Committee	Date	Classification	Report No.	Agenda Item No. 4. 2
Health Scrutiny Panel	25 January 2011	Unrestricted		
Report of:		Title:		
NHS Tower Hamlets		Complaints services in Tower Hamlets		
Presenting Officers:		Ward(s) affected:		
Caroline Alexander, Director of Quality Development, NHS Tower Hamlets		All		
Vanessa Lodge, Associate Director, Quality and Governance, NHS Tower Hamlets				

1. Summary

This paper summarises the complaints services from Barts and the London NHS Trust (BLT), East London NHS Foundation Trust (ELFT), Tower Hamlets Community Health Service, NHS Tower Hamlets (PCT), responding to questions raised at the Health Scrutiny Panel meeting held on 26th October 2010.

2. Recommendations

The Health Scrutiny Panel is asked to consider and comment on the information set out in the paper.

This paper summarises the response from Barts and the London NHS Trust (BLT), East London NHS Foundation Trust (ELFT), Tower Hamlets Community Health Service, NHS Tower Hamlets (PCT) on questions raised at the Overview and Scrutiny Panel meeting held on 26th October 2010 about the Complaints services in Tower Hamlets. A full PALS (patient advice and liaison service) report will be presented at the next meeting following the transition of the Panel.

Individual organisational responses are attached as appendices to this report.

How accessible the complaints process actually is in each of the provider organisations – i.e. how easy is it for local people to navigate the system?

- Each Trust has a designated PALS and Complaints departments
- Overall all four complaint departments feel that access to complaints was good
- Each Trust has PALS and Complaints information and links on the Trust's websites
- Good access to free phones numbers as well as direct external numbers
- Good relationship with Think/Link (Local Involvement Network) support in raising awareness of PALS and Complaints services
- Well distributed leaflets, posters within hospital wards, services and practices
- Proactive PPI/PPE work in the community and with services
- Regular liaison and update with wards, Practices and services
- Collaborative work with community organisations, marginalised communities, and faith groups in raising awareness of PALS and Complaints services
- "Tell us what you think" leaflets and options on the website
- NHS Choices information allowing patients and public to comment on practices and enable practices to respond and improve services as result of comments

How well front line practitioners and admin staff in primary care know how to help patients navigate the complaints system and that they inform patients that they can ask the PCT to investigate if they want a more independent response?

- NHS Tower Hamlets Trust Policy provides corporate induction to all new staff joining the PCT including general practice staff
- Regular corporate / internal training on complaints management and the implications of the 2009 Health and Social Care Complaints Regulation provided to Trust and independent contractors and their staff
- Regular presentation to practices/forums about the complaints department and implications of the 2009 Health and Social Care Complaints Regulation
- Outreach sessions in GP surgery/health centres provided
- Close working relationship with Practice Managers, Admin staff and receptionists
- Involvement in joint work and working forums to raise awareness of PALS & Complaints
- Promotion and event raising awareness of PALS & Complaints
- PALS & Complaints Posters and leaflets circulated in all independent contractor practices (GP, Dentists, Pharmacy, Opticians), community organisations, THINK / LINKS
- Complaints leaflet clearly states that PCT will investigate independently when requested

The rates of complaints from the Bangladeshi community – are very low. What measures are in place if there are blockages?

- The PALS and Complaints services feel that there aren't any blockages in the system for Bangladeshi patients and the public to raise or make a formal complaint. A representative proportion of Bangladeshi patients/public call and access the PALS service to raise concerns, which results in resolving their complaint at an early stage therefore becoming unnecessary to escalate or present as a formal complaint later on.
- A proportion of formal complaints from the Bangladeshi community are also received. Sometimes it is the lack of ethnicity data records that may imply that this is the case; however the teams feel that a good proportion of Bangladeshi patients are making formal complaints.
- With regards to East London NHS Foundation Trust (ELFT) it is accepted that complaints from the Bangladeshi community may be low. There is some information to suggest that they are more likely to access the PALS service. In terms of ELFT there is evidence that the Bangladeshi community is well represented in terms of Trust members. The Membership Office outlined how this had partly been achieved through attendance at events within the Bangladeshi community. It has been agreed that in future, where possible, staff from the Complaints department should attend these events with a view to hearing the views of the community on the complaints service and publicise its function more generally.

Appendices:

- 1. NHS Tower Hamlets (PCT)
- 2. Tower Hamlets Community Health Services (CHS)
- 3. East London NHS Foundation Trust (ELFT)
- 4. Barts and The London NHS Trust (BLT)

Appendix 1.

NHS Tower Hamlets (PCT) Complaints Update

How accessible the complaints process actually is in each of the provider organisationsi.e. how easy is it for local people to navigate the system?

NHS Tower Hamlets Complaints process provides easy access to patient and the public by having:

- A free phone and 3 external telephone lines
- Policy to provide a phone service between 9.30-4.30 between Monday to Friday.
 An answer phone facility when office is closed and when officers are out of office on meetings, training or dealing with other queries and complaints.
- Switchboard service at Aneurin Beven House (ABH) to transfer calls to the Complaints team
- PALS and Complaint teams detail on the Trust Website
- Drop in Service or appoint to see officers on request
- PALS and Complaints training provided to front line staff to be able to pick up issues early and resolve the situation then and there where
- "Tell us what you think" leaflets and website information- integrated information of PALS and Complaints about health and Social Care Complaints teams
- All 3 of the PALS and Complaints staff speak English as well as Bengali
 therefore are able to communicate with this client group easily and allow access
 without having to arrange to interpreting (for Bengali speaking callers)
- The team is based at Aneurin Bevan House, 81 Commercial Road, E1 which is reasonably centrally located and with easy transport facilities. PALS and the Complaints team are flexible in meeting patients and public requirement to meet more local or preferred venue such as a community centre or library or their health centre/GP surgery if appropriate.
- Collaborative PPI / PPE activities and joint work with community organisations and groups, health events

How well front line practitioners and admin staff in primary care know how to help patients navigate the complaints system and that they inform patients that they can ask the PCT to investigate if they want a more independent response?

- NHS Tower Hamlets Trust policy provides induction programme to all new staff joining the PCT which includes general practice staff.
- Outreach sessions in GP surgery/health centres provided
- Close working relationship with Practice Managers, Admin staff and receptionists
- Involvement in joint work and working forums, events to raise awareness of PALS & Complaints
- PALS & Complaints Posters and leaflets circulated in all independent contractor practices (GP, Dentists, Pharmacy, Opticians), community organisations, THINK / LINKS (local involvement network)
- Regular corporate Complaints training on managing complaint and the implication of the 2009 NHS complaints regulation
- Regular PALS and Complaints presentation and training providing to GP and practice staff, including dentists and dental practice staff

The rates of complaints from the Bangladeshi community - are very low. They want us to understand more fully why and put measures in place if there are blockages.

The PALS and Complaints department does not feel there are any blockages, a representative proportion of Bangladeshi patients/public call and access the PALS service to raise concerns, with would result in resolving their complaint at an early stage therefore becoming unnecessary to escalate or present as a formal complaint later on. We also receive a well proportion of formal complaints from the Bangladeshi community as a result of wide publicity and collaborative activities with the wider health services and the communities.

For period January 2010 to December 2010 PALS and Complaints team have dealt with 547 recorded concerns/cases as well as 1200 adhoc enquiries; a total of 1747 PALS enquiries of which

- Bangladeshi 118
- White- 279
- Unknown 150
- All Adhoc cases are unknown

Appendix 2

Tower Hamlets Community Health Services (CHS) Complaints Update

How accessible the complaints process actually is in each of the provider organisations – i.e. how easy is it for local people to navigate the system?

Tower Hamlets Community Health Services' (CHS) starting point for considering access to the complaints systems is to look at the services we provide and the client group and base our access methods on these. For example, as CHS provides and audiology and Speech and Language Therapy Service, we expect that service users in the client group are able to access the system conveniently. Therefore, a generic e-mail address accessed by all team members is in place. There is also a confidential fax line, and a freepost address, as we provide services for older people, some who still prefer to correspond by writing and posting in their concerns.

There is a free phone number for landline users, thereby enabling them to make free calls and there are 4 other direct landline numbers which mobile phone users find much cheaper. CHS' local policy is that between the hours of 9am – 5pm, Monday to Friday, there is always someone to answer the phones and the phones are never turned over to the voice messaging service during these hours except all team members are on the phone at the same time or callers call out of hours. That way if service users prefer not to contact the services they are concerned about directly they can access the complaints team more quickly.

Through training, staff are made aware of the principals of attempting to resolve issues in the first instance before they forward clients on to the formal complaints process as a last resort.

CHS uses local voluntary services in the community as a source of access and liaises closely with such groups via PALS out reach work.

The service's details are advertised in all health centres and areas patients frequent and also on the Trust's website. The full complaints policy is also uploaded on the website so service users are aware of how the service operates and the process their complaint goes through.

The complaints team engage in patient facing discovery interviews as part of their PALS workload and use that opportunity to raise awareness about the system in a non intrusive manner

The service is also promoted through the advocacy service so that service users without English as a first language can get in touch via an advocate

How well front line practitioners and admin staff in primary care know how to help patients navigate the complaints system and that they inform patients that they can ask the PCT to investigate if they want a more independent response?

Through complaints training, the service advocates the use of PALS skills by everyone at front line as a way of diffusing situations and attempting to resolve concerns for service users. Staff are aware through training and induction that the next course of action, if they are unable to resolve an issue, is to either direct service users to the complaints team or to contact them directly for advice. The team provide a drop in

service, so staff on site often walk patients over to meet the team, or send them along for further assistance. Literature displayed around the community health service sites guide both staff and patients and gives a summary of what to do.

The rates of complaints from the Bangladeshi community are very low. What measures are in place if there are blockages?

Firstly the use of PALS for the Bangladeshi community seems a more favourable option, therefore it is not that that the rate of complaints from the Bangladeshi community is low, rather, sufficient ethnicity data to reflect the number of contacts for any particular ethnicity group was unavailable at the time of reporting

CHS have therefore tightened up on how this data and demographics generally is collated.

Appendix 3 East London NHS Foundation Trust (ELFT) Complaints Update

How accessible the complaints process actually is in each of the provider organisations – i.e. how easy is it for local people to navigate the system

In terms of ELFT, I feel it is reasonably accessible. The website has a box with a direct link through to PALS – there is then information about how PALS can be contacted, including free phone telephone number and an email address. In addition, the Trust's complaints service is separately listed on the homepage, again with a link to PALS, as well as details of how to contact the complaints service. The latter includes a free phone, freepost address and a leaflet that can be downloaded with a form to make a complaint (or comment or compliment). There is no separate email post-box for complaints because of it is felt that this may increase the risk of sharing confidential information about service users on insecure networks.

In addition, as noted in earlier submission, the Trust publicises complaints/ PALS through leaflets and posters in its wards, Community Mental Health Teams (CMHT) and other service centres. Since September 2010, there have been concerted efforts on the part of FLORID (a service users' group) to audit ward, CMHTs and centres to ensure that these are in place and readily available to service users. There is now a laminated card next to the Patient's telephone on all wards, with details of the free phone. There is also a locked display cabinet on wards exhibiting posters.

Information about the Complaints Service is included in Welcome Packs which are distributed to patients on our wards, service users using particular services for the first time and carers.

The Complaints Manager is due to write to all CMHT / Ward Managers to explain how leaflets can be ordered directly from the service.

Advocacy services operate throughout all the localities, supporting complainants to make complaints.

The Free phone telephone is staffed weekdays from about 8:00 to 5:30 daily. The service estimates that there is a fairly even spread in terms of complaints coming through in by telephone and letter. The service is not aware of any particular difficulties faced by service users in getting through to the service – for example, service users do not allude to difficulties they have experienced getting through.

How well front line practitioners and admin staff know how to help patients navigate the complaints system and that they inform patients that they can ask the Trust to investigate if they want a more independent response?

All incoming staff attends an induction which includes a module presented by the Complaints Manager / PALS officer on their respective services. The Complaints Manager also does a presentation for Junior Doctors on rotation every six months. She holds four half day complaints training sessions every year for staff with responsibility for investigating complaints.

However, in addition, she runs similar sessions in localities, on wards and within particular services such as CAHMS, the Older People's Team for managers and other

staff. She also runs sessions for groups of professionals, such as OTs and Administrators. For the year 2010, a further 12 sessions were run on this basis.

Low reporting of complaints from Bangladeshi community.

It is accepted that complaints from the Bangladeshi community may be low. There is some information to suggest that they are more likely to access the PALS service. In terms of ELFT there is evidence that the Bangladeshi community is well represented in terms of Trust members. The Membership Office outlined how this had partly been achieved through attendance at events within the Bangladeshi community. It has been agreed that in future, where possible, staff from Complaints should attend these events with a view to hearing the views of the community on the complaints service and publicise its function more generally.

'Number of Bangladeshi Members: 936 Current Membership total: 8410

Total Bangladeshi population in Trust area: 93,248

So 11% of our total public members are Bangladeshi which is pretty close to being representative of the Bangladeshi population of around 14%

Last year the Membership Office attended two Bangladeshi specific events to engage with and recruit Members. These include 'Community Fair' and 'Bangladeshi Disability Awareness Day Event'.

The Complaints Service will be looking to canvass the views of its Bangladeshi membership to find out their views on the complaints service and ways it might be made more accessible to the Bangladeshi community.

Appendix 4 Barts and London Hospital Trust Complaints Update

Below are screen shots that show the steps to use (I assume that the other means of accessing our complaints process, as previously mentioned at the meeting, are already noted. I'm thinking of things such as our Tell Us booklets - both standard and easy read versions?):

Step 1 click on "For patients and visitors" tab:

Step 2 click on: "Comments, suggestions and complaints"...Tell us what you think:

http://www.bartsandthelondon.nhs.uk/forpatients

Tell us what you think



Comment, suggestion or complaint

We are committed to providing a high-quality service for all our patients, and will do everything possible to make sure that your visit to our hospital is as comfortable as possible. We are constantly developing the services we provide for patients and visitors, and would welcome your input.

If you'd like to make a comment, suggestion or complaint, please do one of the following:

- Speak to the staff at your clinic/department
- Read the <u>Tell us what you think leaflet</u> and complete and return the form. The leaflet can be downloaded from the link above or picked up from clinics and wards in the hospital.
- <u>Download an **Inpatient feedback form** or e-mail your complaint to complaints@bartsandthelondon.nhs.uk</u>
- Contact our Patient Advice and Liaison Service (PALS) on tel 020 7943 1335 or email PALS@bartsandthelondon.nhs.uk

Alternatively you can fill in the below feedback form online.

_	Patient details	
Name (Mr/Mrs/Ms/Miss)		

Hospital No. (If known)		
-	<u>Address</u>	
-	4	
Tel No. (incl. code)		
Date of birth		
Email address		
-	If you are completing this form for somebody else, please give your details below	
Name (Mr/Mrs/Ms/Miss)		
<u>Address</u>		
Tel No (incl. code)		
Email address		
Relationship to patient		
-	Your comments, complaints or suggestions	
-		
-	The next set of questions allows us to monitor who gives us feedback so we can ensure everyone has equal opportunity to raise issues and concerns. You do not have to complete this section although we would encourage you to. We can assure you that your answers will have no bearing on your right to complain or how your complaint is dealt with.	
-	<u>Age</u>	
_	Child (16 or under)	

	Adult (17-64)
	Older adult (65 or above)
	Adult (17-64) Older adult (65 or above) I would rather not answer
-	Gender
	Male D
-	Female
	I would rather not answer
-	Sexuality
	□ Gay
	Lesbian
-	Lesbian Heterosexual Bisexual I would rather not answer
	Bisexual
	I would rather not answer
-	Ethnic origin
	Bangladeshi
	Indian Pakistani Other Asian background White & Asian
	Pakistani
	Other Asian background
	White & Asian
	White & Black African
	□ Whi & Black Caribbean □ Other mixed background □ Caribbean □ Other black background □ British □ Irish □ Other White background □ Any other ethnic group
-	Other mixed background
	Caribbean
	Other black background
	British
	<u> </u>
	Other White background
	I would rather not answer
-	Religion or beliefs
	Atheism
-	Buddhism

	Christianity	
	Hinduism	
	□ Islam	
	☐ Jainism	
	☐ Judaism	
	Sikhism	
	Other	
	☐ I would rather not answer	
	Disability Discrimination Act 1995	
	Disability Discrimination Act 1995	
	Under the terms of the Act a disability is defined as a 'physical or mental impairment which has a substantial and long term effect on a person's ability to carry out normal day to day activities'. NHS employers welcome applicants from disabled people.	
	Do you consider yourself to have a disability?	
	☐ Yes☐ No☐ I would rather not answer	
If yes, please give the details		
	Submit Query Reset	

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Below is a bullet point and chart (7) from a report Sam Rashid put together re PALS (note the entry re the Bangladesh community), to add to complaints data already submitted at the Health & Scrutiny Panel.

<u>Barts and the London Trust PALS contact and ethnicity Data for 2010</u> Forms.HTML:Reset.1

- The service dealt with 2215 cases this year compared to 2309 cases last year in 2009
- PALS strive to ensure that the service is available in a variety of ways, and is committed to making the service as accessible as possible. As with past trends the main method of contact continues to be by telephone.
- The majority of enquires to the service this year falls under the 'Issues and Concerns' category. Cases under this category are typically more complex and

- enable us to act as an early warning system, potentially preventing issues escalating to a formal complaint
- The team continues to provide a fast and responsive service with 98% of cases being resolved within 24 hours. These figures are among the highest turnaround figures since the services inception in 2000.
- Although PALS are part of the Trust the service has an independent and confidential approach to their role and clients provide as much or as little personal detail to PALS as they feel comfortable to do so and details are recorded as appropriate to the enquiry. As a result this impacts on how individual service user ethnicity data can be captured by the service
- Analysis of previous ethnicity data show a slight increase in the number of Bangladeshi clients accessing the service who choose to provide individual ethnicity information.

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BLT PALS clients Ethnicity profiles	Tota <u>I</u>
White - British	<u>548</u>
White - Irish	<u>21</u>
White - other white	<u>70</u>
Mixed white and black Carribean	<u>2</u>
Mixed white and black African	<u>2</u>
Mixed white and Asian	<u>1</u>
Other mixed	<u>7</u>
<u>Indian</u>	<u>27</u>
<u>Pakistani</u>	<u>18</u>
<u>Bangladeshi</u>	<u>84</u>
Other Asian	<u>22</u>
Black Carribean	<u>35</u>
Black African	<u>7</u>
Other Black	<u>41</u>
Chinese	<u>11</u>
Other ethnic category	<u>40</u>
Not stated	<u>209</u>
<u>Totals:</u>	<u>1145</u>

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