

Health Scrutiny and Performance Panel

**Agenda  
Item No.**

**27<sup>th</sup> April 2010**

**8.**

**National Health Service (NHS) Walsall – Concerns and Complaints  
1<sup>st</sup> April 2009 – 31<sup>st</sup> March 2010**

**Ward(s)** All

**Portfolios:** Councillor McCracken

**Summary of report:**

All NHS organisations must have processes in place to receive, investigate and respond to complaints from patients and other members of the public about health service issues. Complaints provide us with a valuable indicator of patient experience, contribute to our understanding of what it feels like to be a patient and provide us with opportunities for organisational learning within the NHS. This report, submitted for the Panel's information, deals with concerns and complaints dealt with by NHS Walsall (Commissioner and Primary Care Independent Contractor complaints) during 2009/10.

**Reason for scrutiny:** To provide information regarding complaints received within NHS Walsall during the period 2009/10.

**Background papers:** Not applicable.

**Resource and legal considerations:** Possible implications for NHS Walsall or Primary Care Independent Contractors, to address service development arising from complaints or to ensure legal compliance. May vary, dependent upon nature of each individual complaint.

**Citizen impact:** May vary, dependent upon nature of each individual complaint.

**Environmental impact:** May vary, dependent upon nature of each individual complaint.

**Performance Management:** Learning from patient experiences – in relation to individual complaints.

**Equality Implications:** May vary, dependent upon nature of each individual complaint.

**Consultation:** Not applicable.

**Contact Officer:**

Reporting Period:

1<sup>st</sup> April 2009 – 31<sup>st</sup> March 2010

**1. Introduction:**

- 1.1. From 1<sup>st</sup> April 2009 new complaints legislation came into force, establishing procedures for dealing with patient concerns and complaints across the whole of the NHS and Social Care under a single set of regulations.
- 1.2. In response to the new regulations NHS Walsall has established a Customer Care Team which brings together the work previously dealt with by the former Patient Advice and Liaison Service (PALS) and the Complaints Department. These new arrangements offer a clearer, seamless pathway for NHS Walsall to respond to patient concerns, with a focus on resolving concerns quickly whenever it is possible to do so, but transferring more smoothly to the formal complaints procedures where this is necessary.
- 1.3. Since establishing the new Customer Care Team a new policy has been developed to reflect the new arrangements, supported by new working arrangements. Working with our neighbouring organisations, joint protocols have been put in place to support effective handling of complaints that span different local health and social care organisations. The Team has also been involved in presentations and inputting to newsletters to Primary Care Practices to ensure that they are aware of the new regulations.
- 1.4. The NHS Walsall Customer Care Team deal with concerns and complaints about NHS Walsall and Walsall Primary Care Independent Contractors (General Practitioners, Dentists, Pharmacists, Opticians). The Team also deals with concerns about Walsall Mental Health Services, although formal complaints are dealt with by Dudley and Walsall Mental Health NHS Trust. Concerns and complaints about our provider arm, Walsall Community Health, are dealt with separately by their Customer Services Team. Complainants can approach Primary Care Independent Contractors to raise concerns or complaints direct if they prefer. Therefore, the figures in this report reflect only those concerns and complaints about Independent Contractors that have been raised with NHS Walsall.

**2. Concerns/complaints raised during Reporting Period:**

**2.1. Total number of concerns/complaints received during period:**

The Customer Care Team deal with a wide range of contacts from simple enquiries to complex formal complaints. The Customer Care Team also supports other work streams by acting as a primary advisory contact for new initiatives or public consultations. Figure 1 reflects all contacts with the exception of simple enquiries and sign-posting activities.

**Figure 1: Total number of concerns/complaints received during period:**

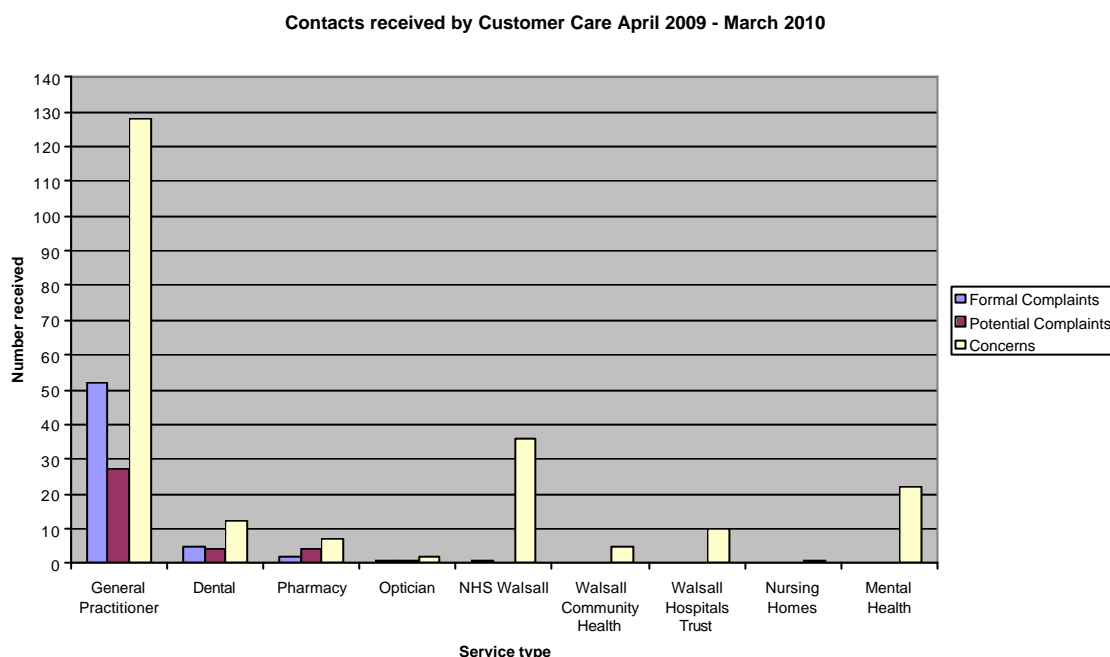
All Concerns	223
Potential/Withdrawn Complaints	36
Formal Complaints	61
Fitness to Practise/GMC Referrals	11
MP Letters	16
Consultation Responses	199
<b>Total</b>	<b>546</b>

Items listed as concerns are those matters raised with the Customer Care Team requiring assistance or intervention to facilitate a solution for the person raising the concern. The aim is to resolve the concern as quickly as possible in order to satisfy the individual, enable care to continue and avoid unnecessary escalation as a complaint. Persons wishing to enter the formal complaints procedures will be offered support in doing so and guided through the process.

**2.2. Total number of concerns/complaints by Organisation/Practitioner Type:**

Most concerns and complaints raised with NHS Walsall relate to Primary Care Independent Contractors, particularly General Practitioners. This is broadly similar to previous years with General Practice historically accounting for upward of 75% of Independent Contractor complaints.

**Figure 2: Total number of concerns/complaints received during period by organisation/practitioner type:**



Similarly, most resolvable concerns raised with NHS Walsall relate to General Practice. Typically matters resolved as concerns include difficulties obtaining appointments or making contact with a surgery, difficulties with prescriptions, or concerns about referrals or actions being taken by a practitioner. More recently the Team have also dealt with a small number of concerns raised by patients regarding the introduction of Summary Care Records, for which the customer Care Team has been identified as an initial point of contact for patient enquiries and concerns.

**Figure 3: Breakdown of concerns by organisation:**

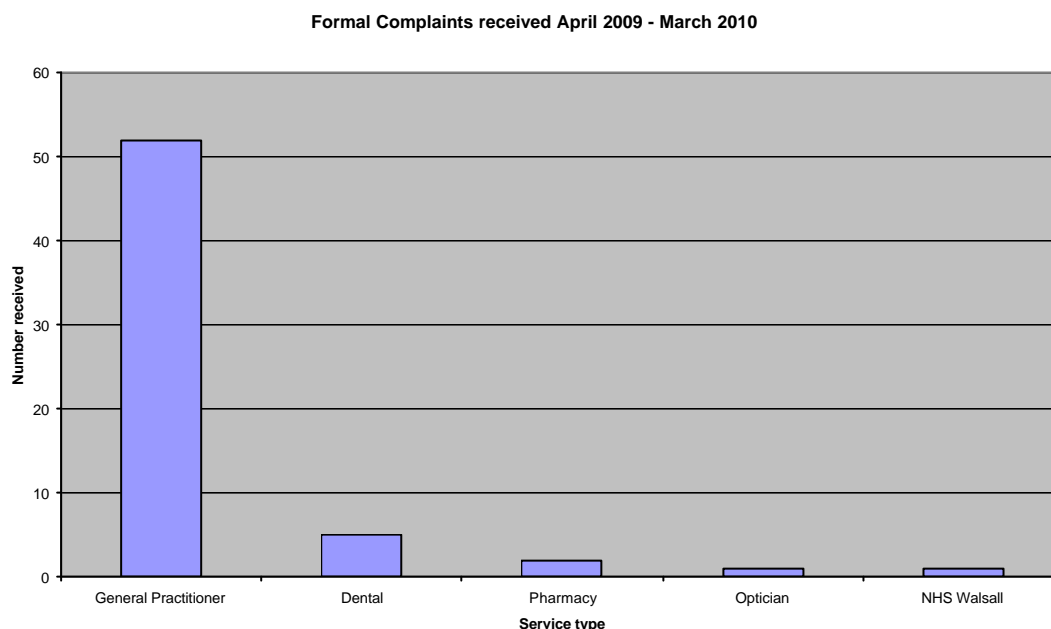
All Concerns	223	
• Independent Contractors		149 (67%)
• NHS Walsall		36 (16%)
• Walsall Mental Health Services		22 (10%)
• Other organisations		16 (7%)

This year the Customer Care Team has been involved in receiving calls for a public consultation regarding the future of a local GP Practice. The consultation remains ongoing, but to date 199 local people have telephoned to ask questions, discuss their concerns and/or register their preferred option. The log of calls received will be forwarded to the consultation organisers to inform the consultation outcome. (Please note, these numbers are included in figure 1 only, and not in subsequent tables and charts which relate to concerns and complaints only).

**2.3. Total number of formal complaints by Practitioner Type:**

Over the course of the year the Customer Care Team dealt with 61 formal complaints. This is a reduction of 22% compared to 2008/09 when 78 formal complaints were received. However, in 2008/09, 66 formal complaints were regarding Independent Contractors and 12 were about NHS Walsall. During 2009/10, 60 complaints were about Independent Contractors and only 1 about NHS Walsall. Therefore, there was a 6% reduction in Independent Contractor Complaints.

**Figure 4: Breakdown of Formal Complaints by Organisation :**



Clearly, there were significantly fewer complaints this year about NHS Walsall. However, the majority of the complaints received in 2008/09 for NHS Walsall were about a particular initiative that occurred that year.

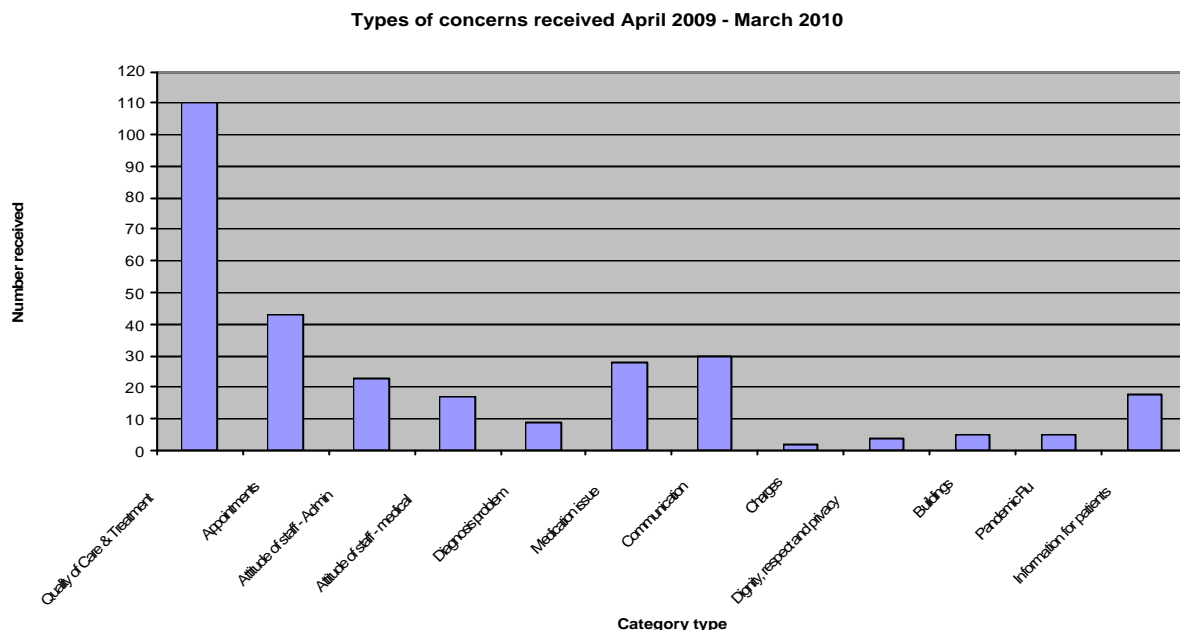
Whilst the number of formal complaints about pharmacy and optician services has historically been very low, there was also a notable reduction in dental complaints from 10 in 2008/09 to just 5 in 2009/10. However, as stated previously, General Practice has historically accounted for over 75% of all Independent Contractor complaints, accounting for 87% in 2009/10.

36 complaints were either abandoned or withdrawn part way through the process. It has been noted in previous years that a number of complaints have been raised but then either withdrawn, or more commonly, the complainant does not continue to engage with the process. When the complainant does not respond to contacts, the complaint is effectively abandoned and logged as a potential complaint in case the complainant re-establishes contact. All such potential/withdrawn complaints remain subject to scrutiny during trend analysis in order to contribute to identification of patterns or trends in complaints.

Throughout the year the Customer Care Team deal with a number of items of correspondence from local MPs, some of which are enquiries and some of which are representations on behalf of constituents. The latter would be dealt with as complaints if this was the individual's wish. Similarly, some patients choose to contact the General Medical Council to raise concerns, either instead of or in addition to raising their concerns with the local NHS. The GMC will request our comments in regard to any practitioner about whom they are contacted to enable them to decide whether Fitness to Practise procedures need to be invoked. In all cases we respond to the GMC in accordance with their procedures, and if the individual has not already contacted us direct we will write to the complainant to offer the option of having their complaint investigated via the Complaints Regulations. These cases are logged as Fitness to Practise/GMC referrals.

2.4. Total number of contacts/concerns by subject of concern:

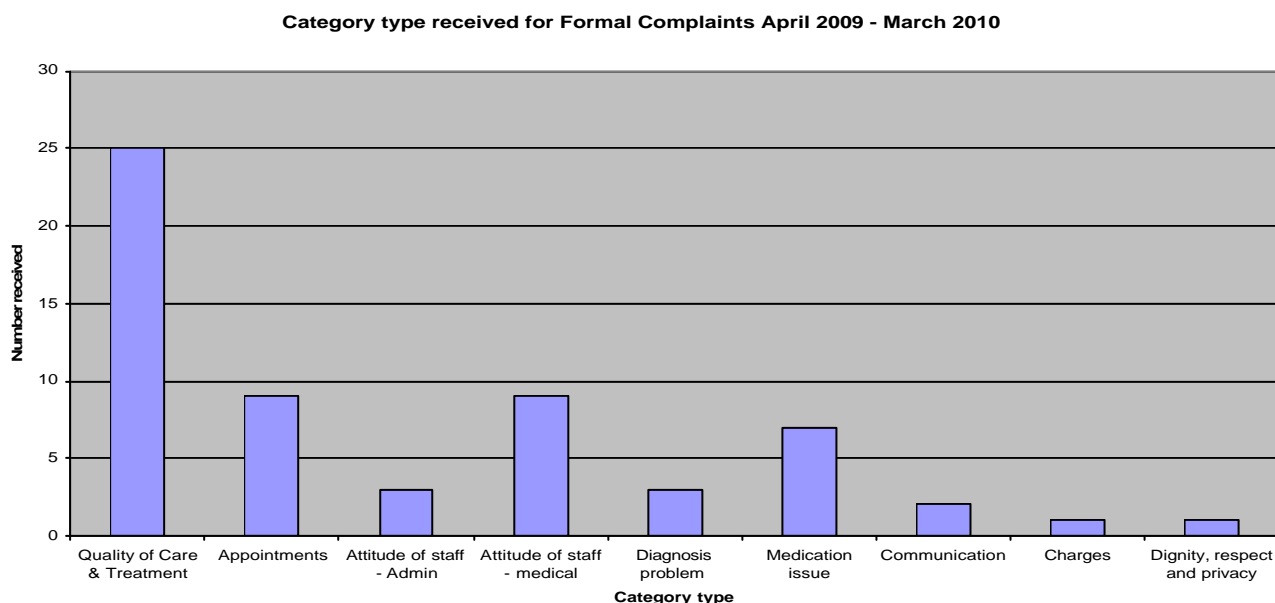
Figure 5: Breakdown of all concerns/complaints by category:



As might be expected, the majority of concerns and complaints relate to care and treatment, diagnosis and medication. A number of concerns, 43 over the year, related to appointments, although many of these were resolvable without progressing to formal complaint. Around 14% of concerns were about the attitude of staff, some of which have been allegations of insensitivity, poor communication or have arisen following confrontational contacts between the Practice and the patient. Again, most of these were resolvable outside of the formal complaints procedures. Only a small number of concerns relating to Pandemic Flu were recorded, but the majority of calls on this issue were taken within a specially established call centre within Public Health.

2.5. Total number of formal complaints by subject of concern:

Figure 6: Breakdown of all complaints by category:



Similarly, the majority of formal complaints, were in regard to care and treatment, diagnosis and medication. The Customer Care Team link closely with clinical colleagues for advice and guidance in regard to clinical complaints, including the Associate Medical Director for Primary Care, the Head of Medicines Management and the Consultant in Dental Health. Any significant concerns or trends may result in referral to the Performance Management of Primary Care Practitioners Committee who may request and monitor action as necessary.

**3. Continuing Local Resolution: Conciliation:**

NHS Walsall aims to resolve all concerns and complaints locally if possible. If, following investigation of and response to a formal complaint, local resolution has not been achieved then in many cases the complainant will be offered the option of conciliation. A lay conciliator will usually arrange to meet with the complainant and with the Practice. They may suggest bringing both parties together in a round table meeting, or they may liaise between the parties, as appropriate to the circumstances.

Some complainants reject the offer of conciliation. However, we have historically found that those who remain dissatisfied with the response to their complaint, but who accept the offer to move to conciliation, are more likely to achieve a satisfactory outcome. It has also historically been the case that complainants who approach the Parliamentary and Health Service Ombudsman (or under the old regulations, the former Healthcare Commission) have been offered, but in many cases have refused the offer of conciliation.

The table below shows the number of complaints that progressed to conciliation during 2009/10. This is a very slight increase on previous years.

**Figure 7: Requests for conciliation of formal complaint:**

Number of formal complaints	61
Number requesting conciliation	8
% formal complaints requesting conciliation	13%
Conciliation outcome - Local Resolution Achieved/Satisfied	4
Conciliation outcome - Local Resolution Not Achieved/Remain Dissatisfied	1
Conciliation discontinued due to disengagement of complainant	2
Conciliation Ongoing	1

**4. Beyond Local Resolution: Parliamentary and Health Service Ombudsman:**

The new health and social care complaints regulations indicate that, in the event that a complainant is not satisfied with attempts to handle their complaint locally, then they may approach the Parliamentary and Health Service Ombudsman. The table below indicates the number of notifications received from the Ombudsman's office during 2009/10.

**Figure 8: Ombudsman notifications:**

Number of formal complaints	61
Number referred to Ombudsman	1
% formal complaints referred to Ombudsman	1.6%
Number Upheld	Not known - ongoing
Number not upheld	Not known - ongoing
Ombudsman's Recommendations	Not known - ongoing

During 2009/10 the Ombudsman notified NHS Walsall that one complaint, which was about a Primary Care Independent Contractor, had been referred to them. Attempts had been made during the local resolution stage to engage the complainant in conciliation, but the complainant disengaged from this process at an early stage and appeared to be seeking one particular outcome only. The complainant approached the Ombudsman, and the Ombudsman's office contacted both NHS Walsall and the Independent Contractor to enquire whether we would consider re-establishing the conciliation process, to which both parties agreed. However, the Ombudsman has since notified us that the complainant remains unwilling to engage in conciliation or meetings. We are awaiting a final outcome from the Ombudsman.

## **5. Learning from Complaints:**

NHS Walsall adopts the view that in managing complaints investigating managers should always consider whether the complaint highlights the possibility of learning and service improvement. Some actions may involve ongoing or significant changes, whilst some learning and improvement may require solutions that are very simple, but which address issues of concern or frustration for patients. Actions put in place in response to complaints include:

- Many complaint responses are used to provide greater explanation to patients, apology if appropriate and may highlight general improvements that the service will seek to implement, such as staff training, or updating policies and procedures.
- Some Pharmacists have re-examined dispensing, record keeping and auditing procedures and made appropriate changes in response to complaints;
- Training has been put in place for individual practitioners in response to complaints, for example, in regard to standards of record keeping or around care of specific patient groups. This training has been subject to ongoing monitoring by the Associate Medical Director for Primary Care, supported by reports to the Performance Management of Primary Care Practitioners Committee as appropriate to each case;
- One Practice changed its ansaphone message in response to complaints that the message was too long and patients were terminating the call before receiving important out-of-hours information;
- Improvement to signage at premises to reduce confusion for patients.