

Local Services, Local Solutions



Complaints & Compliments Annual Report 2012/2013

Chief Executive's Foreword



I am pleased to present SEPT's Complaints & Compliments Annual Report for 1 April 2012 to 31 March 2013.

Here at SEPT we strive to provide the highest quality services we can, ensuring the experience individuals have while using our services is the best we can offer. I believe for most people we fulfil this aim, however for some, I recognise what they have experienced falls short of this standard. I am always sorry when this is the case but I welcome the feedback individuals provide about what went wrong for them and how we can improve the service for others.

We aim at all times to provide local resolutions to complaints and take all complaints seriously. We listen carefully, we are open, honest and transparent in our responses and welcome the opportunity to do all that we can to put things right. Our complaints system gives the opportunity for complainants to meet with managers to discuss their concerns and we ensure that staff are made aware if concerns are raised about them and encourage them to look at ways they can change their practice or behaviours where appropriate.

We are a learning organisation. We recognise the importance of lessons that can be learned from complaints and use this invaluable feedback to reflect on our patient care and take immediate actions to improve services as a result of the complaints we receive. We take the lessons learned from complaints to change and improve the services we provide. Some of the most significant service changes we have made have been as a direct result of a complaint we have received and this report outlines some of those service improvements we have made.

Complaints handling and any trends or themes identified from them are monitored by the Executive Team and the Board of Directors. Our Non-Executive Directors undertake monthly reviews of complaints to monitor how responsive we are to complainants and how well we address the concerns they raise.

I continue to be proud of the number of compliments I receive about our staff and think it is important that this positive feedback is communicated across the

organisation, ensuring that where we have got it right we transfer this approach into other areas.

The Trust continues to be proactive in its management of complaints and is currently taking the opportunity to review and simplify our Complaints Policy and Procedures to ensure they are fit for purpose and encompass the diversity of Mental Health and Community Services.

A handwritten signature in black ink that reads "Patrick Geoghegan". The signature is written in a cursive style with a large initial 'P' and a checkmark-like flourish at the end.

Dr. Patrick Geoghegan, OBE
Professor of Mental Health and Social Care
SEPT

SEPT COMPLAINTS ANNUAL REPORT 2012/2013

1.0 INTRODUCTION

This is the Complaints Annual Report for South Essex Partnership Foundation Trust (SEPT) for the period 1 April 2012 to 31 March 2013. When dealing with complaints the main purpose for the Trust is to remedy the situation as quickly as possible and ensure the individual is satisfied with the response they receive. It is important that individuals feel that they have been fairly listened to, treated with respect and any issues raised have been satisfactorily resolved within agreed timescales.

South Essex Partnership Trust provides Mental Health services to people in South Essex and Bedfordshire and Luton. The Trust also provides Community Healthcare in South East Essex, West Essex and Bedfordshire. From October 2012, SEPT, in partnership with SERCo, took over responsibility for delivering Suffolk Community Healthcare Services for Podiatry, Speech and Language Therapy and Children's Services.

The Trust covers an overall population of 2,365,898.

It is worthy of note that the number of compliments the Trust receives annually, far outweighs the number of complaints it receives about the services the Trust provides.

The time limit for making a complaint as laid down in the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 is currently 12 months after the date on which the subject of the complaint occurred or the date on which the matter came to the attention of the complainant.

An acknowledgement of the received complaint is made within 3 working days, to acknowledge the complainant's concerns. The appointed investigator will then contact the complainant to agree a realistic timescale in which the complaint should be resolved. This decision is based on the type and complexity of the complaint allowing a swift response to 'straightforward issues', whilst at the same time allowing an achievable response time to be set for complex and cross-organisational or cross-Trust complaints.

The complaints legislation indicates that 'the Trust must investigate the complaint in a manner appropriate to resolve it speedily and efficiently and keep the complainant informed'. When a response is not possible within the agreed timescale, a new completion date should be agreed with the complainant, who, in addition, must be kept informed of progress throughout the investigation.

Although the legislation provides a more flexible agreement with each complainant, SEPT aims to provide a response in as timely a manner as possible setting an internal benchmark of 30 days.

The Trust aims to remedy complaints locally through investigation and meetings if appropriate, however if the complainant remains dissatisfied they have the right to

refer their complaint to the Parliamentary and Health Service Ombudsman (PHSO) as the second stage.

The complaints function is part of the business management and customer service support work stream in Corporate Affairs and Customer Services.



2.0 NUMBER OF FORMAL COMPLAINTS RECEIVED

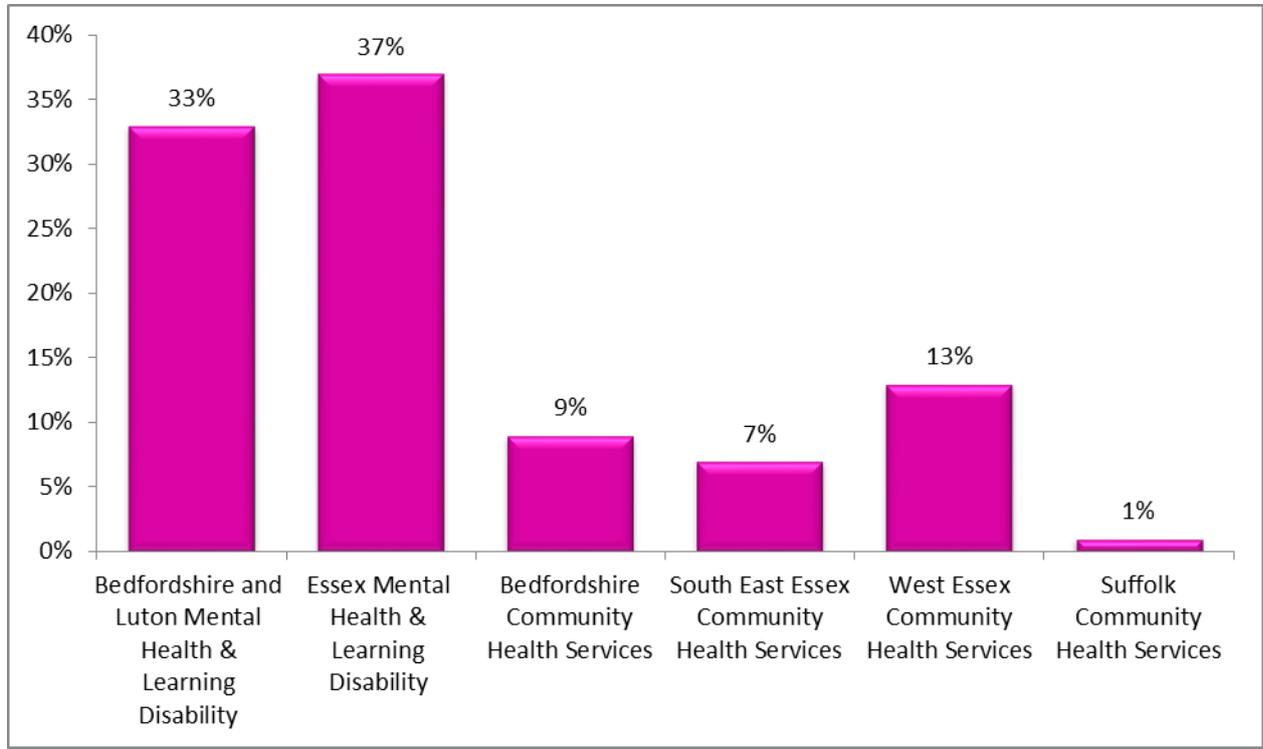
A total of 434 formal complaints were received by the Trust during 2012/2013. As this is the first year since the integration of Community Services, a comparison to the previous year is not possible. However, there has been an increase of 18 complaints (4%) for Mental Health Services for 2012/13. To date the number of active complaints is 56, which is a decrease of 56 from the previous year.

The following table illustrates the number of complaints received by area.

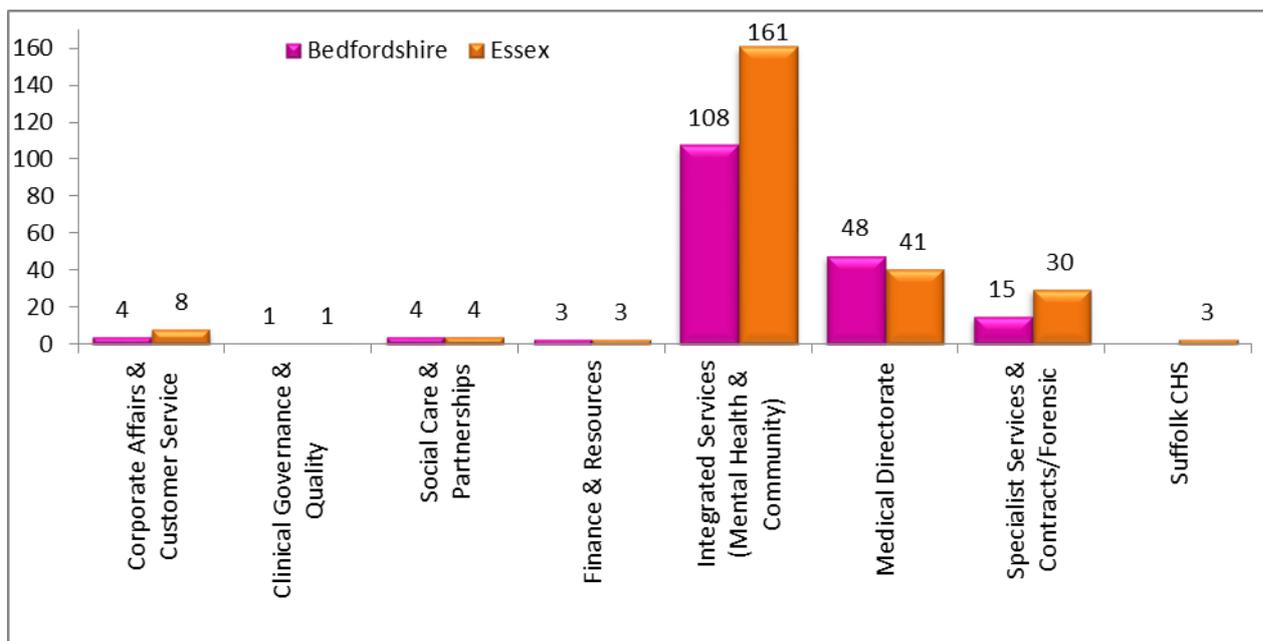
Area	Number of Complaints Handled	
	2012/13	2011/12
Mental Health – Bedfordshire & Luton	143	127
Mental Health – Essex	161	159
Total Mental Health	304	286
Community - Bedfordshire	40	38 (since 1.9.2011)
Community – South East Essex	30	28 (since 1.8.2011)
Community - West Essex	57	29 (since 1.8.2011)
Community – Suffolk	3	N/A
Total Community	130	95

The following charts illustrate the percentage of complaints by Trust area and the amount received by Directorate.

Complaints by Areas



Complaints by Directorate



3.0 NUMBER OF COMPLAINTS UPHELD/PARTIALLY UPHELD

A total of 505 complaints were closed during the year.¹ Of these, 77 were upheld, 222 were partially upheld and 137 were not upheld. The remaining 69 were either withdrawn or resolved locally. If a complaint has several issues raised, it is recorded as partially upheld if one element is upheld even if most elements are found not to be justified. Last year's figures are in brackets for Mental Health, the Community figures were not available for last year.

Area	Number of Complaints Upheld	Number of Complaints Partially Upheld	Not Upheld	Total
Mental Health – Bedfordshire & Luton	26 (19)	62 (29)	46 (11)	134
Mental Health – Essex	19 (15)	82 (44)	64 (43)	165
Community – Bedfordshire	14	28	10	52
Community – South East Essex	4	14	8	26
Community – West Essex	14	34	8	56
Community – Suffolk	0	2	1	3

4.0 NUMBER OF COMPLAINTS RESOLVED WITHIN AGREED TIMESCALE

The following table shows the number of complaints resolved within timescales agreed with the complainant.²

The majority of the complaints closed outside of the agreed timescales were either complex ones which involved multiple services, complaints involving several organisations or those which raised additional issues during the course of the investigation.

One of our aims for 2013/14 is to build on the considerable work already undertaken to improve response timescales.

Area	Closed within agreed timescale	Percentage
Mental Health - Bedfordshire & Luton	111	66%
Mental Health - Essex	148	80%
Community - Bedfordshire	44	80%
Community – South East Essex	26	93%
Community – West Essex	49	77%
Community – Suffolk	2	67%

¹ The numbers of upheld and partially upheld complaints are based on the number of complaints closed during the period

² The Trust is introducing 30 days as well as agreed timescales as a further quality indicator

5.0 NUMBER OF COMPLAINTS REFERRED TO THE PARLIAMENTARY & HEALTH SERVICE OMBUDSMAN (PHSO)

Under the current complaints legislation, Trusts have six months in which to endeavor to resolve a complaint to the complainant's satisfaction. If the complainant remains dissatisfied with the response they receive, they can ask the Ombudsman to independently review their complaint.

The Ombudsman may:

- Refer the complainant back to the Trust to complete 'local resolution'
- Ask the Trust to consider if further local resolution is an option
- Request the case file for screening assessment
- Having assessed the case file, decide not to investigate further
- Having assessed the case file, appoint an Investigating Officer to carry out a review 'on paper'

During 2012/13 a total of 17 complaints were referred to the Parliamentary & Health Service Ombudsman and no further actions or recommendations were made on 10 of these.

To date, there are 8 active cases with the PHSO. One complaint from Bedfordshire and Luton has been under investigation since 2011. Notification is awaited on the remaining 7 active cases.

The table below illustrates the area which the complaints referred to the PHSO:

Area	Number of Complaints Referred	Comments
Mental Health - Bedfordshire & Luton	3	2 not investigated. 1 still awaiting notification as to whether it will be investigated.
Mental Health - Essex	8	3 not investigated. 5 awaiting notification as to whether they will be investigated.
Community - Bedfordshire	2	2 not investigated.
Community – South East Essex	1	Not investigated.
Community – West Essex	3	2 not investigated. 1 awaiting notification as to whether it will be investigated.
Community - Suffolk	0	

Last year, the Trust had 5 complaints referred to the PHSO and no actions or recommendations were made in respect of 4 of these. The remaining complaint is still currently under investigation by the PHSO. The complaints referred were; 2 for Bedfordshire and Luton Mental Health Services and 3 for Essex Mental Health Services.

6.0 NUMBER OF FORMAL COMPLAINTS RECEIVED BY PCT AND LOCAL AUTHORITIES

The table below demonstrates the number of complaints received by PCT area per quarter. The figures in brackets are last year's totals for comparison. There are no comparisons available for Community Services.

PCT	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Mental Health				
NHS Bedfordshire	19 (15)	39 (17)	31 (22)	32 (26)
NHS Luton	6 (10)	7 (19)	5 (6)	7 (11)
NHS South East Essex	20 (13)	16 (12)	10 (15)	15 (16)
NHS South West Essex	24 (24)	29 (26)	23 (16)	20 (33)
N/A	1	0	0	0
<ul style="list-style-type: none"> 2 Forensic complaints for Essex referred to Bedfordshire Service user and 1 to Luton Service User 				
Community Services				
NHS South East Essex	5	13	4	5
NHS South West Essex	0	1	0	1
NHS Bedfordshire	9	10	15	5
NHS West Essex	12	23	9	13
NHS Suffolk	0	0	1	2
N/A	1	1	0	0

The table below demonstrates the number of complaints received per CMHT aligned to their respective Local Authority. The figures in brackets are last year's totals for comparison.

	Essex County Council	Southend Borough Council	Thurrock Council	Total
Quarter 1	4 (6)	7 (3)	3 (0)	14 (9)
Quarter 2	4 (2)	4 (1)	1 (0)	9 (3)
Quarter 3	2 (1)	1 (0)	3 (1)	6 (2)
Quarter 4	5 (4)	3 (6)	1 (1)	9 (11)
Totals	15 (13)	15 (10)	8 (2)	38 (25)

	Bedford Borough Council	Central Bedfordshire	Luton Borough Council	Total
Quarter 1	3 (10)	0 (1)	2 (2)	5 (13)
Quarter 2	3 (4)	4 (1)	2 (2)	9 (7)
Quarter 3	6 (0)	1 (0)	0 (0)	7 (0)
Quarter 4	4 (1)	0 (0)	2 (1)	6 (2)
Totals	16 (15)	5 (2)	6 (5)	27 (22)

7.0 NATURE OF COMPLAINTS RECEIVED

The top three themes for complaints for both mental health and community during 2012/2013 were; unhappy with treatment, staff attitude and communication.

The top three themes for the Trust also apply nationally across the spectrum of health services. The figures in brackets are last year's totals for comparison.

Top Three Complaint Themes	Total Number of Complaints Received (2012 / 2013)	Upheld	Partially Upheld	Total
Unhappy with Treatment	61 (195)	11 (2)	23 (28)	34 (30)
Staff Attitude	97 (81)	10 (8)	43 (17)	53 (25)
Communication	40 (35)	8 (10)	14 (7)	22 (17)

Of the 61 complaints received in respect of those unhappy with treatment a total of 34 were either upheld or partially upheld. The category 'unhappy with treatment' covers a wide spectrum. In some cases, complainants had a fixed idea of the course of treatment they should receive; however, this was contrary to their clinical need. The Trust was therefore limited in providing solutions to these.

Of the 97 complaints received regarding staff attitude a total of 53 were either upheld or partially upheld. Of the 40 complaints received regarding communication a total of 22 were either upheld or partially upheld.

Although the number of complaints citing unhappy with treatment has decreased from last year the amount of upheld/partially upheld has increased considerably for all categories.

Any trends and themes regarding treatment, areas of work and staff, named in complaints are analysed and monitored through a quarterly thematic report.

8.0 NUMBER OF RE-OPENED COMPLAINTS

During 2012/13 a total of 67 complaints were reopened as the complainant was dissatisfied with the Trust's response to their complaint. The table below illustrates the areas that the complaints relate to. This is the first year that re-opened complaints have been recorded.

Area	Number
Mental Health – Bedfordshire & Luton	20 (30%)
Mental Health - Essex	30 (45%)
Community - Bedford	7 (10%)
Community – South East Essex	3 (4%)
Community – West Essex	7 (10%)

9.0 NUMBER OF COMPLAINTS REVIEWED BY NON-EXECUTIVE DIRECTORS

A total of 45, (42 in 2011/12) Non-Executive Director reviews of formal complaints were carried out and 36 of these resulted in comments and observations being made about the investigation. Copies of reviews are sent to the relevant Director. During 2012 the NEDs review process was reviewed to take into account the integration of the Community Services. Two NEDs now undertake a total of two reviews each per month (two for Mental Health Services and two for Community Services).

“ OK, you caught me!
No more jargon I promise!”



SEPT deals with
400,000 people from
across the community.
None of them speaks in
jargon so neither do we.

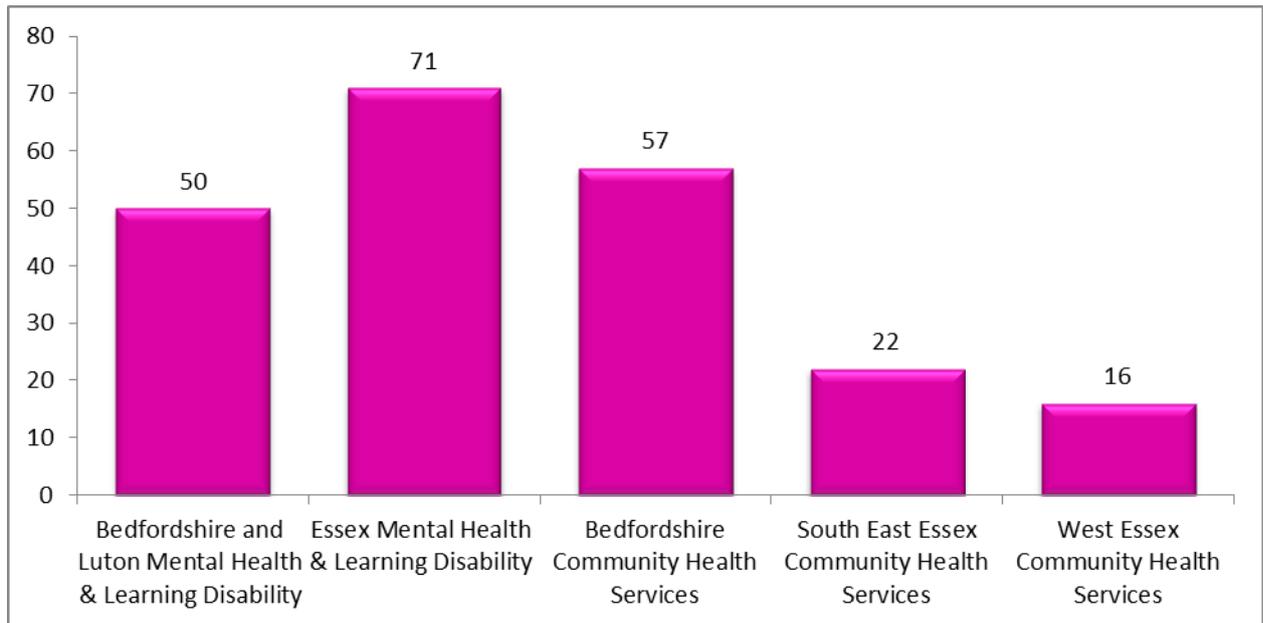
10.0 NUMBER OF LOCAL RESOLUTIONS RECORDED

Complaints recorded as those resolved locally are usually carried out by front line staff who are able to resolve the client's concerns/issues to their satisfaction, in a timely manner.

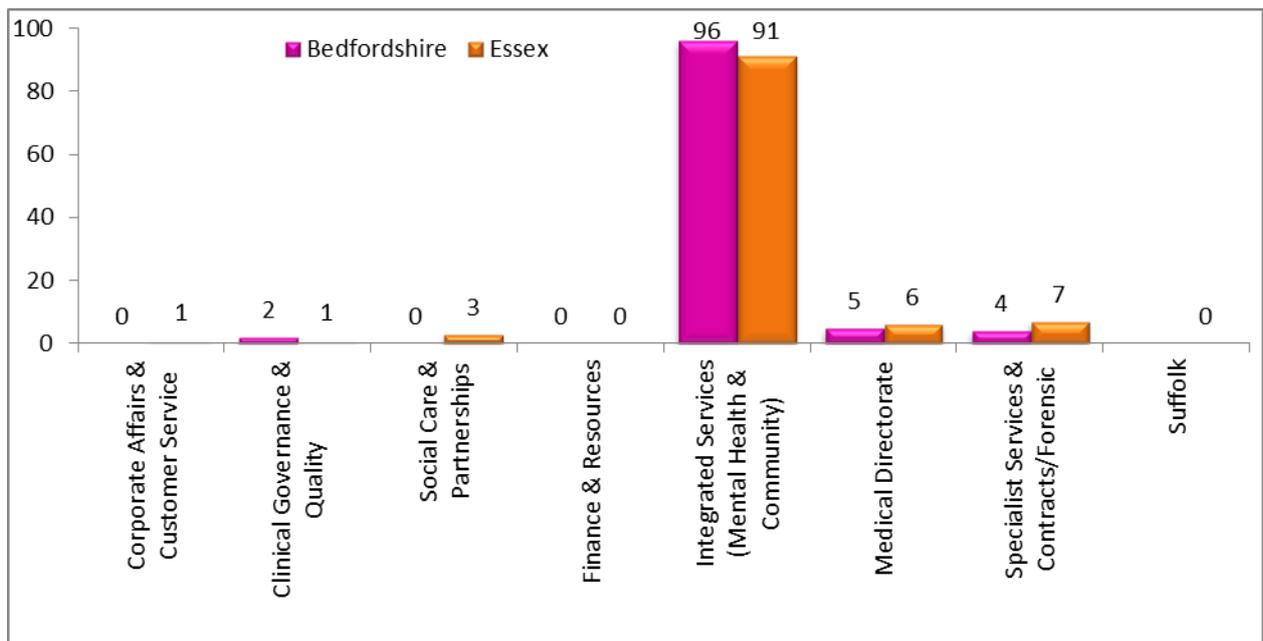
The Trust actively encourages front line staff to deal with concerns as they arise so that they can be remedied promptly, taking into account the individual circumstances at the time. This timely intervention can prevent an escalation of the complaint.

There were a total of 216 local resolution complaints recorded for the year. This is an increase of 101 on the previous year.

Local resolution by areas:



Local resolution by Directorate:



11.0 MATTERS OF GENERAL IMPORTANCE ARISING OUT OF COMPLAINTS

Looking at trends, the largest category of complaints overall is in relation to staff attitude of which 53 have been upheld/partially upheld.

In contrast, unhappy with treatment is the category with the highest proportion of complaints being upheld/partially upheld at 56%.

The percentage of complaints relating to staff attitude has increased this year. Staff attitude can often be the complainant's perception of the way they were addressed or treated by staff. Service users across all areas are using the same terminology to describe their perception of some staff, with rudeness, arrogance and lack of concern being the most common.

As a means of addressing this issue, the appropriate members of staff have received further Customer Service Training as well as enhanced supervision.

The "unhappy with treatment" category includes; the type or amount of medication given, being discharged without a referral to therapy, the type of dressings used and inadequate care on the wards.

Throughout the year staff attitude and communication has been a cause of concern in letters of complaint. This has mainly been rudeness on the telephone or face to face. There have been a disappointing number of complaints stating that they do not feel they have been listened to; this applies to patients, carers and relatives who also feel that any changes to care plans or ward accommodation is not communicated to either them or other appropriate agencies.

The Trust has set out values and standards of behaviour expected. Any members of staff who do not reach these standards will undertake a customer care training workshop and will be monitored closely under supervision. In addition, during February and March 2013, a series of listening exercises were held where patients, carers and staff were given the opportunity to let us know what is of value to them, what we do well and what we could do better. Their feedback will be incorporated into the review of the Customer Service Strategy.

A quarterly cumulative thematic report is produced to enable the Trust to monitor any themes or trends arising from complaints throughout the year, so that any issues can be addressed accordingly.

12.0 ACTIONS TAKEN TO IMPROVE SERVICES AS A RESULT OF THE COMPLAINTS RECEIVED
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The Trust recognises the importance of lessons that can be learned from complaints, and the Trust wide value in sharing these with appropriate members of staff.

To ensure organisational learning from complaints, any recommendations made following investigation of a complaint are recorded and monitored. An action log is kept to ensure that any recommendations from complaint investigations are implemented. As a means of monitoring this, a summary is presented to the Lessons Learned Group on a bi-monthly basis.

The commissioners of SEPT's services also receive a quarterly report on the lessons learned from complaints originating from their specific geographical areas.

The table below highlights a selection of some of the lessons learned from complaints over the past year.

What our patients said	What we did
There is a gap in services for people with both mental health and substance misuse problems.	A Dual Diagnosis Action Group is currently being set up with the aim of improving the care pathway for people who need to access more than one service within the Trust.
The current system for arranging appointments is not providing an efficient service for patient access	The booking system is currently being reviewed. In the meantime, patients will be provided with a future appointment date when they attend clinic.
There is a lack of End of Life care communication between professionals	We are in the process of reorganising the Community Nursing Teams ensuring that staff are aligned closely to GP practices
There is a lack of Occupational Health activities for inpatients.	The unit will have an activities coordinator in future and this will provide an enhanced activity programme for service users.
A complainant was upset by the questions asked about an attendance at A&E during a development check.	The Children's Services Team have reviewed how they undertake development checks; reviewing how they explain the purpose of the check and the reasons for the questions being asked.

We continue to review the lessons learned process and have introduced systems of robust trend analysis in order to enable the Trust to monitor and act upon any recurring themes. One of our corporate objectives this year will be to ensure that lessons learned are embedded into service delivery and that the process is included in the review of the Complaints Policy & Procedure.

13.0 NUMBER AND NATURE OF COMPLIMENTS RECEIVED

A total of 3632 compliments were received during 2012/13. This equates to 1075 for Mental Health Services and 2557 for Community Health Services. Mental Health Services have seen an increase in compliments this year and Community Services have experienced a decrease on last year's total.

It is important to share positive feedback and all staff are encouraged to send the compliments they or their service receive to be logged and reported on. Compliments are reported monthly in the Trust's Quality Report, which is presented at Trust Board level, and also to the relevant Primary Care Trusts. All compliments received are also displayed on the Trust's intranet.

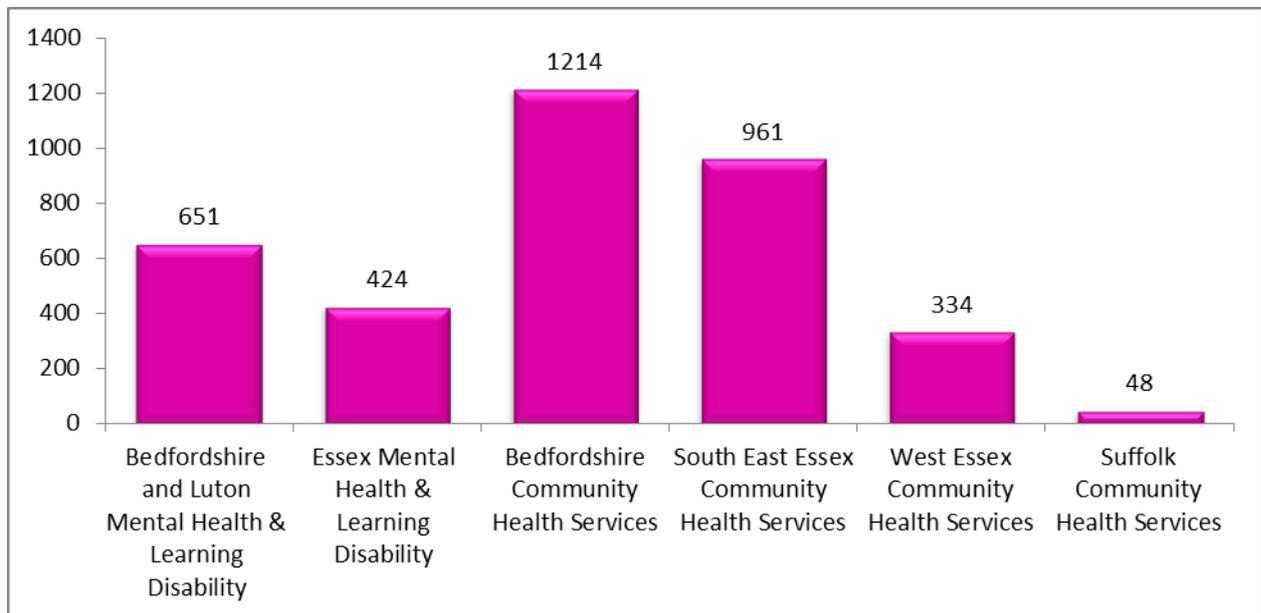
It should be noted that the number of compliments received verbally cannot be realistically counted.

The top two categories of compliments received are the same nationally as locally, and as in previous years, are appropriate care and treatment and staff attitude.

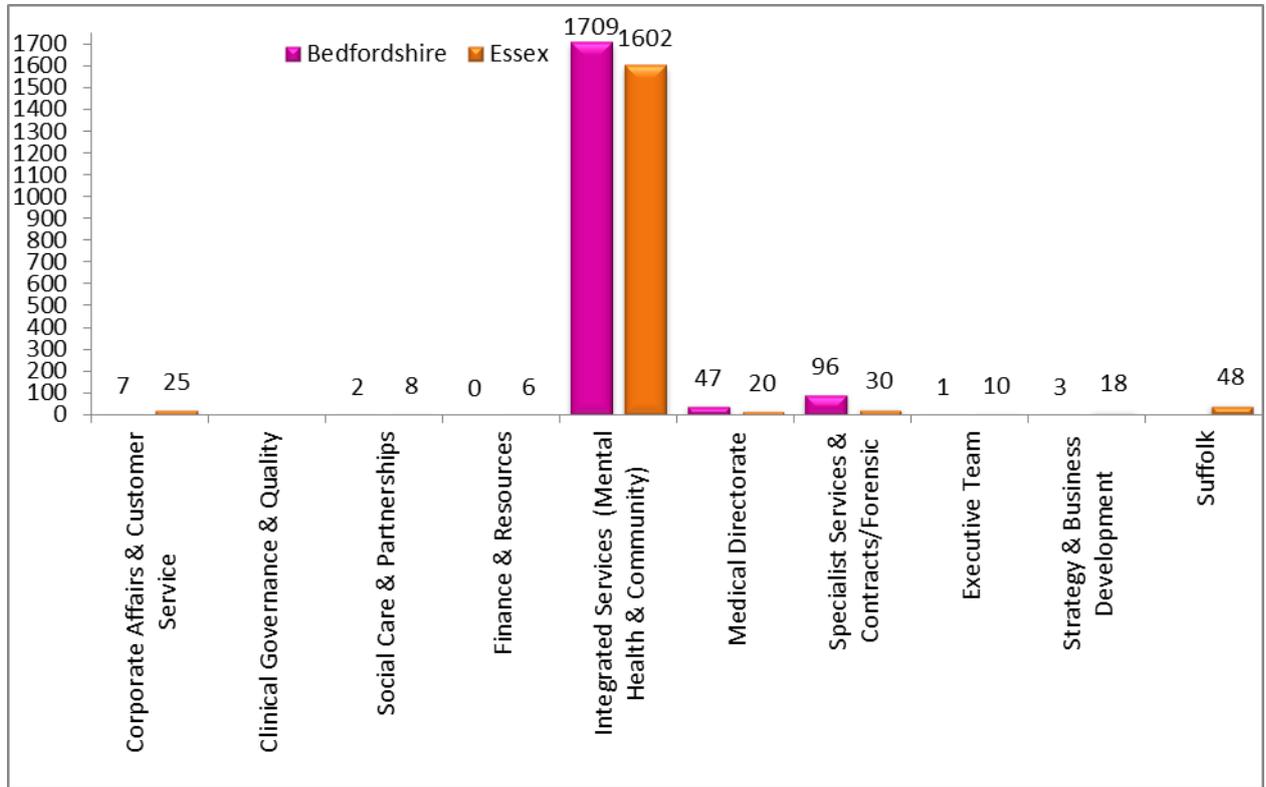
It is worth noting that these categories are also the same top two categories that are received for complaints.

Area	Number of Compliments Received	
	2012/13	2011/12
Mental Health – Bedfordshire & Luton	651	275
Mental Health - Essex	424	281
Community - Bedfordshire	1214	619 (from 1.9.2011)
Community – South East	961	1812 (from 1.8.2011)
Community - West Essex	334	26 (from 1.8.2011)
Community – Suffolk	48	N/A

Number of compliments received by area;



Number of compliments received by Directorate



“ Thank you so much for all your care during this last year. I don't know what we would have done without your help and support. Our mother is well and happy. So from all of us a very big thank you ”

“ Dr Chandraraj was a dream, so dedicated, so passionate, so positive and awe-inspiring. Her presentation was verbally quick but I took it all in as she was such a joy to listen to. ”

“ Thank you so much for all your care during this last year. I don't know what we would have done without your help and support. ”

“ I would like to say thank you so very much for talking with my husband this morning. I cannot tell you how reassuring this has been for us. I feel that at last someone is listening. I feel hopeful for the first time since he began treatment at eighteen years old. I will always be saddened by all the years that he has lost, but I am now hoping that he will receive the help that he needs. Thanks. ”

“ To all the Nurses who took such good care of my husband for the last three years. Nothing was too much trouble, no one could have asked for more. Thank you. ”

“ My wife and I would like to express our gratitude and appreciation for the superb care given to our daughter. All the doctors and staff looked after her in the best possible way and nothing was too much trouble in helping her overcome her problems ”

“ Many, many thanks for all you have done to help our daughter through a very difficult time. She was in a thousand pieces but bit by bit, we have seen her putting herself back together, with your guidance. We are delighted. ”

“ Thanks for your kindness and care of our Aunt. We really appreciate it. It is so reassuring for us when she is with you. The student nurse feeds her so nicely. ”

14.0 KEY ACHIEVEMENTS in 2011/2012

- The Trust has continued to expand this year taking on the management of a small section of Suffolk Community Health Services; their complaints and compliments have been harmonised with the Trust's existing services.
- All complaints and compliments across the Trust are now logged and reported centrally.
- A series of complaints master classes has taken place across the Trust, and 95 members of staff who undertake investigations have participated in this training. The workshop highlighted the need to use root cause analysis thus ensuring robust complaint responses.
- Compliments have a section on the Trust Intranet to enable colleagues to view the positive comments made about the services the Trust provides.
- Complaints leaflets covering Mental Health and Community Services and comments cards/posters are displayed in all service areas.
- Relationships with external agencies, local authorities and PCTs have been developed and best practice is shared.
- A Cumulative Thematic Report has been introduced and presented to the Integrated and Quality Governance Committee on a quarterly basis. This enables the Trust to monitor any emerging themes and trends and to action accordingly.
- Monthly and Quarterly reports are produced for PCTs on a regular basis to provide assurance around the complaints handling process.
- Development of a more proactive complaints process, advising Directors of their open complaints situation on a weekly basis.
- Development of Complaints Team knowledge of Datix, complaints handling, complaints legislation and local and national complaints networks.
- Increased the number of complaints being responded to in agreed timescales.

15.0 AIMS FOR 2013/2014

- We will ensure that the recommendations by Robert Francis QC in respect of complaint handling are adopted by the Trust.
- Continue to be open and transparent in complaint responses.
- Review and simplify the Complaints Policy and Procedures in line with Department of Health guidelines, recommendations in the Francis Report and ensuring it encompasses the diversity of Mental Health and Community Services.
- Ensure that lessons learned from complaints are embedded into service delivery.
- A further two complaints master classes will take place to train senior staff new to complaints investigations.
- Implement new Datix web system and tailor to maximum effect for reporting and trend analysis.
- Build on the work already undertaken to improve response timescales aiming for 30 day turnaround.
- To increase the number of local resolutions to complaints.
- Continue to develop relationships with stakeholders across Essex, Bedfordshire and Suffolk.

16.0 CONCLUSION

The Trust continues to be proactive in its management of complaints and recognises that complaints provide invaluable feedback about the services we provide.

Work during 2013/14 will continue to build on that already undertaken this year, focussing on ensuring that lessons are learned from complaints and concerns. The Trust will continue to seek assurance that all actions have been undertaken and changes are made to service delivery where appropriate.

There will be new challenges and changes from April 2013 for the Trust's complaints processes.

- The PHSO are launching their 5 year strategy, this will include investigating more complaints than previously, which will impact on the Trust's reporting data.
- The PCTs will become Clinical Commissioning Groups (CCGs); therefore there will be changes to the way joint complaints are handled.
- The Independent Complaints Advocacy Service (ICAS) will be funded and commissioned by local authorities. This means that in some areas of the Trust there will be a new provider of the health complaints advocacy service.

Kay Richards
Associate Director
Business Management &
Customer Service

Pam Madison
Customer Service
Improvement Manager

April 2013