

Complaints, MP Enquiries and Patient Feedback Report Quarter 4 2019/2020 and Quarter 1 2020/2021

Governing Body meeting

3 September 2020

Author(s)	Liz Waterfall, Complaints Manager
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Purpose of Paper	
To provide Governing Body with for Quarter 4 2019/2020 and Quarter 1 2020-2021 comparative data, themes, trends and patient feedback for complaints and MP enquiries	
Key Issues	
<ul style="list-style-type: none"> Formal complaints received: four in Q4 2019/2020 & 0 in Q1 2020/2021 MP enquiries received: nine in Q4 2019/2020 & 13 in Q1 2020/2021 NHS Complaints Process paused from 27 March to 1 July 2020 	
Is your report for Approval / Consideration / Noting	
Noting	
Recommendations / Action Required by Governing Body	
The Governing Body is asked to note the Complaints, MP Enquiries and Patient Feedback Quarter 4 2019/2020 and Quarter 1 2020-2021	
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? Principle Objective 2: Lead the improvement of quality of care and standards</p> <p>Description of Assurances for Governing Body The report provides assurance that there is a process in place to manage complaints</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.

National 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 4 2019-20 the CCG:

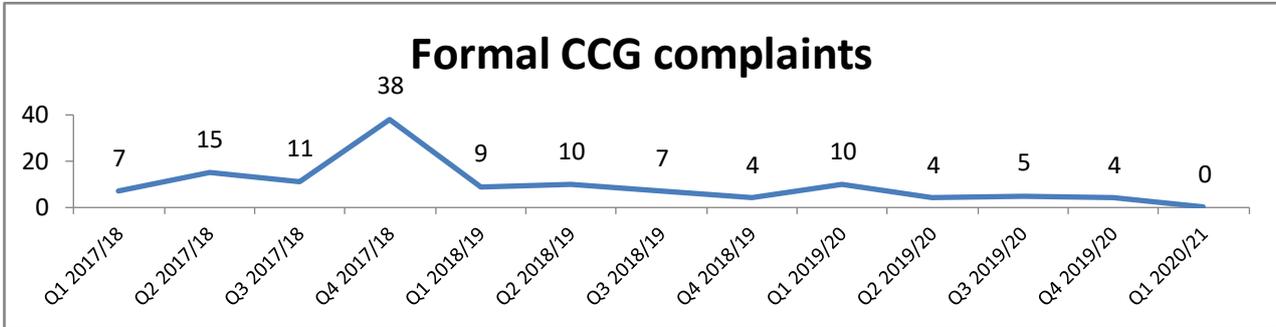
- Handled four complaints and three concerns about CCG services and decisions
- Contributed to one joint complaint led by another organisation

During Quarter 1 2020-21 the CCG:

- Received no complaints about CCG services and decisions
- Dealt with two concerns that related to CCG services and decisions

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.

The two quarters reflect a decrease in the number of complaints received, however for the last part of Quarter 4 2019-20 and the whole of Quarter 1 2020-21, the NHS Complaints process was 'paused' due to the Covid-19 pandemic. During this pause, the CCG continued to handle any concerns or enquiries raised and redirected them to other organisations as appropriate. In Quarter 4 there were 39 contacts and in Quarter 1, 33 contacts redirected to providers or commissioners to address. The NHS Complaints Process restarted on 1 July 2020.



Graph 1: Number of complaints about CCG services and decisions

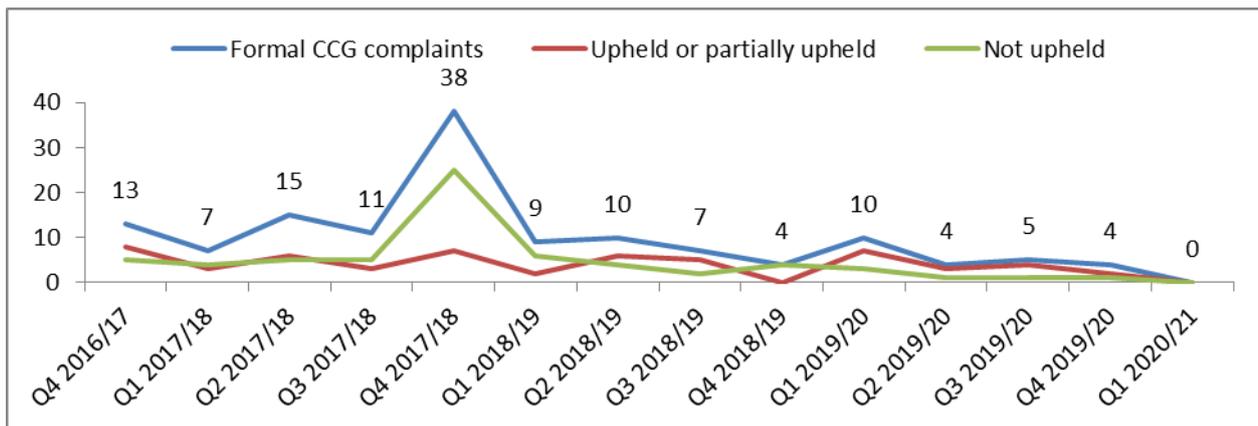
2.2. Timeliness of response

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

- four (100%) were acknowledged within two working days
- two (50%) were responded to within 25 working days

Two complaints were put on hold due to the Covid-19 pause, one has now been responded to and one, due to complexities involved, is still under investigation.

2.3. Complaints by outcome



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

	2018-19				2019-20				2020-21
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1
Upheld: Primary concerns were found to be correct.	2	4	1	0	2	1	3	1	0
Partially upheld: Primary concerns were not found to be correct, but our investigation identified some problems with the service provided.	0	2	4	0	5	2	1	1	0
Not upheld: Concerns were not found to be correct. ²	6	4	2	4	3	1	1	1	0
Unknown (complaint open or on hold).								1	0

Table 2: Complaint outcomes and open cases

2.4. Complaints and concerns by service area

		2018-19				2019-20				2020-21
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1
Commissioning and CCG policies decisions (inc POL)	Formal complaints	3	3	1	3	4	2	2	1	0
	Informal complaints and concerns	7	10	4	5	2	4	5	3	2

Continuing Healthcare, Funded Nursing Care and Personal Health Budgets	Formal complaints	6	7	6	0	5	2	3	3	0
	Informal complaints and concerns	4	7	5	4	2	3	2	0	0

Continuing Healthcare Previously Unassessed Periods of Care	Formal complaints	0	0	1	1	1	0	0	0	0
	Informal complaints and concerns	0	0	0	0	0	0	0	0	0

Table 3: Complaints and concerns by service area

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.

2.5. Parliamentary and Health Service Ombudsman (PHSO)

We did not receive any reports from Ombudsman during these Quarters.

2.6. Commissioning and CCG policies and decisions

In Quarter 4 2019-20, we handled one complaint in this area regarding access to community support services for people with a personality disorder.

We handled three concerns related to:

- difficulty getting through to Prescription Order Line (POL)
- why water vapour therapy (Rezum) for enlarged prostate was unavailable in Sheffield
- query about being unable to access specific medication (Valdoxan).

2.7. Continuing healthcare

We received three complaints regarding this area:

- dissatisfaction with how a decision support tool (DST) meeting conducted
- decision by CCG not to accept the outcome of an independent review panel and delay in communicating with family
- outcome of individual funding request for patient seeking treatment

The complaint regarding the conduct of the DST was fully investigated and responded to. The remaining two complaints were affected by the complaints pause, however, the reason for this was communicated to the complainants.

2.8 Actions from complaints

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

Dissatisfaction with decision support tool (DST) – a further DST was offered to the family and measures to address the issues raised put in place.

Decision by CCG not to accept outcome of an Independent Review Panel (IRP) and delay in communicating with family – while the outcome of an IRP is advisory, this highlighted the need to ensure appropriate communication for the decision takes place.

Access to community support services for people with personality disorder – following feedback from the patient, the service was made aware of comments regarding their experience.

2.9 Audit of actions from previous complaints

Work to collate actions from previous complaints and will be provided in future reports detailing the outcomes together with emerging themes and trends.

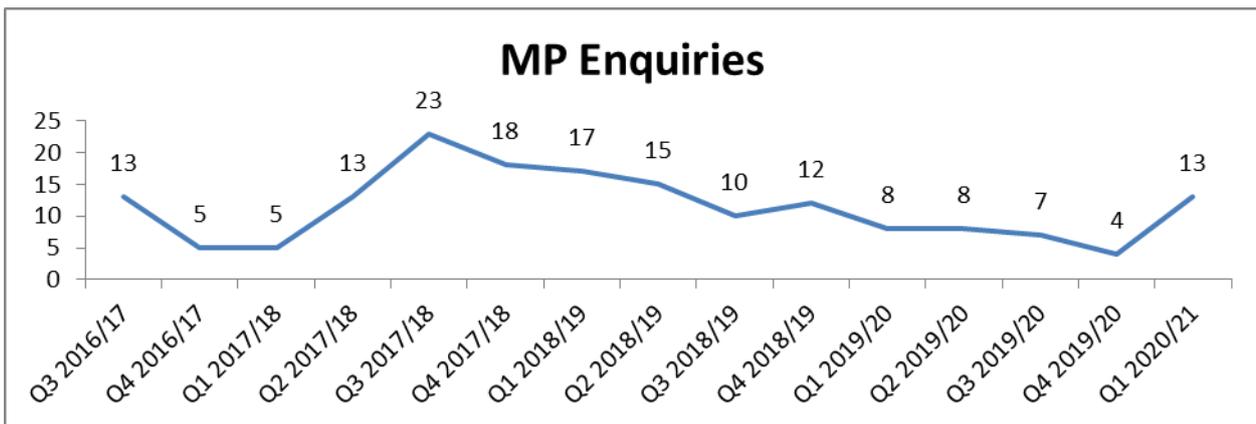
3. MP enquiries

When an MP raises a complaint on behalf of a constituent, this may be 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.

3.1. Number of MP enquiries received

During Quarter 4, we handled nine MP enquiries and in Quarter 1 2020-21, we handled 13 MP enquiries. The latter reflected concerns about the Covid pandemic which the CCG addressed. These figures may be higher, as in addition, MPs may contact individuals

within the CCG directly. To mitigate this, a request to direct all MP enquiries received to the Complaints Team has been circulated.



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

3.2. Timeliness of response

We aim to acknowledge MP enquiries within two working days and respond within 25 working days. It will be noted that the impact of Covid-19 restrictions affected acknowledgement and some response times.

Of the nine MP enquiries handled during Quarter 4 2019/20:

- eight (89%) were acknowledged within 2 working days
- six (67%) were responded to within 25 working days
- three (33%) were put on hold in line with complaints 'pause' due to Covid

Of the 13 MP enquiries handled during Quarter 1 of 2020/21

- 10 (77%) were acknowledged within two working days
- 13 (100%) were responded to within 25 working days.

3.3. Subjects of MP enquiries

For Quarter 4 2019-20 of the nine MP enquiries received, three were Covid related including:

- Supporting a family member who was shielding to access transport for relative's hospital appointment
- Raising the possibility of the use sniffer dogs in detecting Covid in patients
- Seeking information about payments to opticians during the pandemic.

The remainder were regarding:

- Funding levels for Sheffield GP practices
- Contractual arrangements regarding GP premises
- Issues raised on behalf of constituents regarding:
 - decision to decline an individual funding request
 - allocation of respite so that families can plan for the coming year
 - mental health care provided to a constituent (redirected to Sheffield Health and Social Care)
 - querying the provision of hearing aids

For Quarter 1 2020-21, of the 13 MP enquiries received, nine were Covid related:

- Queries on behalf of constituents regarding accessing testing (three)
- Clarification regarding availability of dental services (two)

- Provision of IT support for NHS staff working from home (one)
- Communication from GPs to shielding patients (one)
- Highlighting potential system for decontamination of PPE (one)
- With restart of services, requesting statistics in relation to cancer care (one)

The remainder related to:

- Clarification regarding policy on bilateral hearing aids
- Querying reason for work being carried out at Woodland View
- Issues raised on behalf of constituents included:
 - Advice on out of area treatment for patient with eating disorder
 - Support for relative of a patient being moved to a facility in Birmingham

4. Patient Experience Surveys

4.1 Community Swabbing Service Survey

The service began on 21 April 2020 and service users were asked to comment on the appointment booking process and their experience of the appointment itself. Between 21 April and 22 June 2020, 2,749 service users were booked for testing and 212 service users responded to the survey (8% response rate).

For the period 21 April and 22 June 2020 the weekly percentage of service users rating the service good or very good ranged from 83% - 100%.

Service users were asked what we could have done better and how could we improve the service. The swabbing service was well received with positive feedback about the supportive, brilliant, amazing and encouraging staff. Feedback from service users included all aspects of the service: from making a booking, communication of appointments, information being made available, navigating the test centres, swabbing process, and receiving results.

Repeated themes included better signage (result – improvements were made to signage) and communication issues before and after appointment (result - the webform was adapted to include confirmation the referral had been processed and information regarding response times being up to 24 hours). An overview of the feedback can be seen in Appendix 1 – You Said/ We did.

5. Recommendation

Governing Body is asked to note the Complaints, MP Enquiries and Patient Feedback Quarter 4 2019/2020 and Quarter 1 2020/21 Report.

Paper prepared by: Liz Waterfall, Complaints Manager

On behalf of Brian Hughes, Deputy Accountable Officer.

August 2020

Appendix 1

Swabbing Service: You Said / We Did Report

The table below provides a high level overview of some of the comments received based on people's experiences of the swabbing service and the actions taken to address where necessary and appropriate. This is based on survey responses received between May and June 2020.

Question	You Said (Themes)	We did/ didn't
What could have been done better	Communication Text message about appointment arrived after appointment date. Would have liked an automated response when completed online, rather than waiting for a phone call. Delay in request and phone call Useful to know when will be contacted	23/07/2020 – Webform adapted to include confirmation the referral has been proceeded (processed) and information re response times being up to 24hours
	Provide a timescale of when we'll hear back	See above
	Testing centres Owlerton – receiving postcode only vague, no clear signage Better signage	Signs were made and displayed with information and booking link.
	Instruction Registration pages online aren't phone friendly, ok on a laptop No clear instruction	Instruction and guidance given on a 1 to 1 basis by nursing staff when person attends for the service. There are laminated diagrams available at the testing sites which can be used by nursing staff to explain the procedure.
	Staff Staff to have better PPE	PPE worn by staff was in the line with the guidance provided by NHS England.
How could we improve the service	Testing centres Better signage, clear signs saying 'Testing' More information on the location	As above
	Process Self swabbing is difficult Can GPs do swabs?	Self-swabbing has been shown to be the most effective way of getting a good swab result, guidance is sent to patients prior to appointment to ensure they understand the process All staff are training to demonstrate the process for swabbing, whilst these can be done by GPs evidence

		suggests self-swabbing has been shown to be the most effective way of getting a good swab result.
	No good service	
Anything else you like to tell us	Staff Pleasant, helpful, brilliant, amazing, encouraging	
	Process Have we considered home testing if too unwell to drive	The mobile swabbing team currently visit patients in their own homes when moving into care facilities, the taxi service can be used to collect patients and bring to appointments
	Straightforward, clear instructions.	These are sent prior to the appointments
	Possible to be tested again for an official 'negative' before returning to work	Multiple tests may be part of the service moving forward for those staff who visit multiple sites
	How we handle negative test results and inaccurate tests	Patients sent confirming texts when results are inconclusive or inaccurate
	Liked how results were received back, can this be applied to future tests	The process of results via text messaging has been developed for this service as standalone however may possibly be incorporated for other tests in future
	Taken a long time for key workers without symptoms to be tested	Given the volumes of the asymptomatic care staff to be tested this was done in a variety of ways , one of which was for the swabs to be done in their workplace which may have delayed the process as this was not wholly controlled by PCS and was often based around the working hours of the individual.
	Result for another person received via text.	Text messages are sent to mobile numbers given by the patient these are linked through Systmone via an application called Accrx, the same process is used to confirm any appointments and for sending instructions. All admin staff have a process to ensure names

		and results are checked and filed to the correct record therefore if one has been done incorrectly this process has not been followed. Reiterated to all the team this process must be followed in order to safeguard patient information. This to date hasn't been raised through PCS feedback channels.
	No	
Have we asked the right questions	Think about adding something around symptoms Who else will know the results	The webform asks about symptoms Consent and information sharing is on the web form