

| Name of Meeting | Quality Committee | | Meeting Date | | 27 June 2019 |
|--------------------|-----------------------------------|---------------------|-------------------------|------------------------------------|-----------------|
| Title of Report | Complaints Annual Report: 2018/19 | | Agenda Item No. 7 | | 7 |
| Report Author | Janet Smart – Complaints Manager | | Public / Private Item P | | Public |
| GB / Clinical Lead | Dr Majid Azeb | Responsible Officer | | Penny Wo Chief Qua Nursing C | • |

| Executive Summary | Executive Summary | | | | | |
|---|---|---------------|------------|--|-------|---------------------------------|
| Please include a brief summary of the purpose of the report | NHS Calderdale CCG aims to commission high quality services, but occasionally things can go wrong. When they do, it seeks to put them right and learn from the experience to improve services. Complaints are one way of receiving individual perspectives of the service provided and through the outcome of the investigation, areas for improvement identified. This report sets out the position for 2018/19 and details the complaints received broken down by provider, category, level and response timeframe. | | | | | |
| Previous | Name of | ne of Meeting | | | | |
| consideration | meeting Date | | | | | |
| Recommendation (s) | It is recommended that the Quality Committee notes the: i) Complaints received about services commissioned by Calderdale CCG during 2018/19 ii) Categorisation by provider, category, level and response timeframe. | | | | | |
| Decision | △ Assurance | | Discussion | | Other | Click here to enter text. |

| Implications | | | |
|---|--|---|------------------|
| Quality & Safety implicate Equality & Diversity cons | • | None identified. | |
| Public / Patient / Other Engagement | | No implications from this report, however consideration of the annual report and key themes emerging from complaints are an important part of patients' experience. | |
| | Resources / Finance implications (including Staffing/Workforce considerations) | | |
| Strategic Objectives (which of the CCG objectives does this relate to – delete as applicable) | Improving qualityImproving value | Risk (include link to risks) | None identified. |
| Legal / Constitutional Implications | The Local Authority Social Services and National Health Service | Conflicts of Interest (include detail of any identified/potential | None identified. |

| Complaints (England) Regulations 2009 (the Regulations) require all Clinical Commissioning Groups (CCGs) to provide an annual report regarding | conflicts) | |
|--|------------|--|
| complaint activity information. This should include the number and nature of complaints and identify the lessons learned | | |



ANNUAL COMPLAINTS REPORT:

1 April 2018 – 31 March 2019

1. Purpose of Report

- 1.1 The Local Authority, Social Services and National Health Service Complaints (England) Regulations 2009 (the Regulations) require all Clinical Commissioning Groups (CCGs) to provide an annual report regarding complaint activity information. This includes the number and nature of complaints and identifies the lessons learned.
- 1.2 This is complemented by an additional report to Calderdale CCG's Quality Committee at the six month point of the year, outlining complaint, concerns and enquiries activity information.
- 1.3 This report outlines the complaints received by Calderdale CCG between 1 April 2018 and 31 March 2019. This data outlining the total number of complaints received has been compared in the first table for 2016/17 and 2015/16.
- 1.4 In accordance with Yorkshire Audit recommendations made in 2018, the complaints, concerns and enquiries received in 2018/19 have been compared against those received in 2017/18.

COMPLAINTS

Total number of complaints received by Calderdale CCG

| Year | Number received |
|---------|-----------------|
| 2015/16 | 54 |
| 2016/17 | 132 |
| 2017/18 | 152 |
| 2018/19 | 138 |

Complaints - Calderdale CCG

| | 2017/18 | 2018/19 |
|--|-----------|------------|
| Complaints received | 152 | 138 |
| Complaints investigated by Calderdale CCG: | 52 (34%) | 47 (34%) |
| CCG related | 26 (17%) | 39 (83%) |
| Related to other providers | 26 (17%) | 8 (17%) |
| Calderdale CCG responses within | | |
| deadline: | 00 (400() | 0.4 (700() |
| Yes | 22 (42%) | 34 (72%) |

| No | 24(46%) | 11 (23%) |
|-----------------------------|--------------------|--------------------|
| Still Open | 6 (6%) | 2 (5%) |
| Level (section 4 provides a | 78 (52%) - Level 1 | 90 (65%) - Level 1 |
| definition of the levels). | 50 (33%) - Level 2 | 37 (27%) - Level 2 |
| | 22 (14%) - Level 3 | 10 (7%) - Level 3 |
| | 2 (1%) - Level 4 | 1(1%) - Level 4 |

2. Number of complaints investigated

2.1 Of the 138 complaints received by Calderdale CCG in 2018/19, not all were investigated by the CCG. This is for a number of reasons – most commonly because they did not fall within the remit of the Calderdale CCG and were passed to another organisation to investigate.

| Initial Response | 2017/18 | 2018/19 |
|--|---------|---------|
| Investigated by Calderdale CCG | 52 | 47 |
| Passed to another organisation for | | |
| investigation and to respond directly to the | | |
| complainant: | | |
| - W 15111 000 | | |
| - Bradford Districts CCG | 2 | - |
| - Calderdale & Huddersfield NHS | 32 | 27 |
| Foundation Trust - Calderdale Council | 1 | 2 |
| - Greater Huddersfield CCG | 7 | - |
| - Insight Healthcare | - | 1 |
| - North Kirklees CCG | 1 | 1 |
| - NHS 111 | 4 | 2 |
| - Opcare | - | 2 |
| - Primary Care/NHS England | 26 | 33 |
| - South West Yorkshire Partnership | 8 | 5 |
| Foundation Trust | | |
| - Yorkshire Ambulance Service | - | 5 |
| - Other | 19 | 2 |
| Closed due to lack of consent | - | 2 |
| Acting as third party to review | - | 5 |
| For information only | - | 3 |
| On hold | - | 1 |
| TOTAL | 152 | 138 |

3. Number of complaints by provider

- 3.1 Of the 47 complaints investigated by the Calderdale CCG during 2018/19 as Level 2, Level 3 and Level 4 complaints, 39 (shown in the table below) related directly to the Calderdale CCG. This means 8 of the complaints investigated by Calderdale CCG were on behalf of other providers.
- 3.2 Complainants can choose to complain directly to the provider of an NHS service or the commissioner of that service. Where a complaint is received, the complainant is informed of this option and given advice to facilitate their choice.

3.3 Calderdale CCG is always sensitive to a complainant's needs and endeavours to avoid complainants being passed unnecessarily through numerous organisations. In cases where complaints are complex and involve a number of different organisations, the CCG is well placed to co-ordinate a response to a complainant. However, in many instances, a complainant's concerns can be best addressed directly by the provider organisation without the Calderdale CCG acting as an intermediary.

| Provider | 2017/18 | 2018/19 |
|---|---------|---------|
| Calderdale CCG | 26 | 39 |
| Calderdale & Huddersfield NHS Foundation Trust | 7 | 1 |
| Insight Healthcare | 1 | - |
| NHS 111 | 1 | - |
| Leeds Teaching Hospitals NHS Trust | 1 | 1 |
| Opcare | 7 | 2 |
| South West Yorkshire Partnership Foundation Trust | 5 | 1 |
| Weight Management Service | 1 | - |
| Multi providers: | | |
| Calderdale CCG and Calderdale Council | 1 | - |
| Calderdale CCG and Opcare | 1 | - |
| Calderdale CCG and Calderdale & Huddersfield NHS Foundation Trust | - | 1 |
| Insight Healthcare and South West Yorkshire Partnership Foundation Trust | 1 | - |
| Yorkshire Ambulance Service, Calderdale & Huddersfield NHS Foundation Trust and South West Yorkshire Partnership Foundation Trust | - | 1 |
| Calderdale CCG, GP Surgery and Calderdale Council | - | 1 |
| TOTAL | 52 | 47 |

4. Complaints by category

4.1 The 47 complaints investigated by Calderdale CCG during 2018/19 can be categorised as shown in the table below:

| Category of complaint | 2017/18 | 2018/19 |
|---|---------|---------|
| Aids, appliances, equipment, eg wheelchairs | 7 | 3 |
| Appointments | 6 | 1 |
| Attitude of staff | 2 | 1 |
| Care and treatment | 7 | 4 |
| Commissioning decisions made by Calderdale | 1 | 6 |
| CCG | | |

| Communication | - | 1 |
|-------------------------------|----|----|
| Confidentiality | 1 | 2 |
| Continuing Healthcare process | 15 | 9 |
| Delays in diagnosis | - | 1 |
| IFR process | - | 2 |
| Patient records | - | 1 |
| Prescribing | 10 | 9 |
| Referrals | 1 | 1 |
| Reimbursement of costs | 1 | 1 |
| Travel expenses | - | 1 |
| Treatment charges | - | 2 |
| Waiting times | - | 1 |
| Weight management | 1 | 1 |
| TOTAL | 52 | 47 |

4.2 Of the 47 complaints, 18 fell within the following 2 categories and are broken down below:-

Prescribing – 9 complaints

7 of the complaints related to the changes made to the repeat prescription ordering services in February 2018 and 2 related to other medication prescribing matters.

Continuing Healthcare Process – 9 complaints

All the 9 complaints related to issues connected with the process followed by Calderdale CCG's Continuing Healthcare team.

5. Complaints by level

5.1 All complaints received by Calderdale CCG are classified into a category level based on guidance within the Calderdale CCG Complaints Policy. The definitions of each level are as follows:

Level 1- Simple complaints

- How to make a complaint
- The correct NHS Trust and services to deal with the complaint
- Appointments

Level 2 – Low/simple, non-complex issues

- Delayed or cancelled appointments
- Event resulting in minor harm e.g. cut or strain
- Loss of property
- Lack of cleanliness
- Transport problems
- Single failure to meet care needs e.g. missed call back
- · Medical records missing

<u>Level 3 – Moderate /complex, several issues relating to a short period of care)</u> requiring a written response and investigation by provider

- Event resulting in moderate harm (e.g. fracture)
- · Failure to meet care needs
- Miscommunication or misinformation
- Medical errors
- Incorrect treatment
- Staff attitude or communication

<u>Level 4 – High/complex multiple issues relating to a longer period of care, often involving more than one organisation or individual requiring a written response</u> and investigation by provider

- Event resulting in moderate harm (e.g. fracture)
- Event resulting in serious harm (e.g. neglect)
- Failure to meet care needs
- Miscommunication or misinformation
- Medical errors
- Incorrect treatment
- Staff attitude or communication
- 5.2 The table below shows the classification of complaints received.

| Level of complaint | 2017/18 | 2018/19 |
|--------------------|---------|---------|
| Level 1 | 78 | 90 |
| Level 2 | 50 | 37 |
| Level 3 | 22 | 10 |
| Level 4 | 2 | 1 |
| Total | 152 | 138 |

5.3 The data indicates the number of complaints, concerns and enquiries slightly reduced during 2018/19. Level 3 complaints particularly decreased during the period. The Complaints Manager does not have evidence why this is the case, though an improvement in provider responses was noted around during the year.

6. Complaints by deadline

- 6.1 The Calderdale CCG standard for complaints investigation, as outlined in the Complaints Policy, is that all complaints received are acknowledged in writing within three working days. Once the appropriate consent is received back from the complainant and areas for investigation are outlined, complainants are advised of the date by which they can expect a response to their complaint.
- 6.2 The standard timeframe given is 3-5 working days for a Level 1 complaint; 5-10 working dates for a Level 2 complaint and 40 working days for a Level 3 and Level 4 complaint. Complainants are kept updated on progress where it is not possible to meet the initial timeframe deadline and an explanation of the delay is provided.
- 6.3 The tables below show whether the final response was sent to the complainant within the original agreed timeframe, both overall and by the investigating provider.

| Final Response sent within agreed timeframe | 2017/18 | 2018/19 |
|---|---------|---------|
| Yes | 22 | 34 |
| No | 24 | 11 |
| Still Open | 6 | 2 |
| Total | 52 | 47 |

| Final Response sent within agreed timeframe by Provider during 2018/19 | Yes | No | Still Open |
|---|-----|----|------------|
| Calderdale CCG | 29 | 9 | 2 |
| Calderdale & Huddersfield NHS Foundation Trust | 1 | - | 0 |
| Opcare | 3 | | 0 |
| Multi agency: Yorkshire Ambulance Service, Calderdale & Huddersfield NHS Foundation Trust and South West Yorkshire Partnership Foundation Trust | - | 1 | 0 |
| Multi agency: Calderdale CCG, GP Surgery and Calderdale Council | - | 1 | 0 |
| Multi agency: Calderdale CCG and Calderdale & Huddersfield NHS Foundation Trust | 1 | - | 0 |
| Total | 34 | 11 | 2 |

- 6.4 In 2018 Calderdale CCG saw an improvement in complaints being responded to within deadline. This was partly due to changes made to the complaint handling timescales and sign off process in the latter part of 2018.
- 6.5 In the 11 instances where Calderdale CCG did not send the response to the complaint within the agreed timeframe, 2 of the delays were due to the complexity of the cases. 7 of the delays were due to further information being sought from the investigator following the Complaints Manager's quality review of the initial investigation comments. This is not necessarily due to the standard of the information provided but the analysis and explanation of why things might have gone wrong. The Complaints Manager supports investigators to understand this requirement.
- 6.6 The 2 multi-provider complaint responses were not sent within the agreed timeframe due to the complex, multiagency aspect of the complaints and the need to seek more information from the provider following the Complaints Manager's quality review of the initial investigation comments.
- 6.7 In all the 11 cases, the complainant was contacted prior to the agreed response date to advise that the complaint was still underway. They were also provided with an explanation why this was the case.

6.8 The 2 cases which are still ongoing and within timeframe.

7. Parliamentary and Health Service Ombudsman

- 7.1 Any complainant who remains dissatisfied with the Calderdale CCG's handling of their complaint has the right to contact the Parliamentary and Health Service Ombudsman (PHSO). Information on how to do this is provided to all complainants as part of the CCG's response to each complaint.
- 7.2 The PHSO has not carried out any full reviews of complaints they received during 2018/19.

8. Learning from complaints

8.1 Calderdale CCG is committed to learning from complaints and wherever possible complaint responses include a section which highlights the learning from the complaint and how this will be shared or used in the future. This has been demonstrated by, for example, the CHC team who have made changes to their administration process as a result of complaints received about their service.

9. Internal Audit

- 9.1 In December 2017 the Calderdale CCG complaints process was audited by NHS Audit Yorkshire. The objective of the audit review was to gain assurance that the CCG is effectively involved in the quality management of patient complaints. A sample of ten complaints was reviewed to confirm that Calderdale CCG is complying with Local Authority Social Services and NHS Complaints statutory duties.
- 9.2 The overall audit gained Significant Assurance that Calderdale CCG has sound systems and processes in place in relation to complaints management. However, a number of recommendations were made to strengthen the complaints handling process. These were all fully implemented by the Complaints Manager during 2018 and this included ensuring that annual reporting is supported by previous year's data for the purpose of identification of any trends or implications for complaints management.

10. Provider and GP Practice Assurance on Complaints Handling

- 10.1 Assurance on how our main providers; Calderdale & Huddersfield NHS Foundation Trust, South West Yorkshire Partnership Foundation Trust and NHS111, manage complaints is provided in the Quality and Safety dashboard which is presented to the Quality Committee. It should be noted that providers are facing challenges in responding within timeframe, there are a number of reasons for this and Committees are updated on the actions being taken.
- 10.2 Assurance on GP practice complaints handling remains a function of NHS England, however, practices are required to complete an annual return providing NHS England with numbers and subject matter of complaints. Calderdale CCG receives feedback on submissions and in 2018/19, 100% of our practices completed the submission.