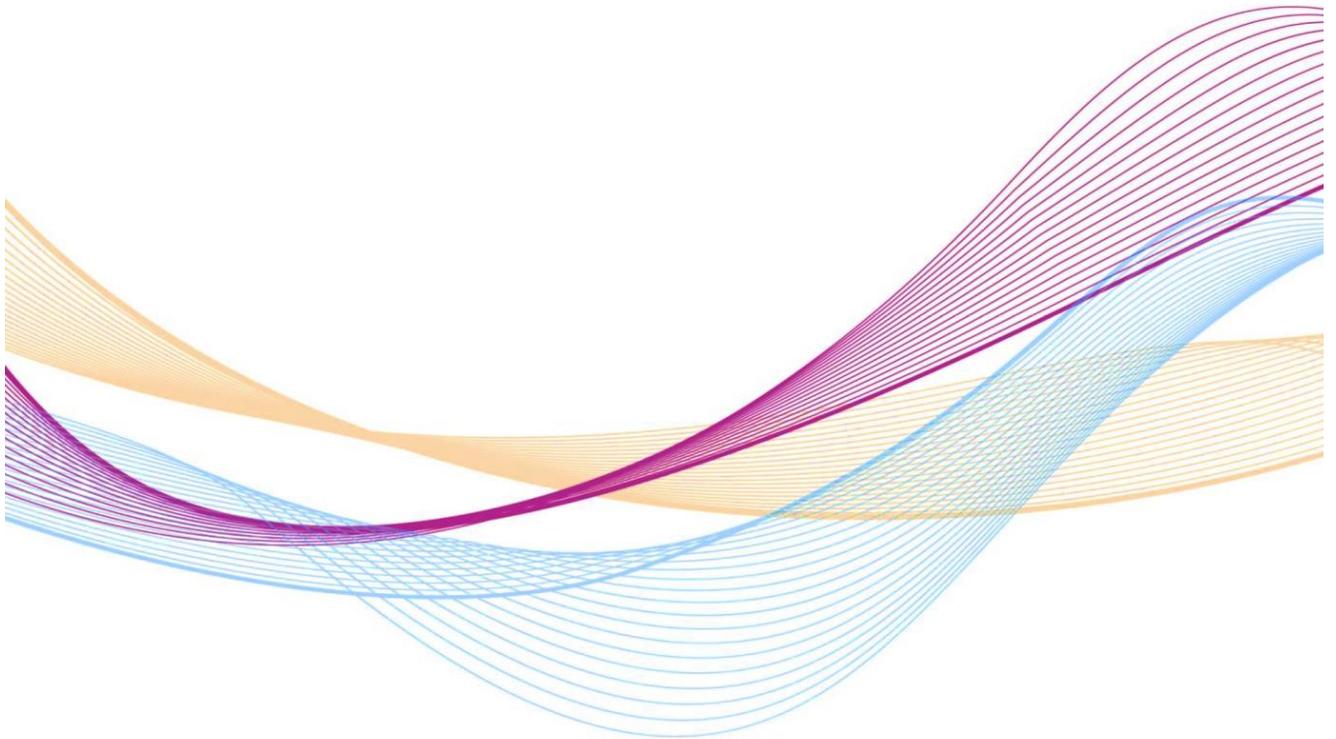




Complaints Annual Report 2015 - 2016



Chief Executive's Foreword



I am pleased to present our Complaints & Compliments Annual Report for 2015/16 for the period 1 April 2015 to 31 March 2016.

SEPT delivers partnership services to a population of 2.5 million throughout Bedfordshire, Essex and Luton. Always focusing on local services tailored to the needs of local people, we try to provide local resolutions to complaints in the first instance and take all complaints seriously.

We have a culture which welcomes complaints as a way of improving services to our patients and local people. I accept that we do not always get things right and occasionally fail to meet people's expectations. When this is the case, we are committed to doing what we can to put things right so that the same thing does not happen to others.

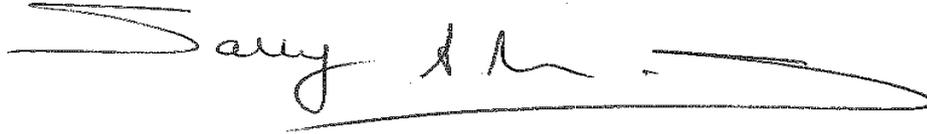
Feedback is important to us and gives us the chance to change and enhance the quality of our patient care as appropriate. We are a learning Trust, and take the opportunity to use the lessons learned from our complaints to improve both our services and the experience of our patients and service users.

It is important to me that individuals feel that they have been heard, treated with respect and receive an open, honest and timely response to their concerns within agreed timescales. All complaints and response timescales are monitored by the Executive Team and any themes and trends are monitored by the Patient Experience Steering Group. Our Non-Executive Directors undertake monthly independent reviews of the complaints handling process to provide assurance that the Trust is providing high quality investigations and responses, and appropriate learning actions are identified.

In June 2015, the Trust was inspected by the CQC. We received a good rating for complaints handling, but it was felt that the lack of recording some of the complaints dealt with locally by the service, was a missed learning opportunity. We have addressed this by creating a new complaints training pathway to raise awareness across the Trust of how to effectively record and report all locally resolved complaints as well as clarifying the formal complaints process.

The Trust makes continuous improvements to its handling of complaints to ensure they are fit for purpose and encompass the diversity of Mental Health and Community Services.

Finally, I would like to take this opportunity to thank everyone who takes the time and trouble to send in compliments about our staff and services. It is important that this positive feedback is communicated across the organisation, ensuring that where we have got it right we replicate this approach into other areas.

A handwritten signature in black ink, appearing to read 'Sally Morris', with a long horizontal flourish extending to the right.

Sally Morris
Chief Executive

SEPT COMPLAINTS ANNUAL REPORT 2015/2016

1.0 Introduction

This is the Complaints Annual Report for South Essex Partnership University NHS Foundation Trust (SEPT) for the period 1 April 2015 to 31 March 2016.

SEPT provides Mental Health Services to people in south Essex and Forensic Services in Bedfordshire and Luton. The Trust also provides Community Healthcare Services in south east Essex, west Essex and Bedfordshire. Between April 2015 and October 2015, SEPT also provided Community Healthcare Services for Podiatry, Speech and Language Therapy and Children's Services in Suffolk, in partnership with SERCo.

In April 2015, Mental Health Services previously provided by SEPT in Bedfordshire and Luton transferred to East London NHS Foundation Trust (ELFT). This has been a contributory factor in the significant reduction in complaints received this year. However, taking this into account, there has still been a reduction in complaints for the services we provide for three consecutive years.

The complaints function is overseen and monitored by the Corporate Governance Directorate, however, complaints and their prompt and effective management are everyone's responsibility. All final response letters are seen and signed by the Chief Executive or in her absence, her designated signatory.

Every year the number of compliments the Trust receives far outweighs the number of complaints about the services the Trust provides. This year is no exception; there has been a significant increase in compliments from patients, their relatives, and carers. A small selection of compliments is shown on page 21, Appendix 1.

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.

All complaints are acknowledged within three working days in line with Department of Health regulations. The Trust aims to respond to all complaints in an honest, open and timely manner.

SEPT continuously looks at ways of improving response times to complaints. For this year the Trust has achieved 98% for complaints closed within agreed timescale. Data from the NHS Benchmarking Club showed that on average fewer than 80% of complaints were closed within agreed timescales across all mental health trusts.

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 and final stage of the complaints process.

This year, the Trust had eleven complaints referred to the PHSO, which is the same number as last year. Although disappointing that the referrals have not decreased, the PHSO are investigating more complaints than before across the NHS, some

even outside of the 12 month period. Four of the Trust's complaints which the PHSO decided to investigate this year, had been investigated and closed by the Trust in excess of 12 months.

It should be noted that the figures stated in this report from point 3, (and those reported in the Trust's Quality Account) do not correspond with the figures submitted by the Trust to the Health and Social Care Information Centre on our national return (K041A). This is because the Trust's internal reporting (and thus the Quality Report / Account and Annual Complaints Report) is based on the complaints **closed** within the period whereas the figures reported to the Health and Social Care Information Centre for national reporting purposes have to be based on the complaints **received** within the period.

2.0 Number of Formal Complaints Received

A total of 237 formal complaints were received by the Trust during 2015/2016. This figure indicates a decrease of 140 from the overall total of the previous year. For comparison purposes, it should be noted that figures for complaints received about Bedfordshire and Luton Mental Health Services were included in the 2014/15 total of 377. Therefore complaints for SEPT's remaining services have decreased by 15 (6%).

This decrease has been Trust wide with the exception of South East Essex Community Health Services which has seen a slight increase of two from the previous year. At year end, the number of active complaints was 22 which is a decrease from last year's total of 49, which included 13 for Bedfordshire & Luton Mental Health Services. One complaint that had been carried over to this year from the 2014/15 report was removed from this year's figure as it was subsequently found to be another organisation's complaint, and was therefore re-directed accordingly. All active complaints are on target to be responded to within their agreed timescale, by the end of May 2016.

Table1: Number of complaints received by Trust area

Area	Number of Complaints Handled	
	2015/16	2014/15
Mental Health – Bedfordshire & Luton	-	125
Mental Health – Essex	147	152
Forensic - Bedfordshire & Luton	6	-
Total Mental Health	153	277
Community - Bedfordshire	29	33
Community – South East Essex	28	26
Community - West Essex	25	29
Community – Suffolk	2	12
Total Community	84	100
Trust Total Received	237	377
Total Withdrawn	5	12
Total Investigated	232	365

The following figures illustrate the percentage of complaints by Trust area and the number received by directorate during 2015/16.

Figure 1: Percentage of total complaints received by service

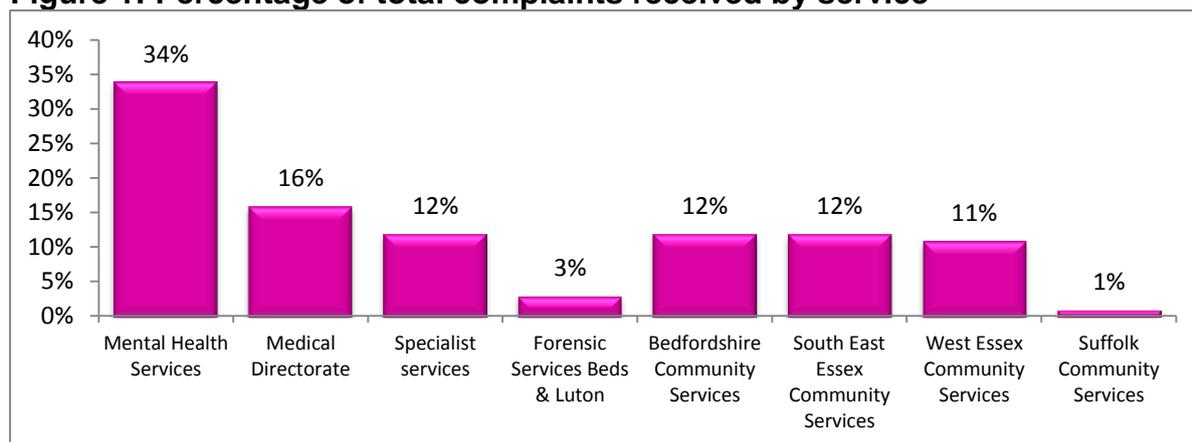


Figure 2: Numbers of complaints by directorate

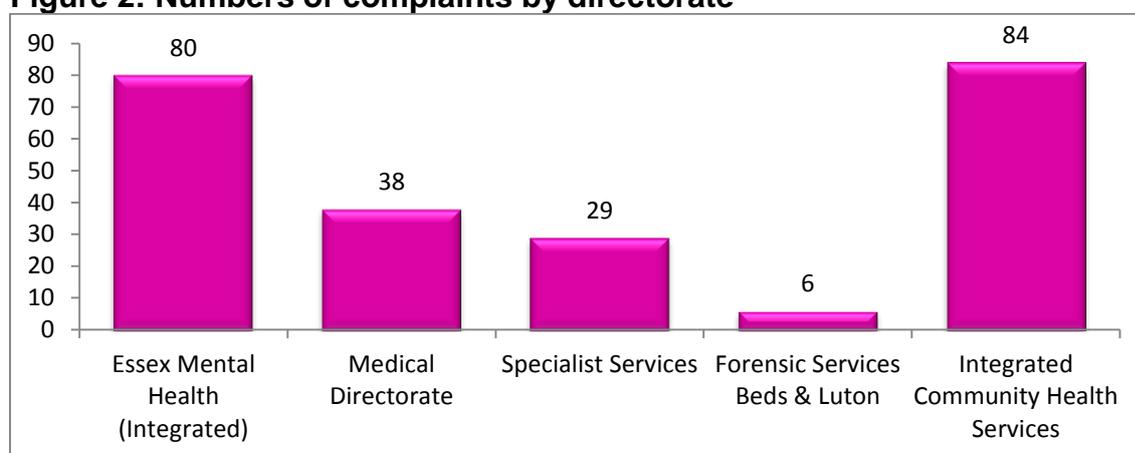
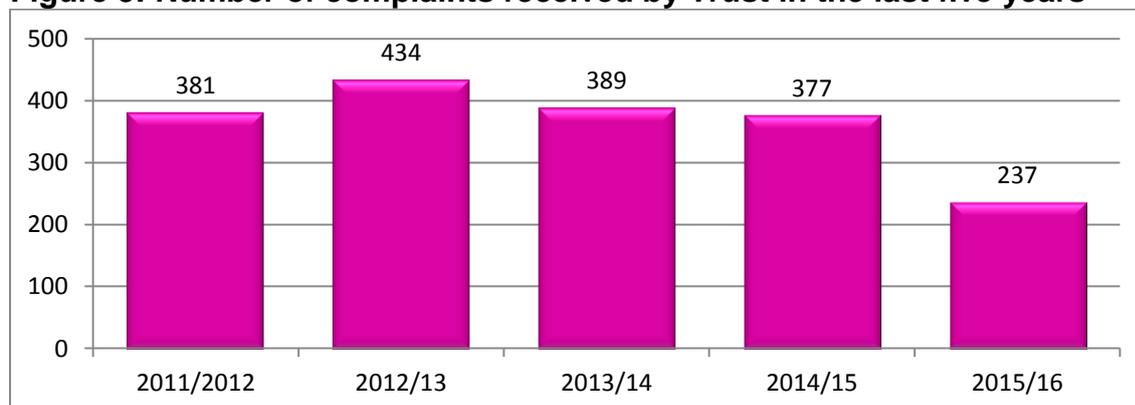


Figure 3: Number of complaints received by Trust in the last five years



NB: In 2011/12 Community Healthcare Services was part of the Trust for seven months of the financial year. Bedford and Luton Mental Health Services transferred to another organisation at the end on 2014/15, and Suffolk Community Services transferred in October 2015. Therefore a direct like for like comparison is not viable.

3.0 Number of Complaints Upheld/Partially Upheld

A total of 247 complaints were closed during the year and five were withdrawn.

It should be noted that 18 complaints were carried over from 2014/15 for Bedfordshire & Luton Mental Health services. These are not included in the total of 247 above. The outcome of these complaints is shown below.

Upheld	Partially Upheld	Not Upheld	Total
two	nine	five	16

The remaining two comprise:

- one locally resolved;
- one not investigated (consent not given).

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 upheld. Last year's figures are shown for comparison.

Table 2: Complaints outcome by service/locality

Area	Number of Complaints Upheld		Number of Complaints Partially Upheld		Not Upheld		Total	
	2015 /16	2014 /15	2015 /16	2014/ 15	2015 /16	2014/ 15	2015 /16	2014/ 15
Essex Mental Health	9	17	78	79	59	47	146	143
B&L Forensic	0	0	2	0	1	0	3	0
Community – Bedfordshire	3	7	17	17	7	7	27	31
Community – South East Essex	5	3	18	11	5	9	28	23
Community – West Essex	1	5	19	19	1	5	21	29
Community – Suffolk	0	2	3	7	1	1	4	10
Total	18	34	137	133	74	69	229	236

The remaining 18 complaints comprise:

- seven locally resolved;
- five withdrawn;
- three not investigated (consent not given);
- three conduct and capability.

4.0 Number of Complaints Resolved Within Agreed Timescale

Table 3 below illustrates the percentage of complaints closed within the agreed timescale with the complainant. As outlined in section 1, Data from the NHS Benchmarking Club showed that on average fewer than 80% of complaints were closed within agreed timescales across all Mental Health Trusts.

Table 3: Closure of complaints within agreed timescales

Area	Closed within agreed timescale	Percentage
Mental Health - Essex	153 + 4 outside of timescale	97%
Bedfordshire & Luton Forensic	3	100%
Community - Bedfordshire	28	100%
Community – South East Essex	28	100%
Community – West Essex	27	100%
Community – Suffolk	4	100%

5.0 Number of Complaints Referred to the Parliamentary & Health Service Ombudsman (PHSO)

If the complainant remains dissatisfied with the response they receive from the Trust and feel that all avenues to resolve it locally have been exhausted, they can ask the Ombudsman to independently review their complaint.

During 2015/16 a total of 11 complaints were referred to the PHSO which is the same as last year. No further actions or recommendations were made in respect of two of these referred complaints. To date, there are seven active cases with the PHSO, for the period July 2015 to March 2016. Table 4 below, illustrates the area of the Trust from which the complaints were referred to the PHSO and their current status.

Table 4: Complaints referred to the Ombudsman

Area	Number of Complaints Referred	Comments
Mental Health - Bedfordshire & Luton	two	one not upheld no recommendations one is active
Mental Health - Essex	five	one not upheld - recommendation that Trust should: <ul style="list-style-type: none"> provide details about the context and criteria for CPA support and the policy that is used across the organisation in response letter. one partially upheld recommendation that the Trust should: <ul style="list-style-type: none"> write a letter of apology for the lack of opportunity for complainant to get answers about the measures the Trust took to consider how best to deal with the valuable patient retained following the failing in record keeping;

		<ul style="list-style-type: none"> provide evidence of the learning taken from this failing and what actions it has taken to prevent similar incidents happening again; provide evidence of how the service director and managers ensure the disclaimer notices are displayed and that they are currently being displayed, as per its policy. This should be shared with PHSO and complainant.
		three are still active
Community – West Essex	two	one not upheld no recommendations one is active.
Community – Bedfordshire	one	one is active
Community – Suffolk	one	one is active

At the end of last year (2014/15), five complaints were still under investigation by the PHSO; four relating to Bedfordshire and Luton Mental Health Services and one for Essex Mental Health Services.

The outcomes were:

Area	Number of Complaints Referred	Comments
Mental Health - Bedfordshire & Luton	four	three not upheld one upheld – Trust paid £3,000 for service failure
Mental Health – Essex	one	not upheld

6.0 Nature of Complaints Received

The top three themes for complaints for both mental health and community during 2015/2016 were dissatisfaction with treatment, staff attitude and communication. These top three themes for the Trust also apply nationally across the spectrum of health services.

The Complaints and Patient Experience Teams undertook a detailed analysis of the top three themes, looking at the number of complaints either upheld or partially upheld in order to focus on those where we acknowledge we have a problem. The analysis concluded that there were no significant issues last year. It was also noted that less than 0.2% (1 in 500) of patient contacts result in a complaint.

Emerging trends or themes are monitored regularly as complaints are received, and any areas of concern are highlighted to the Executive Team. In addition, a quarterly thematic report is produced and discussed at the Patient Experience Steering Group.

Of the 247 closed complaints, 117 were recorded within the top three themes. Of these, 84 were either upheld or partially upheld. The table below shows the outcomes of the closed complaints, last year's figures are shown, but it should be noted that these include Bedfordshire and Luton.

Table 5: Top three complaint themes

Top Three Complaint Themes	Total number of Complaints closed (2015 / 2016)		Upheld		Partially Upheld		Total of Upheld/ partially Upheld	
	2015/16	2014 /15	2015/16	2014 /15	2015/16	2014 /15	2015/16	2014 /15
Unhappy with treatment	47	55	3	6	31	28	34	34
Staff Attitude	41	59	3	10	19	27	22	37
Communication	29	44	1	8	27	18	28	26

The remaining number were either not upheld or resolved locally by the services.

As the 2014/15 figures include services no longer managed by SEPT, it is not possible to make direct comparisons with this year.

The category 'unhappy with treatment' covers a wide spectrum. In some cases, complainants had certain expectations, however, this was contrary to their clinical need. The Trust was, therefore, limited in providing solutions to these complaints.

7.0 Number of Re-Opened Complaints

During 2015/16, of the 247 complaints closed, a total of 35 complaints were reopened as the complainant was dissatisfied with the Trust's response to their complaint. This figure includes six re-opened complaints for Bedfordshire and Luton, which were in relation to complaints raised whilst under SEPT management. In 2014/15, 59 complaints were re-opened, which included the Bedfordshire and Luton Mental Health figures of 20.

It is noteworthy that no complaints were re-opened when a meeting had taken place at the outset of the complaints investigation. Table 6 below illustrates the number of re-opened complaints by area.

Table 6: Reopened complaints

Area	Number Closed	Number Re-opened	Percentage
Mental Health – Bedfordshire and Luton	-	6	
Mental Health - Essex	157	23	15%
Forensic Bedfordshire & Luton	3	0	0%
Community - Bedford	28	2	7%
Community – South East Essex	28	1	3%
Community – West Essex	27	3	11%
Community - Suffolk	4	0	0%
Total	247	35	14%

8.0 Number of Complaints Reviewed by Non-Executive Directors

The Non-Executive Directors provide an important and valuable part of the complaints process by providing independent reviews of randomly selected completed complaints. During 2015/16 a total of 44 reviews were undertaken.

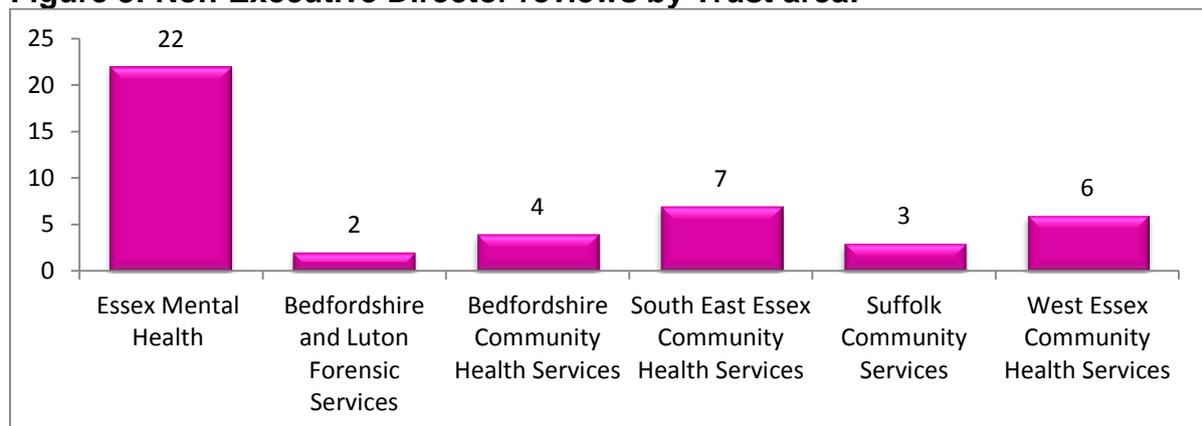
The reviewer will take into consideration the content and presentation of the responses and scrutinise the investigation report to seek assurance that a robust, open and fair investigation has been undertaken.

If the Non-Executive Director has any concerns or questions about the complaint they have reviewed they will arrange to meet with the Executive Director or Director of the service to discuss. The Non-Executive Directors held three such meetings to suggest further learning could be taken from the complaint they had reviewed. Once reviews have been completed, they are signed off by the Trust's Chair and circulated to Directors.

In addition, the Council of Governors receive regular reports on the number of complaints and provide an additional level of assurance in monitoring the Trust's performance.

The number of complaints reviewed is shown below by Trust area.

Figure 3: Non-Executive Director reviews by Trust area:



9.0 Number of Local Resolutions Recorded

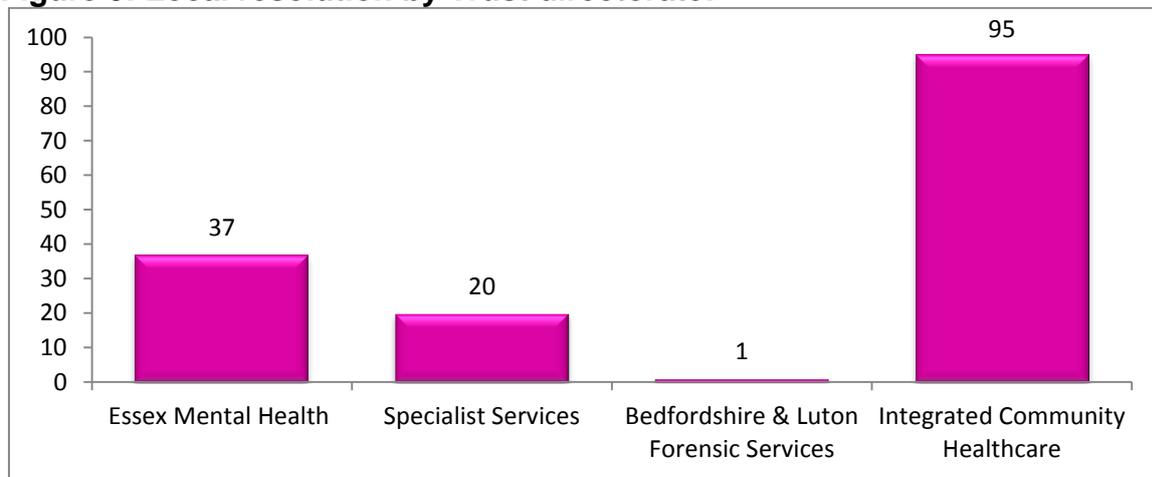
The Trust actively encourages front line staff to deal with concerns as they arise so that they can be remedied promptly, taking into account the individual circumstances at the time. This timely intervention can prevent an escalation to a formal complaint.

There were a total of 153 locally resolved concerns recorded for the year. This total includes 28 enquiries from MPs on behalf of their constituents. This is a decrease of 17 from last year (excluding Bedfordshire & Luton Mental Health Services). These are recorded as local resolution and the table below illustrates the area for which they were received.

Figure 4: Local resolution by Trust area:

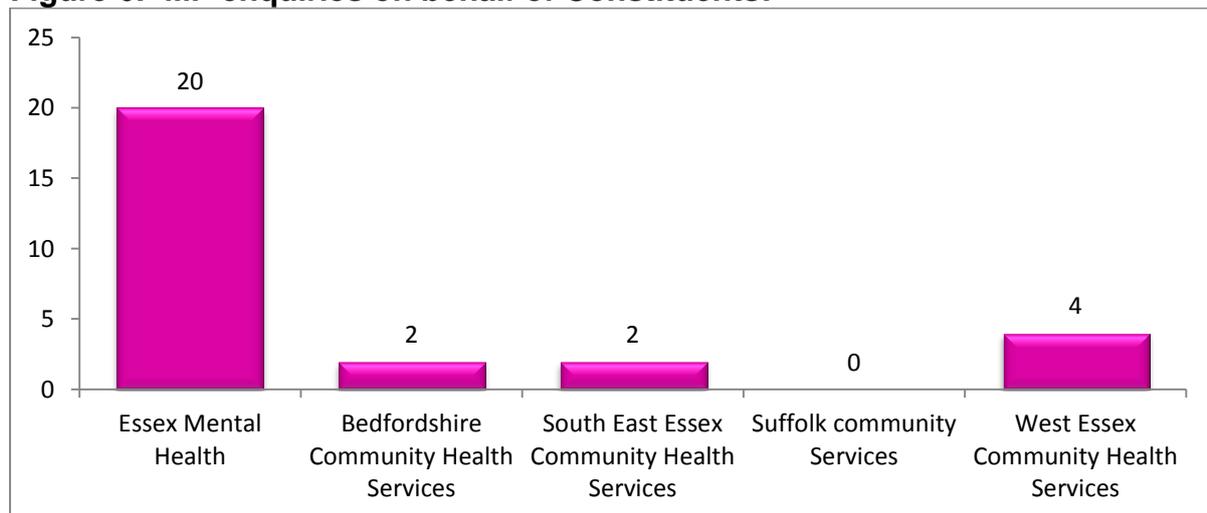


Figure 5: Local resolution by Trust directorate:*



***Excludes MP queries**

Figure 6: MP enquiries on behalf of Constituents:



10.0 Triangulation of Complaints, Serious Incidents and Claims

All complaints are logged onto the Datix reporting system, and are cross referenced with the incident module; this will highlight any serious incidents. During 2015/16, two complaints were linked to serious incidents. A detailed root cause analysis is undertaken for the serious incident and the final report used to inform the complaint response. The joint learning from the serious incident and the complaint will be discussed at the Learning Oversight Steering Group for dissemination across the Trust.

A total of four complaints became the subject of claims this year. One claim was closed by the National Health Service Litigation Authority (NHSLA) as they had not received any response from the claimant's solicitor. The remaining three cases are on-going.

Complaints are also linked to any recorded safeguarding concerns.

11.0 Ethnicity of Patients

The Department of Health no longer collects data in relation to ethnicity. However, the Trust continues to send out an equal opportunities form with the acknowledgement letter to complainants.

In the majority of cases either the form is not returned or the complainant chooses not to state their ethnicity. The data collected relates to the patient concerned and not the complainant.

Table 7 below illustrates the information received by area.

	Beds & Luton Forensic Services	Essex Mental Health Services	Bedfordshire Community Services	South East Essex Community Services	Suffolk Community Services	West Essex Community Services	Total
White – British	1	51	4	6	2	6	70
White – other white	0	4	0	0	0	1	5
Mixed white & black Caribbean	1	0	0	0	0	0	1
Other Mixed	0	1	0	0	0	0	1
Indian	0	0	0	0	0	0	0
Pakistani	1	1	0	0	0	0	2
Black African	0	4	0	0	0	0	4
Chinese	0	0	0	0	0	0	0
Not Stated	3	86	25	22	0	18	154
Total	6	147	29	28	2	25	237

12.0 Feedback on Complaints Process

A complaint handling questionnaire is sent to complainants approximately six weeks after the closure of their complaint. This feedback form asks how easy the complaints process is to access and understand and if the complainant is happy with the handling and outcome of their complaint.

Last year's report noted that the response rates to the complaints questionnaires was disappointing. Unfortunately, this year has not seen an improvement, despite trying to improve the response rate by emailing the questionnaires instead of posting to complainants whose email address had been supplied and were happy to receive communication this way. Although the responses were returned quicker, there was no increase in the response rate. Of the 152 questionnaires sent out, only 38 were completed (25%).

Questionnaires were not sent to complainants where consent to investigate was withheld or those complaints closed in March which will receive their feedback forms in May 2015.

Overall the results were as follows:

- positive experience 18 responses;
- negative experience 17 responses;
- mixed experience three responses.

Of the 17 negative experiences, 11 expressed dissatisfaction that they had not been kept fully informed by the investigator throughout the complaints process. Nine people expressed dissatisfaction with the timescale for a response, although all had been responded to within an agreed timescale with the complainant. This means that three of these people complained about both.

The comments provided on the returned forms are shared with the relevant Director. Two complainants asked for their complaint to be re-investigated, which they were.

13.0 Internet Feedback

During the year, the Trust has monitored and responded to feedback posted on NHS Choices. This is an important source of feedback for us. As the comments are mostly anonymous, it is not always possible to identify which service or staff members the person is referring to. Every effort is made to respond and contact details of our PALS and Complaints Departments are posted to encourage the writer to contact us directly so that we can address their concerns. Compliments have also been posted and recorded.

14.0 Actions Taken to Improve Services As a Result of the Complaints Received

The Trust recognises the importance of lessons that can be learnt 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.

The Trust has a Lessons Learned Oversight Committee which ensures that any learning is taken forward and implemented within service delivery. The feedback loop for sharing learning has shown an improvement over the past year, with learning from complaints being regularly discussed in Management and Team meetings across the Trust.

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

We continue to review the lessons learned process and have introduced systems to examine trend analysis in order to enable the Trust to monitor and act upon any recurring themes. A process has been devised to follow up the actions/lessons that have been identified in response letters, on a quarterly basis, to gain assurance that learning from complaints is both captured and embedded in everyday practice.

Table 8 below highlights a selection of some of the lessons learned from complaints over the past year.

Table 8: Lesson Learnt

What our patients said	What we did
Complainant is dissatisfied the service is not accommodating for those who work.	The service are looking at ways to extend provision outside of the core hours of 9am to 5pm as it recognises that it is not meeting the needs of patients during evenings and weekends.
Concerns were raised about the length of wait for insoles.	The issues have been discussed with the internal mail department to implement system improvements and put in place a process whereby the delivery of insoles is not delayed if the administrator is away for any reason.
Although nursing staff had concerns that a wound was not healing and considered undertaking a Doppler assessment, this was not carried out as it was felt that the patient would not have been able to tolerate this procedure. Unfortunately, this was not discussed in detail with the patient nor did staff refer them to a specialist nurse for on-going wound management advice.	Staff members will be given further training and clinical supervision in wound management. The service will also improve communication with the multi-disciplinary team.
Complainant made two telephone calls to find out when their therapy would start and for information about waiting times but was given conflicting information.	New procedures have been introduced to make reasonable waiting time information available. All administrative staff will receive written procedure updates and training.

Delay in care received because of a gap in transfer of care between teams.	Referral criteria for Mental Health Act assessment will be circulated to team. Staff have been reminded of the importance of following Trust policy when transferring cases between services to ensure there is no miscommunication that can result in delay of care being received.
Complainant telephoned to confirm attendance at a class. As the telephone was not answered they left a voicemail message instead. The class was subsequently cancelled but the complainant had not been contacted prior to arrival.	The service had recently implemented a dedicated patient appointments telephone line in order to receive calls about appointments. In light of this complaint the service has been extended to include any queries about appointments for the various classes that are held. It is anticipated that this will reduce any problems that patients may have otherwise experienced contacting the service.

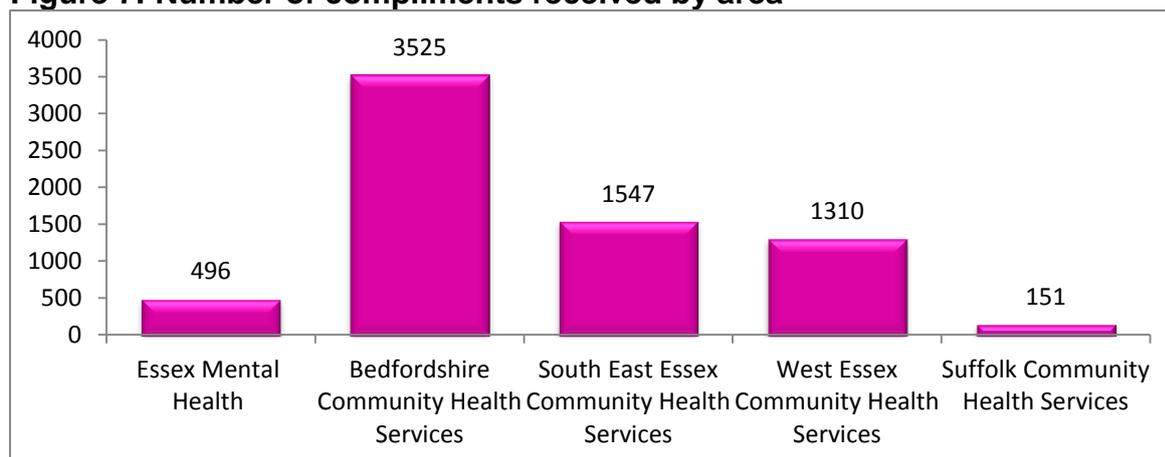
15.0 Number of Compliments Received

A total of 7029 written compliments were received during 2015/16. This equates to 496 for Mental Health Services and 6533 for the Community Health Services. Mental Health Services have experienced a decrease in the number of compliments received this year, whereas Community Health Services compliments have increased on last year's total. Many of the compliments are taken from the Friends and Family Test forms, hand hygiene audit forms (community), as well as cards and letters of appreciation.

All staff are encouraged to share any compliments they receive either individually or as teams. It is important that positive feedback is shared with staff and services across the Trust. A selection of compliments is published regularly in the internal newsletters. The table and figures below show the compliments received by the Trust and last year's figures for comparison. A selection of the compliments received is shown in Appendix 1 of this report.

Table 9: Compliments Received Area	2015/16	2014/15
Mental Health - Essex	496	535
Community - Bedfordshire	3525	1384
Community – South East	1547	1327
Community - West Essex	1310	967
Community – Suffolk	151 (six months)	414

Figure 7: Number of compliments received by area



16.0 Complainants' Stories

Each of the complainants whose stories are shown below has given consent to include them anonymously in this report.

Story 1

Complaint:

Miss J raised concerns about confidentiality at a Therapy for You session. In the session Miss J was asked to complete an attendance sheet which asked for her date of birth and answers to intimate questions that Miss J believed were inappropriate and made her feel quite distressed. Miss J reported that several staff and people were in the room at the time, which she believed was a serious issue regarding privacy and confidentiality. Miss J raised this with staff at the time, but said she did not receive a satisfactory response, nor was she able to say who the staff were as they were not wearing any form of identification.

Trust Response:

The Trust apologised for the lack of private space when completing forms and advised that additional tables have been provided at a distance from one another for future meetings. Miss J was advised that all documentation is placed for transportation in a lockable document bag and apologised if a clear explanation was not given regarding the purpose of the forms and how they would be stored and secured.

Outcome:

As a result of the complaint, individual sign in sheets and envelopes will be available for those attendees who would prefer to use them. A review of the Stress and Mood Management Course procedures has been undertaken and these are to be discussed at team meetings. Additional training has been arranged for facilitators and staff have also been reminded of the necessity for displaying identification badges.

The complaint was upheld.

Story 2

Complaint:

Mrs Y raised concern about the appointment system, lack of communication and parking at Basildon Mental Health Unit. Mrs Y had accompanied her mother to an appointment by taxi, due to the lack of parking near the Mental Health Unit. However, when they arrived they were told by a receptionist that the clinic had been cancelled, but Mrs Y was not informed of this beforehand. A Duty Doctor advised Mrs Y that her mother was welcome to wait, for approximately an hour, as she may then have been able to see a doctor; however, this was not guaranteed.

Mrs Y also raised concerns about the appointments system as appointments are never given in the time scale promised and she always has to telephone and chase up appointments.

Trust Response:

The investigation found that the Mrs Y met with the Operational Team Manager and Team Leader on 21 May 2015 and Mrs Y stated that her feeling of frustration had now abated. Team Manager advised that Mrs Y's frustration was compounded by the travel fees incurred and receiving a letter cancelling her mother's appointment which arrived after the appointment date. The Team Manager apologised for the miscommunication and confirmed that the matter had been highlighted to the administrative staff. .

Outcome:

The Trust reimbursed Mrs Y's travel fees. The Team Manager also noted and accepted comments with regard to the timescales of appointments and advised that this had been taken forward and discussed within Team meetings.

The complaint was partially upheld.

Story 3

Complaint:

Mrs X's son is 14 months old; she was concerned that she had not received any notification about his one year check. She took him to be weighed at her local clinic where she voiced her concerns. She was advised that the health visitors were behind due to staff sickness but they would inform her health visiting team of her concerns.

A member of the team telephoned, and offered an appointment on a day that Mrs X was at work, she asked for a Wednesday, and was told they would call back. After a few weeks, Mrs X had still not heard anything so called the service again and received an appointment; this was followed-up with a confirmation letter and development sheet to complete and take to the appointment. When Mrs X and her son arrived for the appointment she was told by the receptionist that the Health visitor was off sick. Mrs X asked for someone from the service to telephone her as she was not happy that she had not been contacted prior to attending the clinic.

A senior staff member telephoned Mrs X to apologise, and explain that they had been on training and were not aware that the Health Visitor was not at the clinic, until

returning to the office. They explained the Health Visitor would contact Mrs X to arrange another appointment as soon as possible. Several weeks later Mrs X had not heard anything from the team.

Trust Response:

Our investigation found that there was a delay in undertaking Mrs X's son's one year developmental assessment due to a temporary staff capacity issue within the Shoebury Area. Apology was given for the inconvenience caused to Mrs X and her son. It was established that normal procedures for the reporting of sickness and absence and the cancellation of appointments had not been followed on this occasion.

Outcome:

An action plan was put in place to address the staffing issue and ensure that the Healthy Child Programme is delivered as per the prescribed schedule. The reporting of sickness and absence and cancellation of appointments has been addressed with the staff member concerned through the management supervision process and with the wider service teams, at the Health Visiting Education Forum, to ensure that lessons are learned from this case. Mrs X's son has now received his developmental check.

The complaint was upheld.

16.0 Aims for 2016/2017

During the next year we will:

- ensure all key staff are trained to deal effectively and efficiently with complaints and concerns;
- continue to explore ways in which to improve the complaints feedback form response rate;
- continue to promote meetings with complainants at an early stage of investigations, as a beneficial method of sensitively addressing concerns. Direct discussions and explanations can lead to increased understanding and resolution;
- carefully analyse final reports from the PHSO to see where improvements can be made to complaint responses with a view to reducing the number of referrals;
- continue work on refining and building on the complaints handling process.

17.0 Conclusion

SEPT aims at all times to provide the best possible service to patients, but when we do not meet their expectations, we strive to put things right by:

- acknowledging our mistakes and apologising where appropriate;
- providing honest evidence-based explanations;
- learning from the feedback;

- ensuring we have handled our patient's complaint in a positive, sensitive and timely manner.

We view the complaints handling process as an opportunity to improve our customer service and make our patients' and relatives/carers' experience better in the future. We have embedded a 'duty of candour' across the Trust thereby ensuring transparency and honesty in our complaint investigations and responses.

As a way of monitoring timescales and progress of open complaints, each Executive Director receives a weekly situation report for their services. In addition, the report is discussed at the Executive Team meeting fortnightly, so that any areas of concern can be highlighted, and appropriate and immediate action taken.

Although this is a positive report, with fewer complaints and more compliments received this year, we recognise from complaints received, that we do 'get it wrong' sometimes and need to make improvements. We need to communicate more effectively with relatives and carers about discharge arrangements. We need to ensure that where appointments need to be cancelled, a robust system is in place to ensure patients are advised whenever possible of the cancellation before they embark on a needless journey. We need to ensure all of our communication, whether verbal or written, is clear.

We are confident that we have a robust and well-managed complaints process and will continue to build on the well-developed systems already in place.

Pam Madison
Head of Complaints and Customer Service Improvement

Nigel Leonard
Executive Director – Corporate Governance

Selection of Compliments Received 2015/16

<p>I would just like to thank all involved with mum's rehabilitation. Everybody was so kind and caring and all of the family would just like to say a big thank you.</p> <p>It may be a strange to say but we kind of hope we don't see you again in the near future!! However, if mum does return, she knows she will be in very good hands.</p>	<p>We wanted to thank you all for the care you gave our mum while she was at home. It gave us great confidence to know that you were there to support us all, gently and with great skill. You do an amazing job and we wanted to express our gratitude for making mum's time and our experience such a positive one.</p>
<p>To all the staff. Thank you for all you have done for me. You have given me back my dignity and self-esteem. I will miss you all.</p>	<p>Never underestimate what you did for my family & their future happiness. You stopped, You listened, You Believed. You resourced the help we needed for everyone's future "Happy head"</p>
<p>I appreciated your work and help today. Your help ensured the safest and most appropriate care for my mother. You listened, were caring and compassionate and took appropriate and effective action. You also gave good information and advice and were concerned to protect my mother's interests. Your work makes a difference to the lives of others.</p>	<p>SEPT has helped me immensely, without the help from my very friendly key worker and support worker I don't think I would be here today. The psychiatrists who diagnosed me have also been so helpful in getting me the right medication</p>
<p>I was treated with kindness and all staff were very caring and went out of their way to help me. Everything was done perfectly. I am now more independent; the staff were all very good. I could not fault the service. The team went beyond their call of duty, I must say. Wonderful service.</p>	<p>I would like to thank you very much from the bottom of my heart for all your help, support and for being a friend to my dad and myself. This meant a lot to us and without your help I don't know how I would cope. I am left with the lovely memories now and I will keep him in my heart.</p>
<p>Thank you so much for all your loving care while I stayed with you in the unit. It was like being welcomed into a caring family and you have given me a good start to recovery after my operation.</p>	<p>Thanks for helping me to be able to control my stammer. I have found it very useful and can now get on with day to day activities without having to worry. I will miss coming to see you.</p>
<p>Thank you to you all, past and present who helped my husband come to terms with his diagnosis of Motor Neurone Disease. He remained strong and dignified until he died. The service he received from you all was excellent. Thank you so much.</p>	<p>Just to say thank you to everyone at the Leg Ulcer Clinic for being so kind and helpful to me. I feel sure that I would have never have reached my 95th birthday without the care and expertise shown to me over the past four months. You are a credit to your profession and to our wonderful N.H.S. Bless you all</p>