Paper ref:	TB (06/20) 017

Sandwell and West Birmingham Hospitals NHS
NHS Trust

Report Title	Complaints, Local Resolution and Purple Point Annual Report 2019-20		
Sponsoring Executive	Kam Dhami, Director of Governance		
Report Author	Kam Dhami, Director of Governance		
Meeting	Trust Board (Public)	**Date**	4th June 2020

1. Suggested discussion points *[two or three issues you consider the Committee should focus on]*

The Board is invited to consider the following points:

- Note the reduction in reopened cases compared to last year but discuss to better understand the reasons why complainants are dissatisfied with the first response and the outcomes from the follow-up.
- Consider how learning from complaints takes place, including monitoring of the implementation of this learning, and how it is shared across other areas of the Trust.
- Discuss the news ways planned to gain feedback from complainants of their experience of raising concerns.

2. Alignment to 2020 Vision *[indicate with an 'X' which Plan this paper supports]*

Safety Plan		Public Health Plan		People Plan & Education Plan	
Quality Plan		Research and Development		Estates Plan	
Financial Plan		Digital Plan		Other *[specify in the paper]*	x

3. Previous consideration *[where has this paper been previously discussed?]*

Quality and Safety Committee: 29th May 2020

4. Recommendation(s)

The Quality and Safety Committee is asked to:

a.	**OBSERVE** the Trust's improved performance in responding to formal complaints.
b.	**CONSIDER** local updates on complaint handling at Group and Corporate Directorate
c.	**NOTE** progress made in reaching out to local community groups on their experiences, views and ideas on raising concerns

5. Impact *[indicate with an 'X' which governance initiatives this matter relates to and where shown elaborate]*

Trust Risk Register		n/a					
Board Assurance Framework		n/a					
Equality Impact Assessment	Is this required?	Y		N		If 'Y' date completed	
Quality Impact Assessment	Is this required?	Y		N		If 'Y' date completed	

SANDWELL AND WEST BIRMINGHAM HOSPITALS NHS TRUST

Report to Trust Board: 4 June 2020

Complaints, Local Resolution & Purple Point Annual Report 2019-2020

1. Introduction

1.1 The main focus for 2019/20 was to lean the complaint process, improve the quality of complaint responses and the timeliness of responding, as well as raising the profile of the complaints, local resolution and Purple Point routes for accessing support and raising concerns.

1.2 Prior to the COVID-19 pandemic the Trust was achieving 99% against the SWB target of 97% for responding to complaints within the agreed date, a significant improvement on 2018/19 position of 77%. As a result of the pandemic focus, as at the date of the report, the Trust is at 97.6%; still an achievement on the previous 12 months.

1.3 The Trust has seen mixed results from the feedback survey to gain views from complainants on their experience of how we handled their concerns and if they were satisfied with our reply, with only a 14% response rate. A different approach, an e-survey, is now being trialled to test the effectiveness of this method.

1.4 The community engagement work may have assisted in the increased number of complaints received this year, (an increase of 169, 19.6%, from 2018/19) as well as a refresh of the Trust internet pages.

1.5 This year complaints ranging from concerns on the restrictions imposed as a result of the smoking ban in July 2019 and patients and relatives impressions from the introduction of Unity in September 2019 have been received. There has also been a trend in relation to appointment management, and a piece of work is underway in Corporate Operations to try and address the concerns raised.

1.6 The Annual Complaints Report is attached at Annex 1 with some key points from the year called out below.

2. Reopened / returning complainants

2.1 One of the many improvements this last year has been the reduction seen in reopened or returning complaint cases. If a complainant returns to the Trust dissatisfied with their complaint response a review is undertaken to see what was answered in the first response compared to what the complainant asked. There is then consideration of what more can be done, within process, to further satisfy them, and consider what other options are available to them. For example, some complainants request an

"independent investigation" and are unhappy when the investigation has been completed by SWB staff members. Clarity is provided at the start of the complaint process that investigations are allocated either devolved to the relevant clinical service, although not anyone previously involved in the patient's care, or a corporate investigation; both of which fall under SWB. In such a circumstance it may be that the Parliamentary and Health Service Ombudsman (PHSO) can offer that independence they are seeking.

If it is decided that further enquires can be undertaken, they are, but there is also transparency that if nothing further can be offered, because they disagree with the outcome, advice on what routes remain open to them is offered.

3. Local Communities

3.1 The impact of the Community Engagement work so far has been impactful, forging local relationships, developing new and different ways for local people to raise queries and ask for help accessing services as well as highlighting what Midland Metropolitan University Hospital will offer them in the future. Once the pandemic restrictions ease, plans are in place to focus on those who fall under protected characteristics working to make it easier to engage and support them. Work started earlier this year on engagement with the local deaf community which hopefully will create new routes for those suffering hearing loss to better access services Trust-wide.

3.2 During 2019/20 the ethnicity of people complaining has seen increases community wide, the largest of being in those patient complaints with a background of Asian/Asian British - Indian which increased by 21 complaints when compared to 2018/19.

4. Purple Point

4.1 The use of Purple Point has reduced this last year and it has not produced the impact hoped for during 2019/20. Prior to the pandemic a leaflet and poster campaign was planned to raise the profile of this innovative and responsive route to resolve inpatient's concerns or log compliments. This work has been postponed to date, to allow front line and management staff to concentrate efforts, but it is hoped this will invigorate the service once in place. On a positive note Purple Point was shortlisted in the **we**learn QI poster competition during December 2019.

5. Integrated Governance

5.1 During 2019/20 Governance teams have been working more closely together; Patient Safety, Legal Services and the Complaint Team now work collaboratively on those cases that cross all services, for example, those that may have a Coroners hearing or are connected to an incident or Serious Incident.

5.2 A process has been agreed and where if it is possible to undertake one investigation that will take place, and that will be the most appropriate investigation. Where there is need for more than one investigation, for example, if a complaint case partially relates to an incident, but not all the issues raised in a complaint relate to that, a way to work

together has been agreed to keep all parties informed. This also benefits staff and patients as it demonstrates a clearer and more structured way of investigating and reporting.

6. External Views

6.1 During 2019/20 Healthwatch produced a report called *"Shifting the Mindset"* The reports key findings outlined that:

a) *Hospitals need to do more to show patients how the NHS is learning from mistakes. The report stated that all hospital Trusts report to NHS Digital on the numbers of complaints they receive; however, only a minority of Trusts report any more than meaningful data at a local level*.

SWB Quality and Safety Committee receive a quarterly report, outlining compliance against statutory regulations and local targets as well as highlighting any emerging trends, themes and actions being taken aimed at tackling those trends at a local level.

b) *Healthwatch analysis showed just 1 in 8 Hospitals Trusts (12%) demonstrate that they are compliant with the statutory regulations when it comes reporting on complaints*. SWB are within the 12%.

c) *All hospitals produce an annual statutory complaints report but they are only required to make it available to people upon request. Healthwatch found that hospital complaints staff were often not aware of the reports or who could access them.* SWB Annual Complaints Report is published each year on the Trust website for all to access.

d) *Only 38% of Trusts make public any information on the changes made in response to complaints*. SWB Annual Report outlines key learning and actions taken as a result of complaints raised, and highlights achievements in local community engagement as well as the internal improvements in timeliness and quality.

6.2 During 2019/20 the PHSO and Department of Health have, as a result of the COVID-19 pandemic, paused the complaint process. This came into force to alleviate the pressure on NHS services, in particular front-line staff, in March 2020. Although there are some cases the Trust has had to pause, investigations are continuing and responses prepared as much as possible with support being provided to front line staff to carry on responding to as many cases as possible. This will continue into 2020/21.

7. Into the Future

7.1 To further hear the patient voice and experience during 2020/21 plans are in place for the creation of a patient panel whose opinions could be sought on any future changes in process or leaflets. The panel could also be consulted on all patient related concerns generally, to aid local understanding and develop appropriate regional or local variance.

7.2 Learning and actions arising from complaints during 2019/20 have been audited to ensure actions have been completed. During 2020/21 this auditing is planned to strengthen further to encompass evidence as well as more focus on identifying learning during an investigation; be that in relation to the complaint specifically or not. Investigators are being asked to identify what they specifically learnt during an investigation and this will be reported through the **we**learn programme. Actions and learning from complaints have contributed to the 100 improvements made as a direct response of patient feedback within the Trust Annual Report.

8. Recommendations

8.1 The Board members are asked to:

a. **OBSERVE** the Trust's improved performance in responding to formal complaints.
b. **CONSIDER** local updates on complaint handling at Group and Corporate Directorate
c. **NOTE** progress made in reaching out to local community groups on their experiences, views and ideas on raising concerns

Caroline Burgin
Head of Complaint

28 May 2020

Annex 1: Complaints, Local Resolution & Purple Point Annual Report 2019-2020