

Committee Health Scrutiny Panel	Date 22 July 2008	Classification Unrestricted	Report No.	Agenda Item No. 4
Report of: Barts and The London NHS Trust		Title: Complaints Overview, performance and quality Improvements		
Originating Officer(s): Jane Canny/ Jay O'Brien		Ward(s) affected: all		

1. Summary

- 1.1 Central complaints management is undertaken by the quality development team. The team are responsible for providing support for clinical services to follow the NHS complaints procedure; meet national and local standards; liaise with external bodies; assist with independent reviews and to monitor and report on the management and themes of complaints received by the Trust.
- 1.2 Since April 2008, there has been an increase in the amount of formal complaints received in the Trust, compared to the same period last year. Much of the increase is due to the problems experienced by patients accessing the appointment system. Alerts from the complaints team and PALS have prompted early detection and actions from the executive team. There is an increase in the number of complaints about diagnosis and treatment; however complaints about Transport, one the Trust's top five causes of complaint, have decreased following actions taken by the Trust and Carillion.
- 1.3 This year, the team have undertaken surveys of complainants and of staff who have been involved with the complaint process, in order to better understand what is wanted from the team and the process. The results have supported investment in staff training and provided some clear messages from complainants about resolution and letting them know what has changed as a result of their complaint
- 1.4 We are developing our work to focus on resolving patients' complaints and concerns through proactive joint working with PALS and the Patient Public Involvement team. The teams will be reviewing and making recommendations for change in response to the new complaints process.
- 1.5 Barts and the London Trust were named as the fourth best Trust in the country for responding to and answering complaints referred to the Health Care Commission

2. Recommendations

- It is recommended that Members:
- 2.1 Receive the presentation, note improvements made and the actions identified for future development
- 2.2 For the panel make suggestions for further improvements to the complaints system

LOCAL GOVERNMENT ACT, 2000 (SECTION 97)

LIST OF "BACKGROUND PAPERS" USED IN THE PREPARATION OF THIS REPORT

Background paper	Name and telephone number of and address where open to inspection
Directorate Complaints Performance from 1 April 08 – 3 June 08	
Annual Complaints Report 06/07	Shanara Matin
Presentation for the Committee July 08	020 7364 4548
Scrutiny Review File held in Scrutiny Policy Team	

3. Background

3.1 Please see Directorate Complaints Performance Report (01/04/08 – 30/04/08)

4. Concurrent Report of the Assistant Chief Executive (Legal Services)

4.1 N/A

5. Comments of the Chief Financial Officer

5.1 N/A

6. Equal Opportunity Implications

6.1 All complaints received are monitored for complaints about equalities and diversity

7. Anti-Poverty Implications

7.1 N/A

8. Sustainable Action for a Greener Environment

8.1 N/A

9. Risk Management Implications

9.1 Aggregated with risk data