

QUARTER 4 2013/14 COMPLAINTS AND COMPLIMENTS REPORT

1. BACKGROUND

- 1.1 All complaints are handled in line with national NHS procedures and for the purpose of the national annual statistical returns (K041a), all complaints are categorised as mental health and social care, community hospitals and community health services

2. ASSURANCE

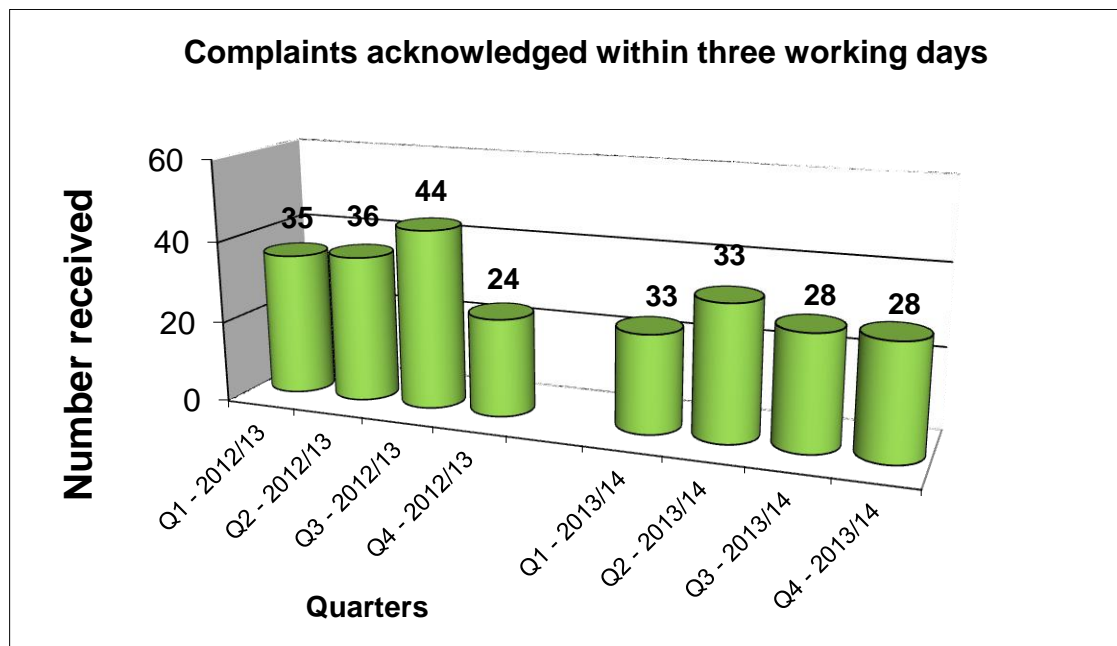
- 2.1 In April 2012, the Trust reviewed its governance structure. In the revised structure, complaints are reviewed monthly through the Clinical Governance Group to consider any issues of clinical practice or concern.
- 2.2 All complaints, where improvements are identified, have action plans for local improvement and, where appropriate, organisational action plans to ensure that any lessons or best practice identified is shared and implemented across all parts of the Trust. Complaints and compliments are also reported monthly to the Board as part of the Quality Report.

3. COMPLAINTS

- 3.1 There were 28 complaints received in Quarter 4 2013/14. This is the same as the number complaints received in Quarter 3 2013/14.
- 3.2 The breakdown by month is as follows:
- | | |
|---------------|------------------------|
| January 2014 | 13 complaints received |
| February 2014 | 8 complaints received |
| March 2014 | 7 complaints received |
- 3.3 Separate monthly reports are provided to the Clinical Governance Group which set out the main concerns raised in each complaint and any action or learning points identified by the Trust.

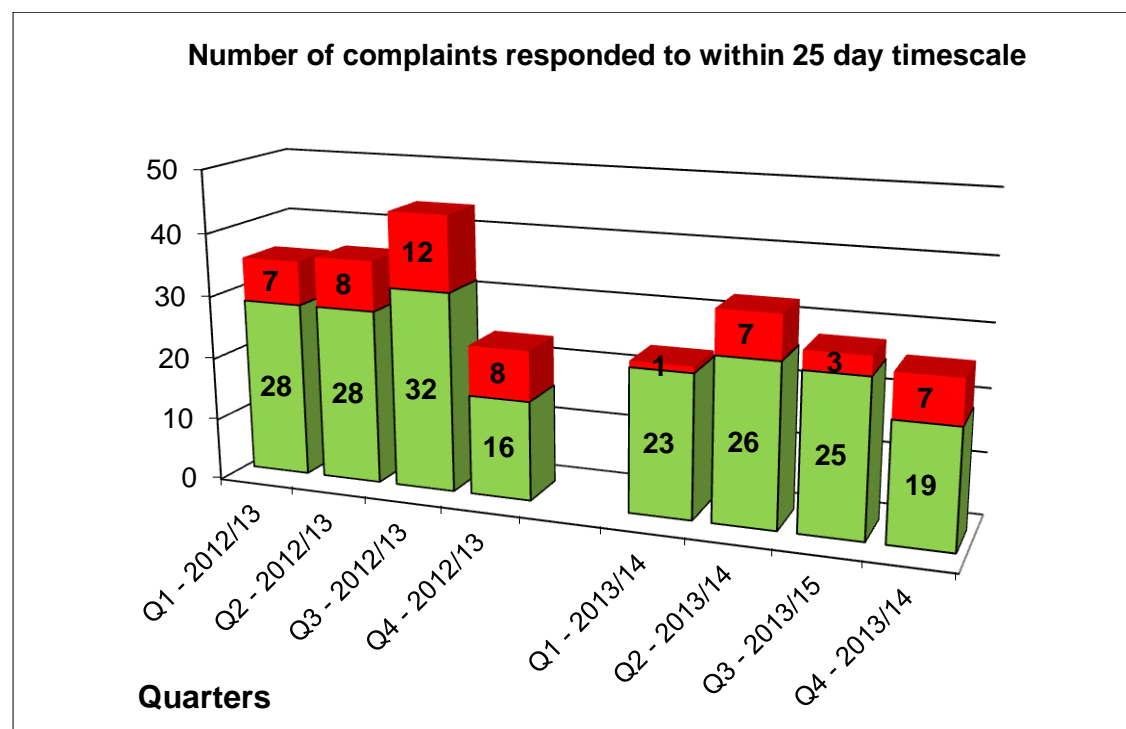
4. ACKNOWLEDGMENTS

- 4.1 The Trust has maintained a 100% compliance rate of acknowledging complaints within three working days in Quarter 4 2013/14.



5. TIMELINESS OF COMPLAINT RESPONSES

- 5.1 The Trust aims to provide a response for all complaints within 25 working days.
- 5.2 Of the 28 complaints received in Q4 2013/14, 21 have been closed and 19 were closed within the Trust's target timeframe. Seven responses took longer than the target timeframe, one of which was agreed with the complainant due to the complex nature of the concerns raised.



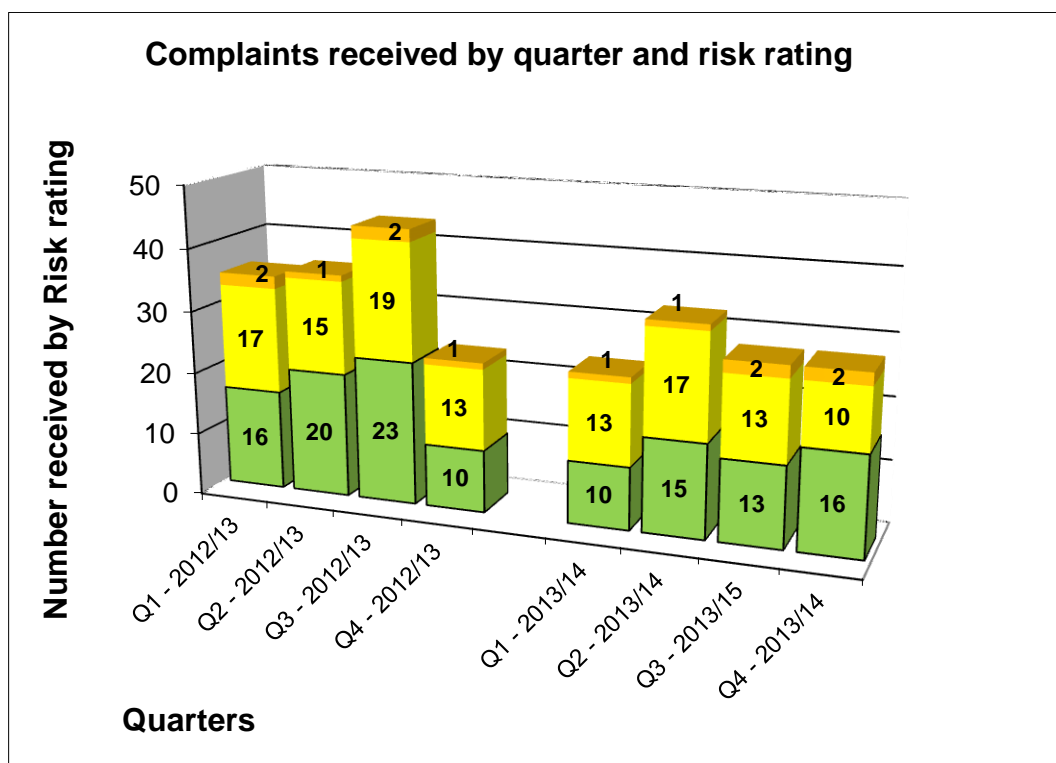
6. COMPLAINTS RECEIVED RELATING INDIVIDUAL DIVISIONS

- 6.1 The table below shows the number of complaints received in Quarter 4 2013/14 for each division, with a comparison for complaints received in the previous quarter for each division.

Division	Q1 – 2013/14	Q2 – 2013/14	Q3 – 2013/14	Q4 – 2013/14
Children, Young People and Families	6	2	4	2
Bridgwater and North Sedgemoor	4	13	11	7
Taunton and West Somerset	3	1	3	4
Mendip	1	6	5	4
South Somerset	4	5	2	3
Adult Mental Health Inpatient and Assessment Team	4	5	2	6
Mental Health Placements & Out of Area Treatments	2	1	1	2
TOTAL FOR QUARTER	24	33	28	28

7. RISK GRADING

- 7.1 During Quarter 4 2013/13, 16 complaints were risk graded as 'very low risk', 10 were graded as 'low risk' and two were graded as 'moderate risk'.
- 7.2 One was related to a deceased female patient whose daughter was concerned that her mother was not given proper consideration regarding safeguarding by either health or social care services. She felt that her mother's home was in an extremely poor condition two weeks prior to Christmas when she visited (soiled waste, in the form of toilet paper with excrement and blood on it, were in large piles on the sitting room carpet and in the bathroom) but no action was taken at this point. The daughter made many attempts to contact the organisations involved in her mother's care, but no action was taken.
- 7.3 The other was related to a deceased male patient whose relatives stated that at 7pm on 21 November 2013, when the District Nurse service telephoned the family they requested assistance as their father's breathing had become laboured and they wanted a nurse present. However, the nurse did not arrive, and the family was not contacted at all by the District Nurse service. The patient died at 10.25pm just as the nurse arrived.



8. PROFESSIONS AND SUBJECTS

- 8.1 The two tables below show the number of complaints received by profession and subject code for Quarter 4 2013/14 compared with the previous quarter.

Profession	Q1 – 2013/14	Q2 – 2013/14	Q3 – 2013/14	Q4 – 2013/14
Nursing	14	21	22	18
Professions supplementary to medicine	5	1	1	5
Medical	2	2	1	3
Dental	3	9	3	1
Administrative/Clerical	0	0	1	1

Subject Code	Q1 – 2013/14	Q2 – 2013/14	Q3 – 2013/14	Q4 – 2013/14
All aspects of clinical treatment	14	17	19	16
Communication/information to patients (written and oral)	3	1	3	1
Attitude of staff	2	3	3	8

Subject Code	Q1 – 2013/14	Q2 – 2013/14	Q3 – 2013/14	Q4 – 2013/14
Appointments, delay/cancellation (outpatient)	3	9	2	2
Policy and commercial decisions of trusts	1	0	0	1
Failure to follow agreed procedures	1	0	0	0
Admissions, discharge and transfer arrangements	0	2	0	0
Personal records (including medical and/or complaints)	0	1	1	0

9. PARLIAMENTARY AND HEALTH SERVICE OMBUDSMAN (PHSO).

- 9.1 There is currently only one complaint which is being considered by the PHSO for independent review at the start of Quarter 4 2013/14 which is detailed below.
- 9.2 Mr and Mrs X, the parents of a joint CAMHS and Sirona Healthcare male patient feel that the organisations have failed to undertake an accurate assessment for autism spectrum disorder and they are also concerned about the way in which their complaint was handled. All the appropriate documentation has been provided to the PHSO and they advised in writing on 19 February 2014 that they intend to investigate the concerns further. We await further correspondence.
- 9.3 The following cases were closed by the PHSO in Quarter 4 2013/14.
- 9.4 Mrs Z referred her complaint to the PHSO regarding the care of her late son and the completion of the CHC (Continuing Health Care) checklist. Mrs Z's complaints related to NHS Somerset (now Somerset CCG) and Somerset County Council but included issues involving District Nursing services now managed by Somerset Partnership NHS Foundation Trust. The complaint was closed but subsequently re-opened after submission of additional evidence by Mrs Z and the involvement of the Local Government Ombudsman (LGO). The PHSO and the LGO have interviewed staff from the District Nursing Service involved in the care of the patient and issued a draft report to the Trust in December 2013. The draft report identified maladministration by the District Nursing Service in failing to undertake an appropriate risk assessment and subsequently failing to refer the case formally through safeguarding. The Trust has responded to the draft identifying a number of factual inaccuracies and challenging some of the findings and these have been discussed between the Director of Governance and Corporate Development and the PHSO investigator. The Trust has received the final LGO/PHSO report and is considering its next steps.
- 9.5 Mrs Y, the daughter of elderly male patient, referred her complaint to the PHSO, as she felt that the Trust had failed to communicate

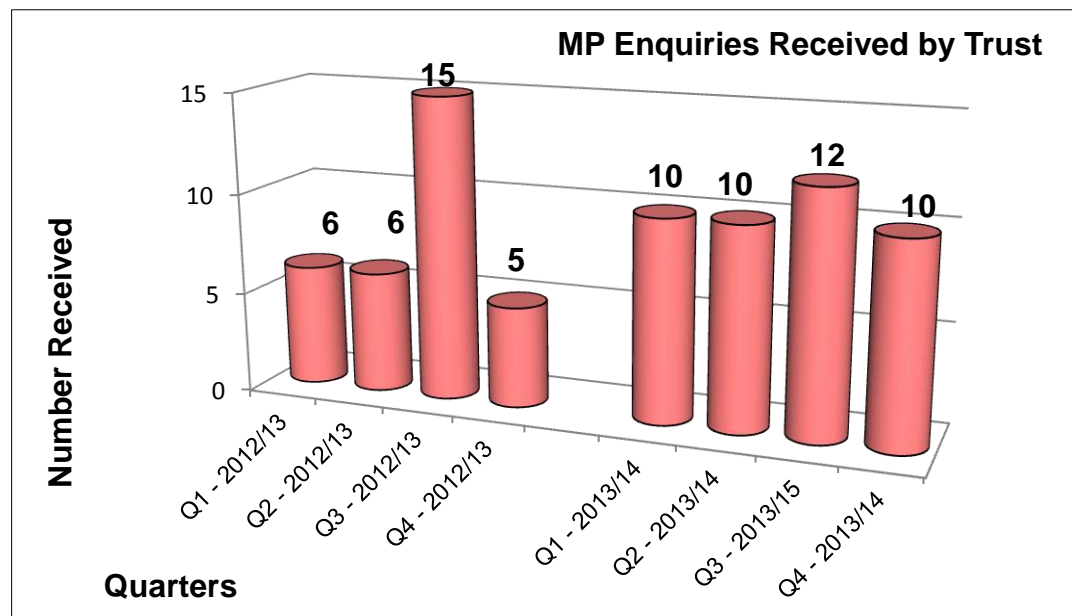
appropriately with her about her father's care, despite her having been appointed Lasting Power of Attorney for his welfare and that decisions made in his best interests were not recorded. In addition, she is concerned that the Trust failed to investigate, or respond to, her complaint appropriately. The PHSO have completed their investigation and are proposing to take no further action. They have acknowledged some failings in the Trust's communication with the complainant but consider that Trust has taken appropriate action to put matters right.

10. ANALYSIS OF COMPLAINTS AND ACTION TAKEN

- 10.1 The Trust receives a comparatively small number of complaints given the significant number of patient contacts that our staff have over a year. Patient satisfaction rates from surveys and other sources remain very high but the Trust takes very seriously all complaints received and looks to act on areas of concern identified both in individual investigations and where trends or concerns are suggested about services.
- 10.2 Of the 28 complaints investigated in Quarter 4 2013/14, the majority were fully or partially substantiated. There were no significant themes or trends identified and the two 'moderate' risk rated complaints are being investigated further as noted above.

11. MP ENQUIRIES

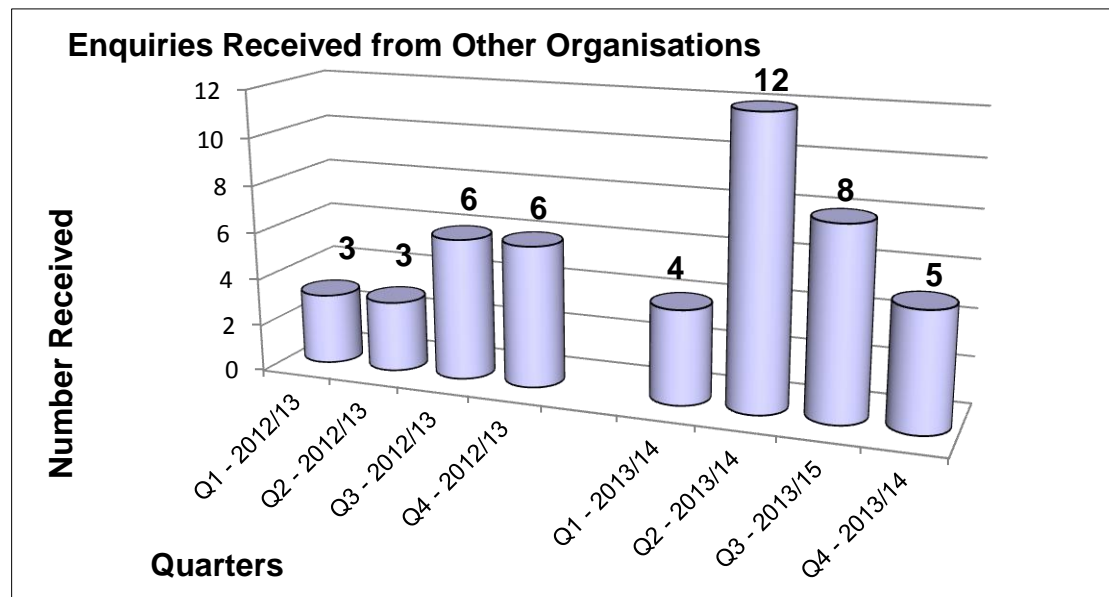
- 11.1 The Trust keeps a register of MP's enquiries separate from the Complaints register and these are all responding to by the Chief Executive. There were ten enquiries during Quarter 4 2013/14 which is a decrease of two from the previous quarter.



12. ENQUIRIES FROM OTHER TRUSTS

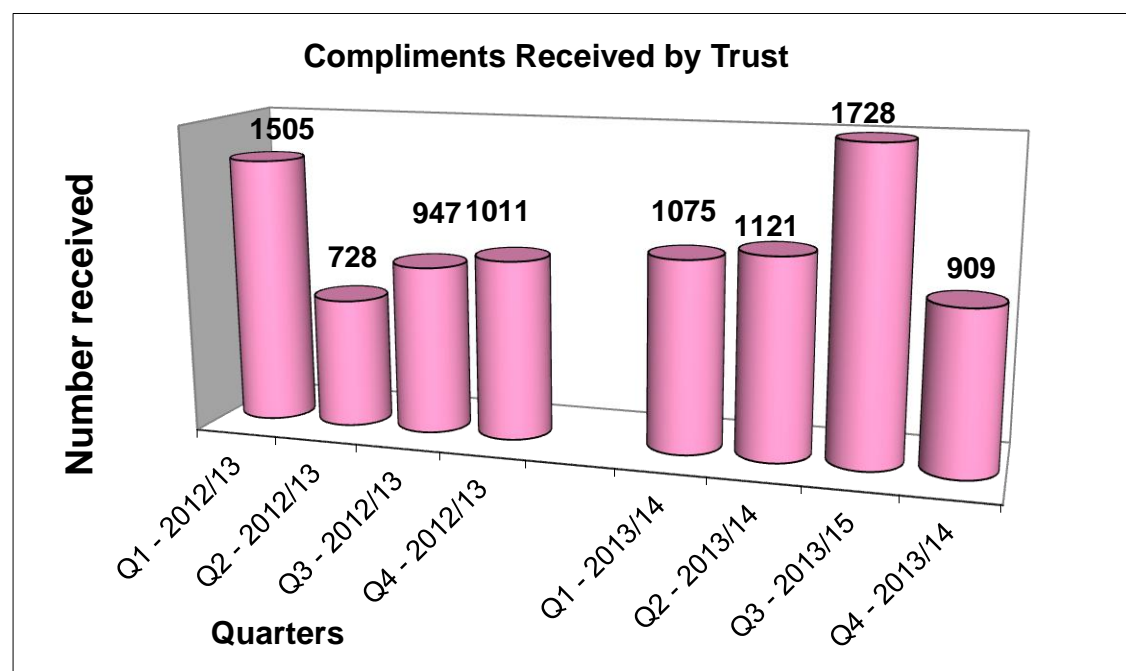
- 12.1 The Trust keeps a register of enquiries from other Trusts or Commissioners that the Partnership Trust may provide information or

assist in other local complaint investigations. There were five requests in Quarter 4 2013/14 which is a decrease of three from the previous quarter.



13. COMPLIMENTS

- 13.1 Each team is asked to provide a quarterly statistical return with copies of the complimentary letters and cards included. These are made available to Board members to view should they wish.
- 13.2 The register of compliments can be found outside the Chief Executive's Office at Trust Headquarters.
- 13.3 The number of compliments received for Quarter 4 2013/14 was 909. This is a decrease of 819 from Quarter 3 2013/14. Williton Community Hospital had the highest return with 97 compliments.



DAWN GODFREY
FOI and Complaints Officer