

# Patient and client feedback - an overview



**HSC** Belfast Health and  
Social Care Trust  
caring supporting improving together



**Tell us what  
YOU think  
of our services**

compliments...suggestions...comments...complaints

# 2016-17

# COMPLAINTS ANNUAL REPORT

## 2016-17

LISTENING

LEARNING

IMPROVING

### Introduction

This report gives an overview of complaints and feedback received from Patients, their carers and family members by Belfast Health and Social Care Trust from 1st April 2016 to 31 March 2017.

The Belfast Trust is one of the largest healthcare providers in the United Kingdom.

We deliver integrated health and social 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 and part time). Belfast Trust also comprises the major teaching and training hospitals in Northern Ireland.

The Trust received a total of

**1,747**  
formal complaints  
 during the past year,

**590**  
general enquiries

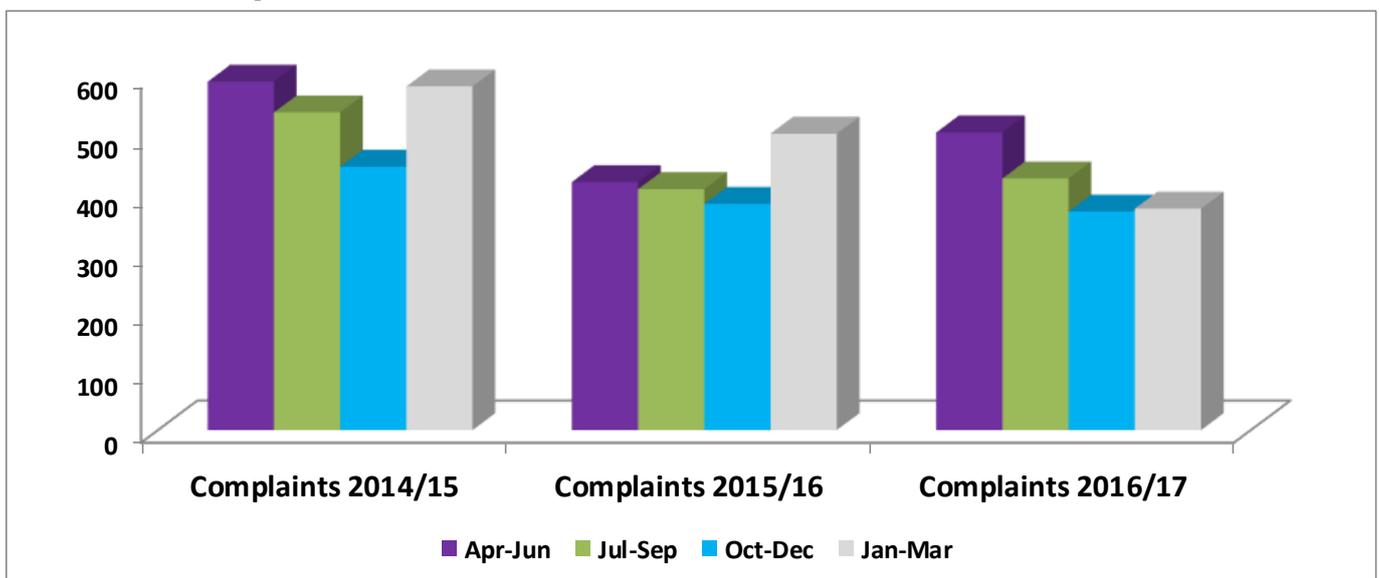
and **8,193**  
formally reported compliments

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.

It is recognised that although most patients will have a positive experience of our services, there may be times when treatment or care do not meet expectations particularly when something has gone wrong or fallen below standard.

By listening to people about their experience of healthcare, the Trust can learn new ways to improve the quality and safety of services and prevent problems happening in the future. By making sure that lessons from complaints are taken on board and followed up appropriately, services and performance can be greatly improved for the future.

### Formal Complaints received 2014 - 2017



# What we do

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

**cardiology, anaesthetics** and **theatre services, medicine** and **neurosciences, cancer** services, **nephrology and transplant** services, **rheumatology, dentistry and child health, dermatology** and **neuro rehabilitation** services, adult social and primary care incorporating **learning disability, mental health** services, services 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.**

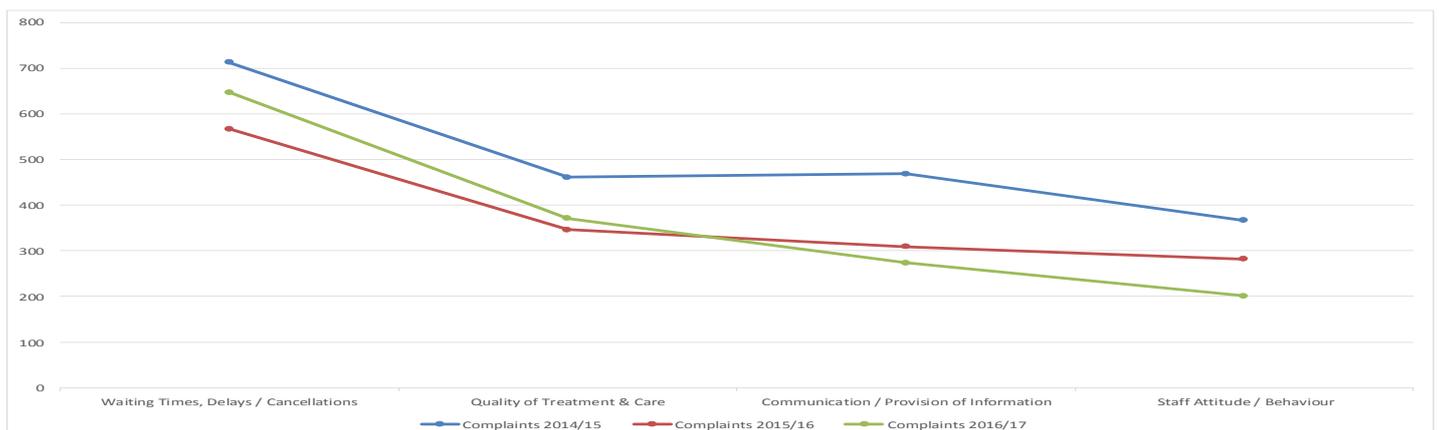
We are one of the largest NHS Trusts in the United Kingdom - delivering services and providing care for residents of Belfast and the Borough of Castlereagh, as well as delivering a variety of specialist services to the greater Northern Ireland population.

Our annual activity includes care for over **150,000 inpatients** and over **670,000 outpatients; 33,000** visits by **district nurses** and **7,500 community care** packages. There were over **160,000** new attendances at our three **Emergency Departments** and we have cared for **65,000 non elective** patients. We are also responsible for **400 children** on the **Child Protection Register** and **750 Looked After Children.**

During 2016/17 we received a total of **1,747** formal complaints regarding our services.

# What you said

The most frequent reasons for complaints about our services this year were - **length of wait** for treatment / appointments; **quality** of treatment & care; **communication**/provision of information; and staff **attitude**/behaviour.



## How we listen

**IF YOU HAVE A COMPLAINT**

**ABOUT OUR SERVICES, WE WANT TO HEAR FROM YOU!**

Anyone who uses any of our services can complain. You can also complain on someone else's behalf (you will generally need their written consent to do so).

Your complaint will be investigated thoroughly and confidentially. We aim to respond to your complaint in full within 20 working days, to address your concerns and let you know of any actions taken as a result.

Some complaints may however take longer to resolve than others. We will contact you to explain if this is the case with your complaint, and we will continue to keep in touch with you while we work to provide you with a response.

## How we learn

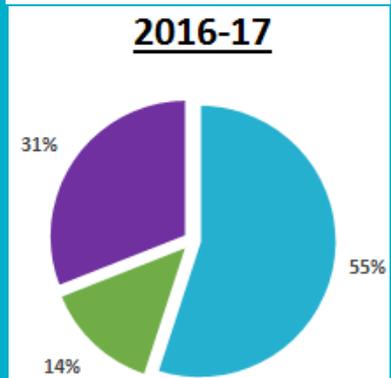
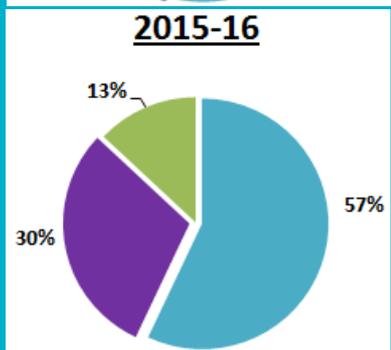
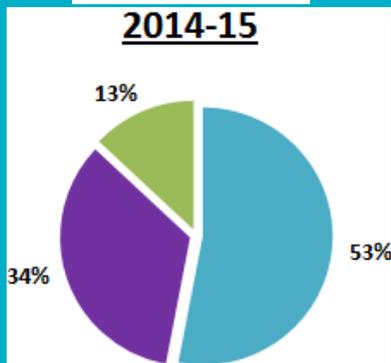
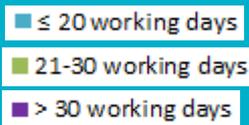
The Trust's response to feedback about our services is based on



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\*



## How we improve

Information is produced by the Trust's Complaints Team throughout the year to inform others about issues identified in patient feedback:

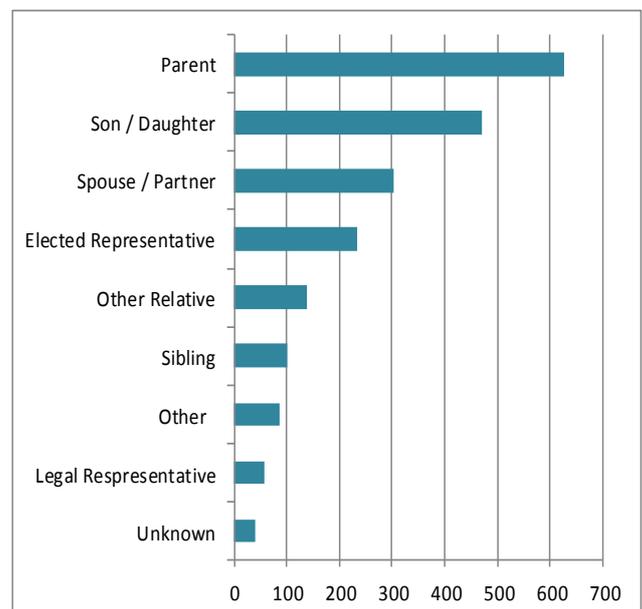
- Trust **Governance Managers** receive regular reports for sharing and discussing with managers and staff in their local service areas.
- Our **Complaints Review Group** (whose membership includes Non-Executive Directors, Medical Director, patient / carer representative, and representatives from service areas) meets 4 times a year to review and monitor complaints and identify lessons / learning for sharing across the Trust and beyond.
- Complaints case studies are provided to the Trust's **Learning from Experience Steering Group** and provide assurance to the Trust Board that concerns and criticisms raised by patients are leading to changes in the way we deliver treatment and care.
- Internal **Performance Reports** are provided to our Trust Board 4 times a year. These reports include details of key themes in reasons for complaints; distribution of complaints across service areas and clinical specialties; and statistics about the timeframes within which our responses are provided.
- Monthly reports containing (anonymised) details of all Formal Complaints received by the Trust are shared with the **Health and Social Care Board** for reviewing and monitoring.
- "Complaint Subject and Programme of Care" data reports are provided 4 times a year to the **Department of Health, Social Services and Public Safety** also for reviewing and monitoring.

*\*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.*

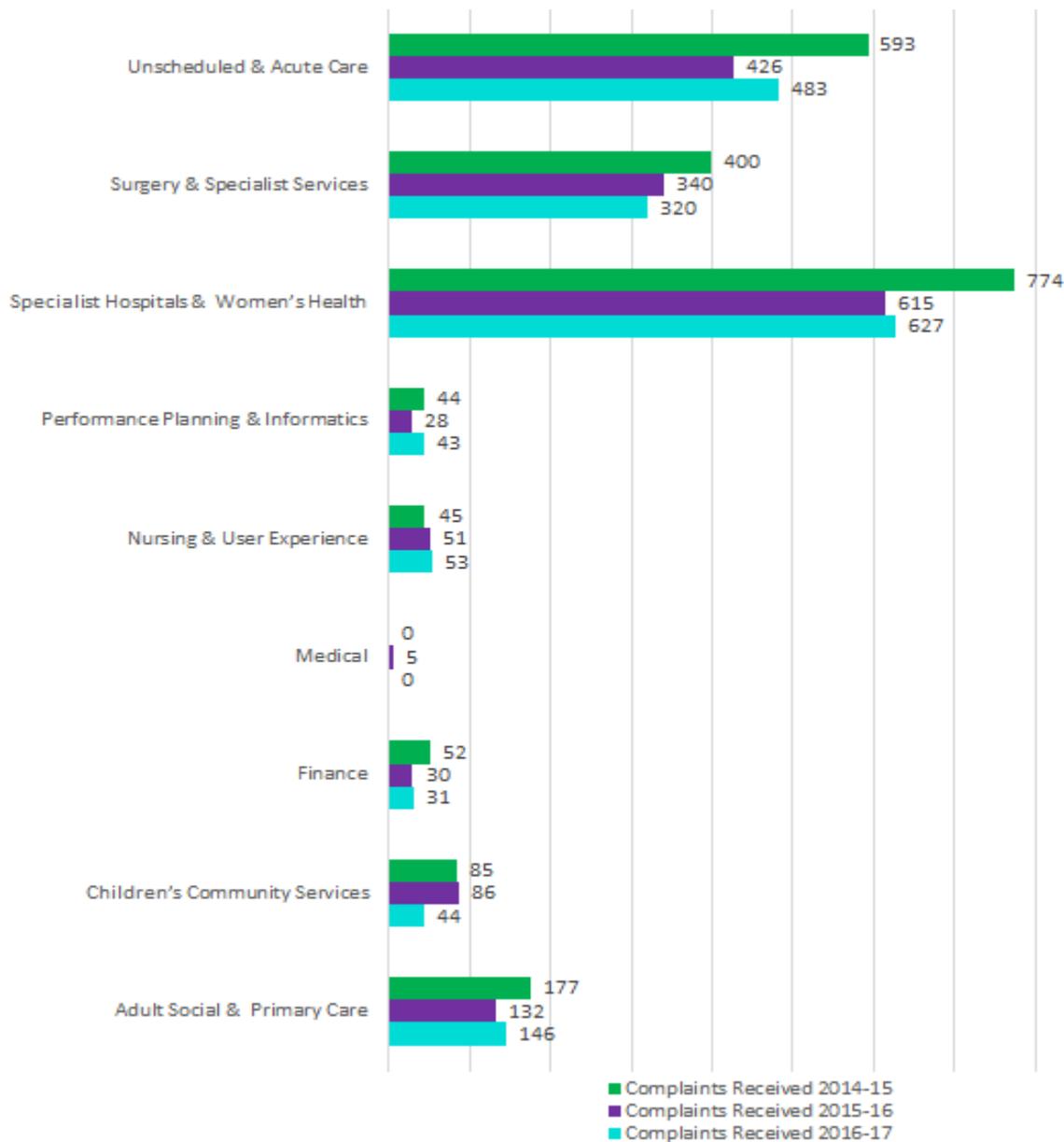
### Who Complains?

**Across Northern Ireland during 2016-17 over 55% of complaints were made by the person directly affected. The chart below shows who raised complaints on behalf of others during this time.**



# 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 **Directorates** over the past 3 years.

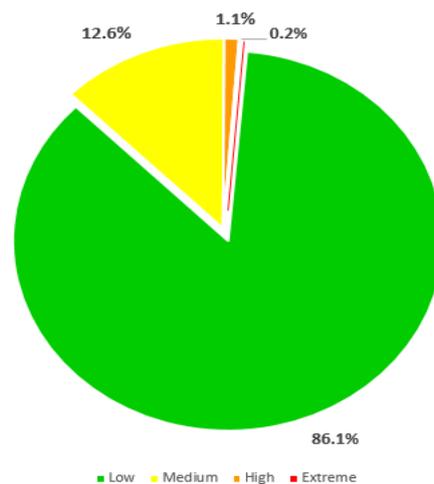


The numbers of complaints shown against each area are typically proportionate to the size, activity levels, and nature and complexity of the services provided, with the larger clinical Directorates receiving greater numbers of complaints than for example smaller Corporate functions.

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 2016-17 by their grade.

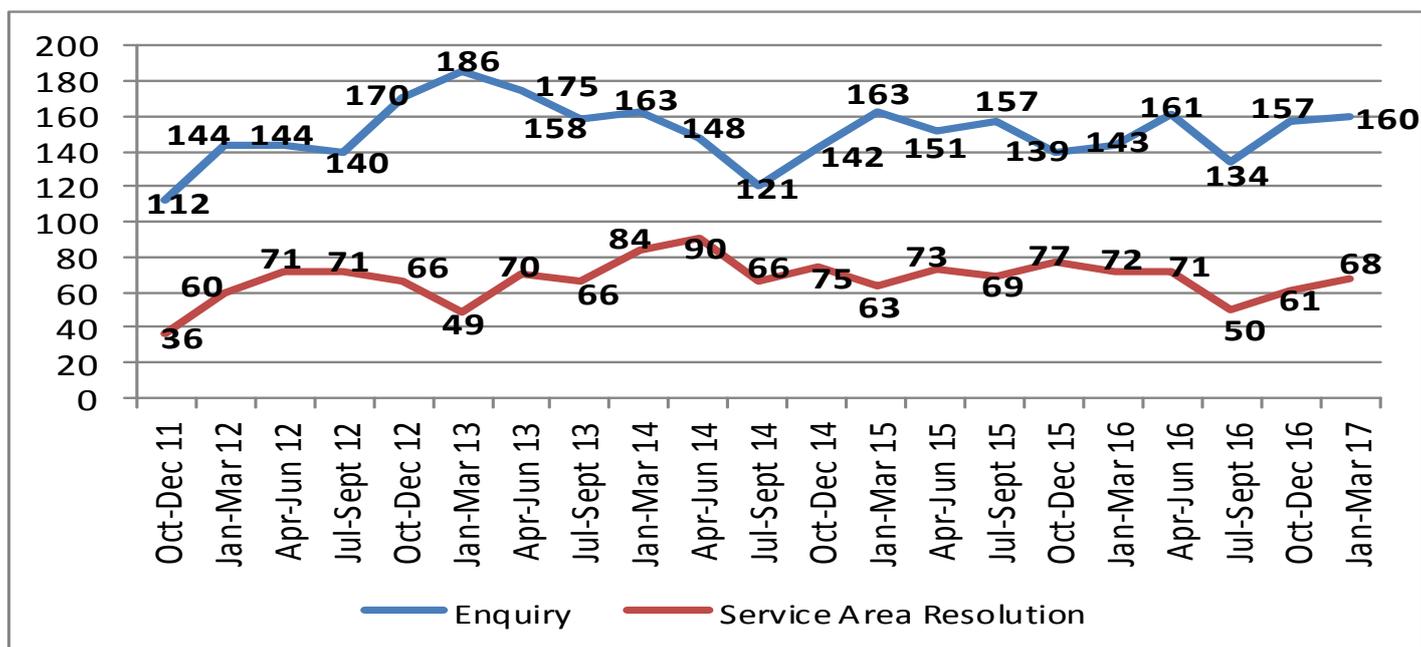


## General Enquiries & Local Resolutions

“General Enquiries” are mainly received by the Complaints Team via telephone. Queries 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 queries and concerns at service level e.g. in wards and departments. These cases are also monitored by the Complaints Team under a heading of “Local Resolution”.

Complaints Awareness Training is made available to all staff to encourage and facilitate the resolution of patients’ concerns at this local 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 process 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 2016-17, 21 new cases were opened 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 introduced new processes 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.



respect & dignity



openness & trust



leading edge

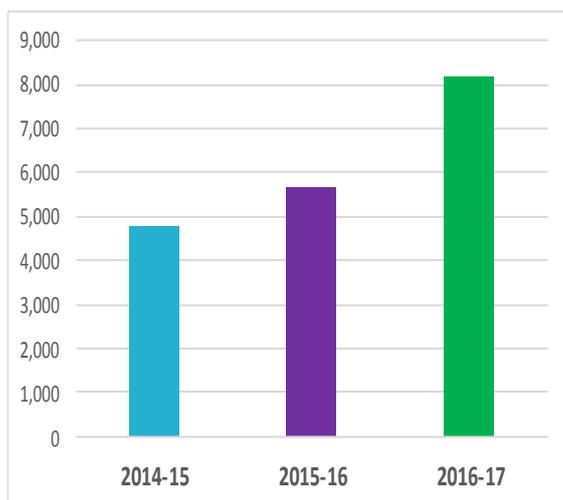


learning & development



accountability

## Compliments



The Complaints Team were formally notified of **8,193** compliments by wards and departments during 2016-17.

Compliments are always appreciated as they allow patients' positive experiences to be shared with our staff members, as well as identifying good working practices that can potentially be shared and expanded into other services.

Not all compliments given by patients are reported through to the Complaints Team to be included in the annual figures however, and so we continue to:

- encourage staff to report all compliments received
- encourage patients to forward all compliments to our dedicated inbox: [complaints@belfasttrust.hscni.net](mailto:complaints@belfasttrust.hscni.net)

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## Improving how we Listen, Learn and Improve

We continually work to make sure that where concerns or criticisms are raised by patients, these are dealt with in an effective way by the Trust. In particular we aim to ensure that:

- the process of making a complaint is **easy** for patients
- patients' issues are investigated in a **fair, thorough** and **timely** manner
- appropriate **actions** are taken to address the investigation findings in a way that fully resolves the matter for the complainant.

In order to evaluate how our current Complaints procedures are working within the Trust, and to make sure that staff are getting the support and information they need to handle complaints well, we undertook a staff survey across all Directorates in December 2016. A range of questions were asked to identify what staff thought about the complaints handling systems, and in particular if there were any parts of the processes that they felt could be improved.

We then took the suggestions and issues identified in the survey and held a workshop (with input from the Northern Ireland Public Services Ombudsman's office) in January 2017 so that staff from Service Areas could work with staff from the Complaints Team to agree on changes that could be made both locally within specific clinical areas, and across the Trust as a whole.

A significant focus of the workshop was on providing support, skills and encouragement to staff on the ground to help them deal with issues at ward / department level rather than complainants having to raise them formally at a later stage. One of the key actions taken forward following the workshop has been a renewed focus Trust-wide on Quality Assurance of replies sent to people who have complained, in particular making sure that these are well-written and deal with all the issues raised in a thorough and appropriate way. The Medical Director now reviews a sample of complaint responses each month and provides feedback on good practice and on any areas for improvement.

Learning from the issues raised in complaints is also now 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 both across the Trust and to other Northern Ireland healthcare organisations where relevant to avoid similar experiences happening elsewhere.

# Learning from Complaints

The Trust continues to investigate complaints in an open and transparent way, and we consider complaints to be an important source of learning. Discussing and sharing the outcome of complaints investigations is one of the ways we improve the experience of people using our services, and ultimately the safety and quality of the treatment and care we provide.

Below are some examples of how learning from complaints has changed working practices in the Trust during 2016-17, reducing the likelihood of recurrence, and improving patient experience.

## Summary of Event

*A patient was discharged and referred to district nursing teams for “full palliative care assessment as urgently as possible” The referral was received on 14<sup>th</sup> June and a visit was not scheduled until 16<sup>th</sup> June.*

*Personal care was not delivered and the family had to carry this out themselves. The family were expecting night sits from Marie Curie and these had not been arranged as urgent.*

*Faulty equipment was delivered to the patient. First a faulty mattress then the first syringe driver erected was faulty. Both pieces of equipment were repaired and replaced as soon as possible*

*The patient deteriorated and died before a full palliative care package was commenced. The family were distressed that their relative’s last few days were extremely stressful and might not have been as comfortable as they could have been.*

## Learning Points

- Palliative patients discharged to end of life care at home should have immediate holistic assessment of care and provision of suitable equipment
- District nursing teams should ensure that families always have a point of contact
- When carrying out an assessment the district nurse should be very clear about what services are available and when they will be provided

## Summary of Event

*During an iron infusion, a patient complained of their arm being sore around the IV site after the insertion of the peripheral cannula.*

*After a short time the patient went to the bathroom with the infusion in situ, at which stage the arm became very swollen. The infusion was stopped. On examination, the infusion was found to have tissue.*

*The patient had dark staining to their arm and continued to have pain in it. The patient was referred to the plastics team.*

## Learning Points

- When a patient has an intravenous iron infusion *in situ* and complains of pain around the IV site it should be examined straight away and appropriate action taken.
- Patients should be advised not to undertake any movement that could dislodge the cannula during the infusion (approx. 1 hour).
- Patients should be advised that iron infusions can cause ‘skin staining’ and patient information leaflets should be updated to include this.

## What we will be doing in 2017-18

We want to be sure that our response to issues raised by complainants is as effective as possible and leads to outcomes that:

- complainants are happy with and
- the Trust can use to take forward any potential improvements for the future.

4 key themes will be taken forward during 2017-18 to achieve these aims:

- ⇒ Dealing with more issues as and when they arise in wards and departments
- ⇒ Reducing the length of time taken to investigate complaints and provide responses to people who have complained
- ⇒ Improving the quality and content of responses provided to people who have complained
- ⇒ Making better use of complaints to identify how things can be done better, and sharing this learning widely to improve service delivery

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

- ⇒ between Service Areas / Directorates
- ⇒ between Directorates & the Complaints Team
- ⇒ between the Trust and external bodies (e.g. Northern Ireland Public Services Ombudsman, Patient Client Council)

Within the central Complaints Team we will also look at the type of information that is given to staff to support them in their handling and management of complaints. We will work to ensure that staff in all areas are provided with the necessary tools and information to respond effectively and positively to issues and concerns raised by complainants.

We will agree performance indicators to use within the Trust to help us measure and improve our complaints management systems and processes.

We will expand our quality assurance system for complaint responses, reviewing how and what is communicated, and getting input from patients / clients / carers to help us improve.

We will continue to use complaints to identify better ways of working and to share this type of learning more widely to maximize potential improvements.

### The Complaints Team can be contacted at:

Complaints Department  
Musgrave Park Hospital  
7th Floor McKinney House  
Stockman's Lane  
Belfast BT9 7JB

Tel: (028) 9504 8000

Email: [complaints@belfasttrust.hscni.net](mailto:complaints@belfasttrust.hscni.net)