidentiality	3
Admissions	3
Medication	2
Policy or Procedure	2
Discharge	2
Changes made to services. Processes etc	1
Referral	1
Environmental Issues	1
Infection Control	1
Total	167

Complaints around nursing and medical care, communication and attitudes remain the main areas of concern for the Trust, accounting for 44% of all complaints and will continue to provide the focus for improvement into 2017/18. These themes form a core element of focus in our lessons learned with analysis and feedback on complaints being shared across the

Trust and additional steps to improve standards with the inclusion of customer care training in induction and mandatory training.

During 2016/17 the community nursing received the highest number of complaints and these related to medical care, nursing care, staff attitude, waiting times, and treatment. The number of contacts seen by this specific service in 2016/17 was 102,317.

The total number of complaints upheld and partially upheld during 2016/17 stands at 117, representing approximately 70% of complaints recorded compared 62% in 2015/16.

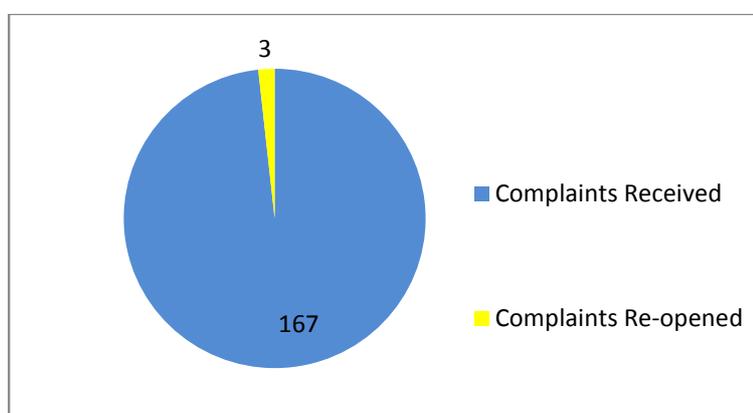
In 2017/18, the Trust will continue to implement improvements with a view to reducing the total number of complaints being both received and upheld or partially upheld.

The Trust received 316 concerns in 2016/17 compared with 185 in 2015/16, an increase of approximately 71%. Five of these concerns progressed to formal complaints and related to Community Nursing and School Nursing.

5. Re-opened Complaints

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

There were 3 re-opened complaints in 2016/17 compared to 4 in 2015/16. 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.



Number of Received and Reopened Complaints During 2016/17

6. 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 2016/2017, one complaint was investigated by the Parliamentary and Health Service Ombudsman. This complaint was not upheld. Two complaints were investigated by the Local

Government Ombudsman and both were upheld. 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.

7. 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.

Lessons are reviewed monthly at both the Patient Safety and Safeguarding Committee and Quality and Risk Committee. In addition a summary report is submitted to the Quality and Risk Committee and Trust Board on a quarterly basis. Recommendations to address any issues which may be identified are actioned and implemented within specific services, and shared across the Trust 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 a reduction of reopened complaints.

8. Service Improvements

8.1 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.

The Trust have continued to train 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. 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 2017/18.

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.

8.2 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 2017/2018.

8.3 Improved Reporting

Weekly meetings now take place between the Complaints Officer and Practitioner Performance Manager. This is to ensure that any complaints containing a practitioner performance element within them are not closed without this being noted within practitioner performance and assurance sought that this is being appropriately managed.

In regards to medical staff, a larger piece of work has been undertaken by the complaints team in order for the Practitioner Performance Manager to have an overview of any previous complaints made against this group of staff and to allow for more robust monitoring going forwards.

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 2017/2018 as a result of this change. Future reporting will also include the percentage of complaints responded to within agreed timescale by divisions.

8.4 The priorities for the complaints service for 2017/2018

One of the main priorities for 2017/18 will be to improve response times to ensure patients and families receive a timely answer to the issues they have raised. Complaint investigators

will input the complaint details and investigation findings on Datix providing more ownership from the Teams. 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 2017/18.

These include:

- Implementation of a revised complaints process.
- Additional complaints investigation training for relevant managers.
- Introduction of an online satisfaction survey once the complaint has been resolved.
- Improvements in the quality and timeliness of all complaints investigations and 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.
- Greater ownership of complaints with service leads inputting information directly into datix.

9. Compliments

As well as complaints the Trust 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.

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.

10. 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.