

**NHS DORSET CLINICAL COMMISSIONING GROUP
GOVERNING BODY MEETING
CUSTOMER CARE ANNUAL REPORT**

Date of the meeting	18/07/2018
Author	J Green, Head of Information Governance/Customer Care
Sponsoring Board member	Dr S Yule, Locality Chair for North Dorset
Purpose of Report	To document the management of complaints from 01 April 2017 to 31 March 2018.
Recommendation	The Governing Body is asked to note the report.
Stakeholder Engagement	Patients/members of the public are involved in the management of complaints.
Previous GB / Committee/s, Dates	Audit and Quality Committee: 04 July 2018

Monitoring and Assurance Summary

This report links to the following Strategic Objectives	<ul style="list-style-type: none"> • Prevention at Scale • Integrated Community and Primary Care Services • One Acute Network • Digitally Enabled Dorset • Leading and Working Differently 		
	Yes [e.g. ✓]	Any action required?	
		Yes Detail in report	No
All three Domains of Quality (Safety, Quality, Patient Experience)	✓	✓	
Board Assurance Framework Risk Register	✓		✓
Budgetary Impact	✓		✓
Legal/Regulatory	✓		✓
People/Staff	✓		✓
Financial/Value for Money/Sustainability	✓		✓
Information Management & Technology	✓		✓
Equality Impact Assessment	✓		✓
Freedom of Information	✓		✓
I confirm that I have considered the implications of this report on each of the matters above, as indicated	✓		

Initials: JG

1. Introduction

- 1.1 This report has been developed in accordance with the National Health Service Complaints (England) Regulations 2009 which states that there is a requirement for all NHS organisations to prepare an Annual Complaints Report.
- 1.2 The report outlines the complaints, comments, concerns and compliments received by Dorset Clinical Commissioning Group (CCG) during 2017/18. It also documents enquiries raised by MP letters and through the CCG Feedback and Involve Mailboxes.
- 1.3 The CCG also receives a number of complaints that have been sent:
- directly to a provider, copied to the CCG;
 - about a service provider to the CCG.
- 1.4 The report aims to provide assurance that complaints are appropriately responded to, trends are monitored and, for complaints about the CCG, improvements are made. Provider complaints are monitored by the Professional Practice Lead.
- 1.5 The service provided by the CCG combines both a complaints and advice service to those contacting Dorset CCG via the:
- complaints telephone number, email address and postal address;
 - feedback email inbox and/or the Involve email inbox.
- 1.6 The CCG aims to be open, transparent and honest in the complaint responses.

2. Statutory Requirements

- 2.1 Under the NHS Constitution every person has the right to:
- make a complaint about NHS Services;
 - have that complaint acknowledged within three working days;
 - have it properly investigated;
 - discuss the manner in which the complaint is to be handled and to know the period within which the investigation is likely to be completed and the response sent. This should include an explanation of the conclusions and confirmation of any actions identified in consequence of the complaint;
 - take their complaint to the Parliamentary and Health Ombudsman if they are not satisfied with the way the complaint has been dealt with.

- 2.2 All (100%) complaints received were acknowledged within the mandatory three working days. This was achieved by working with Directorates in order to improve their knowledge of complaints handling.

3. **Accountability and Monitoring of Complaints**

Dorset Clinical Commissioning Group

- 3.1 Quarterly complaints reports are provided to the Audit and Quality Committee and the Quality Group, with a short summary provided to the Governing Body, also on a quarterly basis.

- 3.2 The Concerns, Resolution and Learning Group meet on a quarterly basis to discuss complaints and identify actions to improve the outcome of complaints for complainants.

- 3.3 The Customer Care Team continually strive to identify ways to improve the complaints process. To help achieve these aims the team work towards meeting the Parliamentary and Health Service Ombudsman's Principles of Good Complaint Handling:

1. Getting It Right:

All complaints receive a detailed response from the Chief Operating Officer of the CCG.

2. Being Customer Focused:

All complaints are managed with the complainant in mind and it is the intention of the Customer Care Team to increase communication with the patient. The Directors have agreed that the named Investigating Officer will involve and update the patient on a regular basis.

3. Being Open and Accountable:

Dorset CCG encourages patients to complain if they are dissatisfied and all complaints are responded to in full, with the response explaining why issues occurred and what is being done to prevent them from recurring.

4. Acting Fairly and Proportionately:

Complaints are subject to thorough investigations by the Directorates involved and, where applicable, also by providers.

5. Putting Things Right:

Where failings are identified, the CCG is open and transparent in acknowledging mistakes and apologising for these. Action to prevent further occurrences are also identified and communicated.

6. Seeking Continuous Improvement:

Complaints are regularly reviewed by the Concerns, Resolution and Learning Group and any outcomes notified to the relevant Directorate.

Action Plan Trackers

- 3.4 Action Plan Trackers were introduced by the Customer Care Team in order to identify learning outcomes from CCG complaints. These are now well established and reported to the Quality Group and the Audit and Quality Group on a quarterly basis.

Themes and trends identified are:

- Communication;
 - Delays in the Continuing Health Care (CHC) process.
- 3.5 Action currently being undertaken by the CHC Team is a review of communications in general, including revision of letter templates. The revision of templates is also in line with the new CHC Framework to be in place in October 2018.
- 3.6 The Customer Care Team continue to review draft response letters to ensure
- quality and accuracy of content;
 - that they are open, clear and empathetic;
 - use of plain English and less jargon.

Providers

- 3.7 When the CCG receives a complaint relating to commissioned services, consent is sought from the complainant to pass their complaint to the provider for investigation. The provider will respond directly to the complainant with a copy to the CCG.
- 3.8 All complaints relating to service providers, which are received by Customer Care, are shared with the Quality and Contract Monitoring Team and the Professional Practice Lead for review and action if required.
- 3.9 The Professional Practice Lead continues to conduct “deep dive” reviews of complaints within the main service providers. The focus is on how frontline staff deal with concerns as they are raised, ensuring a person-centred process and how the organisation uses learning from complaints in quality improvement of services.

4. Number of Complaints Received

- 4.1 During the year 2017/18 Dorset CCG received a total of 161 complaints from its resident population which demonstrates a reduction from 183 received in the previous year. 83 of these related to the CCG; the remaining 78 were provider led and responded to directly by the individual organisation.
- 4.2 **Table 1** demonstrates the number of complaints received during each quarter broken down into CCG and Provider responsibility.

Table 1: Complaints received by the CCG during 2017/18					
	Q1	Q2	Q3	Q4	Total
Total no. of complaints received	39	39	28	55	161
No. of complaints responded to	23	18	11	31	83
No. of complaints forwarded to providers for direct response	16	21	17	24	78

4.3 **Table 2** demonstrates the performance (by quarter) in relation to providing final responses within the target timescale.

Table 2: Performance data relating to final complaints responses being issued within target timescales (25 working days)					
	Q1	Q2	Q3	Q4	Total
No. of complaints responded to	23	18	11	31	83
No. of complaints where the CCG's final response was sent within agreed timescales (25 working days)	18	19	15	19	71

- 4.4 The target for responding to a complaint is 25 working days however, as the above table indicates, the CCG has been unable to meet this target in 1.5% of cases. It should be noted that the timescale is not a statutory requirement and, if the investigation is going to take longer than 25 days, a timescale can be agreed with the complainant.
- 4.5 Those not attained were in the main due to late responses from Directorates. This continues to be addressed.
- 4.6 The timely investigation and response to complaints is vital. Timescales are being closely monitored and the Customer Care Team will aim to ensure that the performance is improved.
- 4.7 Trends from complaints received relating to the CCG only, are demonstrated in the table below.

Trends	Number
Commissioning decisions – provision of services	10
NHS Funded Continuing Health Care - current	41
NHS Funded Continuing Health Care - retrospective	21
Individual Patient Treatment funding	3
General	8

4.8 Within the past 12 months the majority of complaints received by the CCG have related to Continuing Healthcare. Themes which have emerged are:

- timescales to complete both retrospective reviews and appeals;
- unclear/lack of communication to patients regarding the process or delays;
- non-eligible decisions.

5. Upheld Complaints

5.1 Table 3 demonstrates the number of complaints upheld.

Table 3: Well Founded/Upheld Complaints					
	Q1	Q2	Q3	Q4	Total
Total no. of CCG complaints	23	18	11	31	83
No. of CCG complaints upheld or partially upheld	3	5	5	9	22
% of CCG complaints upheld or partially upheld	13.4%	28%	45.4%	29%	27%
No. of CCG complaints not upheld	20	13	6	22	61

5.2 Complaints were upheld mainly due to a mistake(s) made during process.

6. Compliments relating to Dorset CCG

6.1 Nine compliments were received by the CCG in relation to services provided.

7. Complaints about Service Providers

- 7.1 Dorset CCG either received, or was copied into, 78 complaints about service providers.
- 7.2 Complaints about providers, or any emerging themes, are discussed at Contract Management and Quality meetings with the individual provider.
- 7.3 Themes within complaints about providers are in regards to clinical treatment and care, staff attitude and access to treatment/waiting times.
- 7.4 In addition, the Professional Practice Lead reviews themes and trends, in complaints received by the main providers in Dorset. The purpose is to provide the CCG with assurance as to how complaints are handled, outcomes and dissemination of learning through the organisation.

8. Compliments relating to Service Providers

- 8.1 Six compliments were received relating to providers.

9. Parliamentary and Health Service Ombudsman (PHSO)

- 9.1 All complainants are made aware that they have the right to contact the PHSO if they remain unhappy with the response to their complaint. The CCG has been informed of two referrals to the Ombudsman during 2017/18. The PHSO has partially upheld one complaint and declined to investigate another.

10. Number of MP Letters and Feedback Queries Received

- 10.1 Dorset CCG received **59** letters from MPs during 2017/18 which have been responded to. The enquiries concerned a range of issues, including:
- Continuing Care assessments and applications;
 - Retrospective Continuing Healthcare claims;
 - Individual Patient Treatment funding;
 - Personal Health Budgets;
 - Mental Health Service provision;
 - Commissioned services, including the Pain Service and non-emergency transport services;
 - The Clinical Services Review;
 - Other enquiries related to individual concerns of constituents.
- 10.2 809 enquiries from the CCG Feedback and Involve inboxes were dealt with during the year. The enquiries cover a large number of issues, including

- contact details;
- raising complaints;
- invitations and flyers;
- health involvement network queries

All were forwarded to the relevant area to provide a response.

10.3 In addition Customer Care also received, and responded to, **110** miscellaneous enquiries relating to 18-week referral to treatment, medicines management, mental health services, the prescribing of Free Style Libra and commissioned services.

11. Priorities and Actions for the 2018/19

- 11.1 The Customer Care Team will continue to improve the organisational complaints management.
- 11.2 Introduce a patient satisfaction/experience survey. A trial by Dorset Healthcare has been reviewed by the Wessex Complaints Group, of which Dorset CCG is a part. The Customer Care Team will look to implement the survey.
- 11.3 Introduce further direct verbal communication with complainants by both the Customer Care Team and the Investigating Officer.
- 11.4 Introduce a regular independent over view of 'difficult' complaints by the Concerns, Resolution and Learning Group.
- 11.5 Work closely with the relevant teams to respond to issues when they are raised and identify further ways of how complaints can be used to support the CCG in its ongoing quality assurance of the services it commissions

12. Conclusion

- 12.1 Generally there is a decrease in the number of complaints received by the CCG. The area with the largest number of complaints is within Continuing Healthcare.
- 12.2 The Customer Care Team continue to work with Directorates to improve the quality of complaint handling and the Concerns, Resolution and Handling Group are disseminating learning that has arisen from complaints, especially relating to Continuing Healthcare.
- 12.3 All main providers within Dorset have made improvements to their complaints handling processes in the last year.
- 12.4 The Professional Practice Lead will continue to work with providers to review the quality of complaints handling with the aim of improving the patient and carer experience of the process.

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