

Complaints, MP Enquiries and Patient Feedback Report Quarter 2 2019/2020

Item 16j

Governing Body meeting

7 November 2019

Author(s)	Liz Waterfall, Complaints Manager
Sponsor Director	Mandy Philbin, Chief Nurse
Purpose of Paper	To provide Governing Body with complaints and MP enquiries comparative data, information about themes and trends and patient feedback for quarter 2 2019/2020
Key Issues	<ul style="list-style-type: none"> • 4 formal complaints received • 8 MP enquiries received • 100% complaints responded to within 25 working days
Is your report for Approval / Consideration / Noting	Report has not been considered by Governance Subcommittee due to meeting schedules and is for noting
Recommendations / Action Required by Governing Body	The Governing Body is asked to: note the Complaints, MP Enquiries and Patient Feedback Quarter 2 Report 2019/2020
What assurance does this report provide to the Governing Body in relation to Governing Body Assurance Framework (GBAF) objectives?	<p>Which of the CCG's Objectives does this paper support?</p> <p>Principle Objective 1.1: To improve patient experience and access to care</p> <p>Principle Objective 2.1: To improve the quality and equality of healthcare in Sheffield</p> <p>Description of Assurances for Governing Body</p> <p>Assurance Framework Number: GBAF nos 1 & 2</p> <p>Insufficient communication and engagement with patients and the public on CCG priorities and service developments, leading to loss of confidence in CCG decisions</p> <p>Providers delivering poor quality care and not meeting quality targets particularly in a period of system wide organisational changes.</p>
Are there any Resource Implications (including Financial, Staffing etc)?	No
Have you carried out an Equality Impact Assessment and is it attached?	Not relevant as this is not a new policy, process or strategy
Have you involved patients, carers and the public in the preparation of the report?	No

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1. Introduction

The CCG handles complaints and MP enquiries about:

- the conduct of NHS Sheffield CCG staff
- services that NHS Sheffield CCG provides, including commissioning decisions.

A complaint is an oral or written expression of dissatisfaction that requires a response. When the CCG receives a complaint relating to services commissioned by the CCG and provided by another organisation, the CCG decides whether it is appropriate for the provider to handle the complaint directly or whether the CCG should handle the complaint¹. Where the CCG decides to handle the complaint the provider is asked to investigate and provide the CCG with the outcome of their investigation. The CCG then responds to the complainant.

Department of Health guidance indicates that these complaints should be included in provider rather than CCG complaints statistics. Therefore, detailed information about provider complaints is not included in this report.

2. Complaints

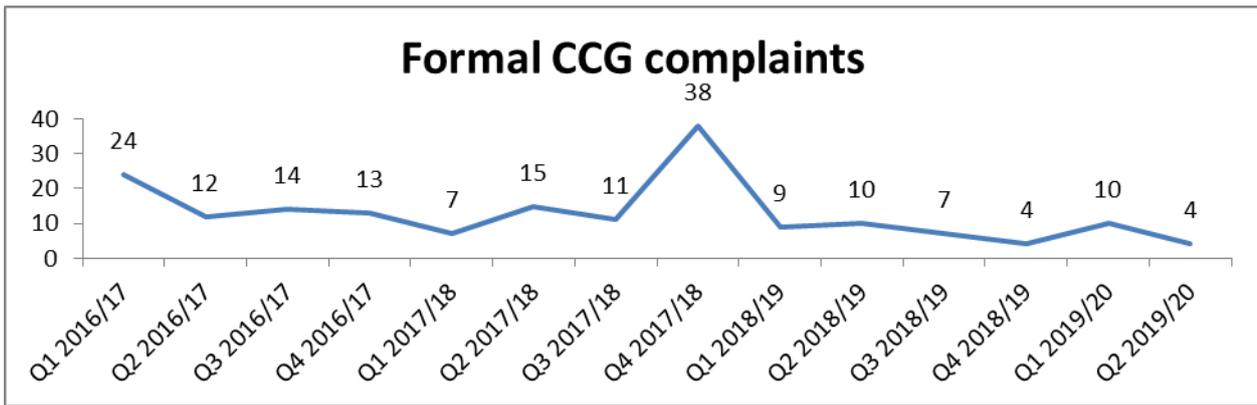
2.1. Number of complaints received

During quarter 2 the CCG:

- Handled 4 complaints about CCG services and decisions
- Dealt with 7 concerns that related to CCG services and decisions
- Contributed to 3 joint complaints where other organisations were leading

This is a marked decrease on the number of complaints in quarter 1 2019/20, and well below the average number of complaints received per quarter in the CCG over the last year. While the number of complaints has decreased there is an increase in complexity including joint complaints and complex issues.

¹ Factors that are taken into account include the subject and severity of the complaint, contractual breaches, pre-existing concerns relating to the provider, and the extent to which feedback from the complaint might inform commissioning decisions. The complainant must consent to their complaint being redirected to the provider to handle. The CCG considers it appropriate that, except in very exceptional circumstances, complaints relating to Sheffield Teaching Hospitals NHS Foundation Trust, Sheffield Health and Social Care NHS Foundation Trust and Sheffield Children's NHS Foundation Trust should be handled directly by the Trusts. The Trusts have a statutory responsibility to investigate complaints effectively, and the CCG has robust processes in place for monitoring the Trusts' compliance with complaints regulations.



Graph 1: Number of complaints about CCG services and decisions

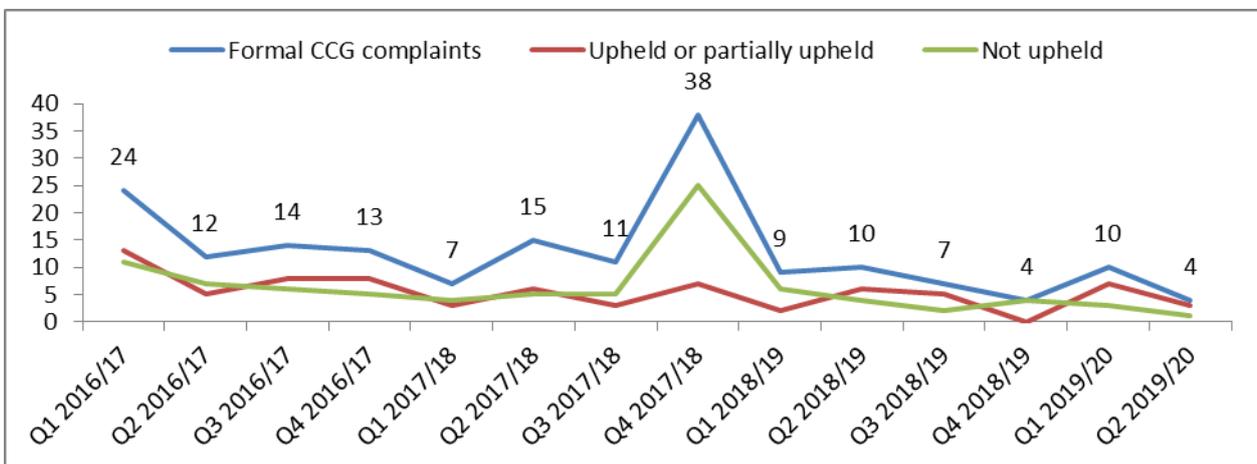
2.2. Timeliness of response

We aim to acknowledge complaints within 2 working days and respond within 25 working days. This timeframe can be negotiated and amended with the agreement of the complainant. Of the 4 complaints about CCG services and decisions:

- 4 (100%) were acknowledged within two working days
- 4 (100%) were responded to within 25 working days

The number of complaints received in this quarter shows a decrease from the previous quarter and is below the average figure received in previous quarters. However, there is a trend for increasing complexity of complaints, especially complaints across services.

2.3. Complaints by outcome



Graph 2: Complaints by outcome

Graph two: Number of formal complaints received, number not upheld and number either upheld or partially upheld (combined).

	Q4 17/18	Q1 18/19	Q2 18/19	Q3 18/19	Q4 18/19	Q1 19/20	Q2 19/20
Upheld: The complainant's primary concerns were found to be correct.	0	2	4	1	0	2	1
Partially upheld: The complainant's primary concerns were not found to be correct, but our investigation identified some problems with the service provided.	7	0	2	4	0	5	2
Not upheld: The complainant's concerns were not found to be correct. ²	25	6	4	2	4	3	1
Unknown (complaint open or on hold).							

Table 2: Complaint outcomes and open cases

2.4. Parliamentary and Health Service Ombudsman (PHSO)

There were no PHSO decisions during quarter 2.

2.5. Complaints and concerns by service area

		2017-2018				2018-19				2019-20	
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2
Commissioning and CCG policies decisions (ink POL)	Formal complaints	2	4	3	24	3	3	1	3	4	2
	Informal complaints and concerns	3	3	6	7	7	10	4	5	2	4
Continuing Healthcare, Funded Nursing Care and Personal Health Budgets	Formal complaints	3	11	8	14	6	7	6	0	5	2
	Informal complaints and concerns	1	4	1	3	4	7	5	4	2	3
Continuing Healthcare Previously Unassessed Periods of Care	Formal complaints	2	0	0	0	0	0	1	1	1	0
	Informal complaints and concerns		0	0	0	0	0	0	0	0	0

Table 3: Complaints and concerns by service area

2.6. Commissioning and CCG policies and decisions

We handled 2 complaints in this area. One questioned the CCG's plans in developing a collaborative approach to co-production and the consultation process involved. It was explained the CCG was exploring how it could improve its approach to co-production and

² Where a complaint is not upheld, we still seek to learn from the complaint, and consider what we could do differently to improve the complainant's experience.

as part of this, a tender process was employed to secure the expertise needed. A further complaint related to communication issues as part of a joint committee which was responded to jointly.

We handled one concern regarding a lack of service provision for children's cardiac conditions which was redirected to NHS England Specialised Commissioning. Further concerns related to:

- Decision relating to an individual funding request
- Questioning the local policy on the number of cycles of In Vitro Fertilisation (IVF)
- Access to diabetes prevention programme

2.7. Continuing healthcare

We received 2 complaints regarding this area. One complaint related to the CHC assessment process, regarding a delay due to the provider not supplying records in a timely manner and also a decision not to share records used in the assessment. The complaint also challenged the outcome of the assessment. The specific issues relating to the assessment process were investigated and responded to. However, the complaints process cannot change an eligibility decision and the complainant was directed to the appropriate route, the CHC Appeal process.

A further complaint related to the Children's CHC process. The family believed that they were entitled to seek an independent review and it was had proved difficult to clarify the process with them through an informal route. Further explanation was provided and a meeting offered, however, this was declined.

In addition, we handled 3 enquiries relating to: queries regarding a care package, update on a funding arrangement and clarification of guidance used in the assessment process.

2.8 Actions from complaints

From the complaint themes above a number of areas were picked up for action:

Delay in provision of records required for assessment process – this has triggered better escalation processes through CCG's Contracting mechanisms to ensure relevant information can be retrieved through this route if necessary.

Escalation when case management issues arise – identifying the appropriate point to involve senior managers to ensure plan for resolution is discussed and informed to parents

Sharing documents – this has prompted the organisation to agree a standard operating procedure in relation to the release of information from the CHC, both from a routine standard of practice perspective and from an Information Governance perspective.

2.9 Audit of actions from previous complaints

The complaints team has a continual process to follow up with any previous actions that have been identified to ensure that they have been carried out as identified. Future reports will provide updates to the Governing Body regarding the outcome of these audits identifying any theme and trends.

3. Patient Experience Surveys

3.1 Prescription Order Line (POL)

POL conduct a quarterly online survey, the results are shown below:

	Q4 18/19	Q1 19/20	Q2 19/20
No. completing the survey	8	7	3
No. recommend:			
likely/ extremely likely	2	4	1
unlikely/ extremely unlikely	4	2	1
neither likely or unlikely/ don't know	2	1	1
No. received by Complaints Team:			
Compliments	2	1	0
Concerns	1	0	0
Complaints	0	0	0
No. on the spot complaints received and dealt with at the time	4	5	2

3.2 Feedback for Q2

No actionable feedback was received during Q2.

3.3 Continuing Healthcare (CHC)

Controlled implementation of the 'How did we do' questionnaire continues (running September to November). During this time, the team are reviewing the process and some key changes have already been made:

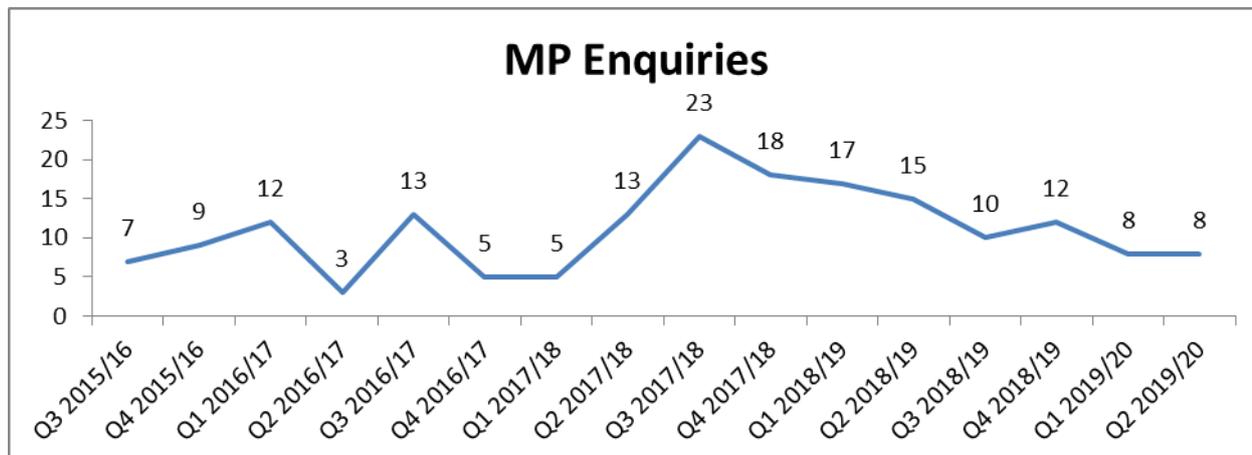
- now refer to the questionnaire in the initial introductory letter ahead of the DST taking place stating the importance of being able to capture people's service experience to help us inform future service developments to deliver continual service improvements.
- the final letter confirming the eligibility outcome from the DST includes the questionnaire and how to complete supported by a free post address.
- considering whether it would be advantageous to complete the questionnaire at the 12 week review giving the person and their family time to settle and reflect on the experience.

4. MP enquiries

When an MP raises a complaint on behalf of a constituent, this is classified as a formal complaint. The CCG also responds to queries from MPs that do not meet the criteria of a formal complaint. These are classified as MP enquiries.

4.1. Number of MP enquiries received

During quarter 2, we handled 8 MP enquiries, which is the same number as the previous quarter and mirroring the lowest point since Q2 2017/18 (see graph below).



Graph 3: Number of MP enquiries about CCG services and decisions

4.2. Timeliness of response

We aim to acknowledge MP enquiries within 2 working days and respond within 25 working days. Of the 8 MP enquiries handled during quarter 2:

- 8 (100%) were acknowledged within 2 working days
- 8 (100%) were responded to within 25 working days

4.3. Subjects of MP enquiries

The 8 MP enquiries received were wide ranging and included:

- Information regarding GP services, how to register with a GP and how patient on Special Allocation Service (formerly Violent Patient Scheme) can register with GP. (2)
- Supporting individual constituents regarding Individual Funding Requests for specialist treatment for OCD and bariatric surgery.(2)
- Seeking assurance regarding how care homes and their directors are monitored. (1)
- Concerns on behalf of carers' forum regarding referrals to Child and Adolescent Mental Health Services. (1)
- Queries regarding IVF policy and whether access will be widened. (1)
- Requesting guidance for constituent to access device for management of diabetes (1)

5. Recommendation for Governing Body

The Governing Body is asked to note the Complaints, MP Enquiries and Patient Feedback Quarter 2 2019/20 Report.

Paper prepared by: Liz Waterfall, Complaints Manager
On behalf of: Mandy Philbin, Chief Nurse
October 2019