



Isle of Man
Government
Reiltys Ellan Vannin



REPORT TO TYNWALD ON HEALTH COMPLAINTS 2014/15 and 2015/16

Department of Health and Social Care
Rheynn Salynt as Kiarail y Theay

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1. Foreword by the Minister for Health and Social Care



Kate Beecroft

Hon. Kate Beecroft, MHK
Minister for Health and
Social Care

To The Hon. Stephen Rodan, MLC, President of Tynwald,
and the Hon. Council and Keys in Tynwald assembled.

The Department of Health and Social Care takes the handling of complaints very seriously but unfortunately sometimes even our high standards do slip.

I hope this report will demonstrate that, given the huge amount of patient interactions which take place within the National Health Service every year, the numbers of people who have reason to complain is remarkably low and service satisfaction levels are high.

The vast majority of the complaints which are received are handled by local resolution and only a very few result in the involvement of the Independent Review Body.

Throughout the Department, the staff and our contractors are trained to ensure that where areas for improvement are identified as a consequence of a complaint these changes are implemented as soon as possible and positive learning is encouraged.

2. Introduction

This report covers the two years, April to March 2014/15 and 2015/16.

The Department of Health and Social Care ("the Department") Complaints report is a requirement of the National Health Service (Complaints) Regulations 2004 ("the Complaints Regulations"), which are made under the National Health Service Act 2001 ("the NHS Act 2001"), and must be laid before Tynwald.

The report will detail by category the number of health complaints received by the Department and, where relevant, its commissioned or contracted service providers.

The report will also summarise how the Department has handled those complaints for which it has direct responsibility.

Those complaints which have been referred for resolution to the National Health Service Independent (Complaints) Review Body ("the IRB") will be reported on in the IRBs own separate report which is also laid before Tynwald.

Under the National Health and Care Service Act 2016 ("the NHCS Act 2016"), which has been announced in Tynwald and will come into operation early in 2017, the Department intends to develop an amalgamated complaints process which will align both health and social care complaints processes in the future.

Currently, complaints about adult services and children and families social care are reported through the annual Isle of Man Government complaints report to Tynwald.

The Department views complaints as an opportunity for service users to bring to its attention any areas of dissatisfaction, and also as an opportunity for service providers to learn lessons and share experiences, with a view to reducing the number of complaints about similar issues in the future.

By putting in place processes for dealing with complaints the Department aims to provide any service user (or their representative) with an opportunity to have their concerns considered in a fair, transparent and equitable manner.

Under the Complaints Regulations there are two stages to the complaints process, local resolution and referral of the complaint by the complainant to the IRB.

This report will include data from the following service areas:-

- Community services
- Contracted services (GPs, MEDS, pharmacies, dentists and opticians)
- Nobles Hospital
- Mental Health
- Public Health.

3. The Complaints Process

When a service user wishes to complain about any aspect of the health services provided by, or on behalf of, the Department under the NHS Act 2001 they should, in the first instance, talk to the person who is most directly involved in their care.

If they are being treated in Hospital this may be the Consultant in charge of their care or the Nurse in charge of the ward. In the Community it may be any health care professional, such as their GP or health visitor, or a practice manager.

At this stage the matter is not considered to be a formal complaint and as long as both parties are content the matter can be dealt with through dialogue and does not need to be recorded in writing.

However, the service user should always be made aware that they can ask for their complaint to be referred for more formal review through local resolution or that they can refer their complaint to the IRB.

Local Resolution

The Local Resolution stage of the complaints process starts as soon a service user asks for this to happen and at this point the complaint must be recorded, including for the purposes of this report.

Both the Department and contracted service providers are required to appoint a complaints manager to record and handle all complaints.

Most complaints received by the Department are resolved as part of local resolution but, again, service users should be made aware that if they remain unhappy they can refer their complaint to the IRB.

Independent Review Body (Health)

The procedure to be followed by the IRB is set down in the NHS (Complaints) Regulations 2004 and the NHS (Independent Review Body) Regulations 2004.

Under the current regulations only the service user can refer a complaint to the IRB. However, on implementation of the NHCS Act 2016, the Department will also have the ability to refer a complaint to the IRB for resolution.

This report will only mention the actions which have been taken by the Department following receipt of reports from the IRB. For more detailed information please refer to the IRB's own annual report to Tynwald.

Complaints by Service Area

The following tables will show the total number of complaints received in each service area, a breakdown of the categories of the complaints received, and, in respect of services provided directly by the Department, a summary of the outcomes of the complaints.

It should be noted that some complaints cross service areas so they could be recorded as having been received more than once in these statistics. Also, in some of these cases, the handling of the complaint will be centralised so only one outcome may be recorded in the area where the complaint was handled.

For example, a complaint which includes an element of both Community Services and Nobles Hospital care may be recorded as received in both areas. If the complaint was mainly to do with hospital care, the handling and disposal of the complaint would then be dealt with by the Complaints Team at the hospital. The outcome for that complaint would then be recorded in the hospital statistics but not in the Community Services figures.

4. Community Services

Service Areas	Complaints Received 2014/15	Complaints Received 2015/16
Community Nursing	3	1
MEDS	7	-*
Salaried Dental	4	4
Ambulance	6	2
RDCH	4	3
Prison	3	1
SPLT	3	1
Podiatry	1	0
Prosthetics	-**	1
Occupational Therapy	-**	1
Physiotherapy	-**	7
Family Planning	-**	2
TOTAL	28	23

* - 2015/16 MEDS recorded separately as a contracted service

** - 2014/15 part of Nobles Hospital figures

Complaint Categories	2014/15	2015/16
Care Delivery	5	12
Service Delivery	16	2
Staff Attitude	9	3
Staff Skills	2	0
Altering Patient Records	0	0
Delay in Transfer/lack of service	0	5
Discrimination	0	1
Injury Caused***	n/a	3
TOTAL	18*	23**

*- some complaints fall into more than one category so the total figure will not tally.

** - in 2014/15 ten complaints crossed service areas between Community and Hospital Services but in 2015/16 all complaints for community were received and handled in Community Services.

*** - category not included for 2014/15.

Outcomes 2014/15

12 of the 18 complaints managed by Community Services were responded to with an explanation and (where appropriate) an apology within the 20 days required by the complaints regulations. The 20 day period was extended in respect of 4 complaints with the agreement of the complainant. 2 complaints were dealt with outside of the 20 days.

No additional information was recorded for 2014/15.

Outcomes 2015/16

16 of the 23 complaints managed by Community Services were responded to with an explanation and 11 apologies were offered. Action was taken as a result of 6 complaints with procedures being reviewed or changed in respect of 2 complaints. Public information was revised following 1 complaint, a requirement for staff reflection or learning was identified following 2 complaints and a system review was done in respect of 1 complaint.

12 complaints were managed within the 20 days required by the complaints regulations. The 20 day period was extended in respect of 4 complaints with the agreement of the complainant. 4 complaints were dealt with outside of the 20 days.

No reports were received from the IRB in respect of Community Services complaints in 2014/15. Reports were received in respect of 3 complaints in 2015/16 and were actioned as follows:

1. The service concerned will ensure attendees at meetings are recorded correctly and will be mindful of delays in arranging meetings and report writing and keep these to a minimum.
2. No further action required.
3. A new service contract has been signed and full implementation is expected in January 2017. New IT software is also being implemented which will allow greater access for users and their families as there will be a single point of access for information and appointments.

Summary

The responsibility for managing Community Services complaints changed for the 2015/16 year so more information is available.

The majority of complaints required no direct action by Community Health Services, other than an explanation and reassurance to the complainants. All complaints which identified areas for improvement were acted upon.

It can be difficult to keep to the set timeframes for resolution, especially when the complaint covers more than one service, but more effort is being made to ensure holding letters, and/or negotiation with complainants regarding expected response times, are both timely and agreed.

The most common topic of complaint was Care Delivery (complaint about what care was provided). Where there were no issues found in the identified care delivery, the complaint has arisen from public expectation being different from the care provided. For example: one person was told that they would receive daily District Nursing visits, but they did not meet the criteria for this, and one family expected more acute and personalised medical care for their family member during a respite stay than it was possible to provide.

This suggests that there is still some work to do regarding communication with patients and families as to what they are entitled to or can expect from our services. The Community Services Patient Safety & Governance Committee will continue to work with services where these issues arise to improve communication with the public.

Complaints regarding staff attitude have decreased from 9 last year to 3 this year which is positive. The general level of complaints remains extremely low and is in line with recent patient satisfaction results which showed that overall patient satisfaction levels were very high.

5. General Practitioners

Complaint Categories	2014/15	2015/16
GP attitude	9	7
Treatment by clinical staff	5	10
Attitude of reception staff	6	2
Appointment system	2	4
Time spent in waiting room	2	0
Data protection issues/incorrect computer records	2	0
Administration errors	7	12
Patient confidentiality issues	1	0
Tests/results not acted upon in a timely manner	2	1
Miscommunication between GP, patient and community staff	1	0
Patient not meeting criteria for cosmetic treatment on NHS	1	0
TOTAL	38	36

Outcomes

All of the complaints received during 2014/15 and 2015/15 were responded to with an explanation and (where appropriate) an apology.

There has been a lack of clarity as to how complaints should be reported to the Department, and about the amount of detail required regarding how they have been handled. This has resulted in there being very little information available about how complaints have been handled by the GP practices.

A new process has been put in place during 2015, whereby all complaints received by a GP practice must be sent to the Department for recording. The practice must also subsequently provide a report on the outcomes and findings in respect of the complaint once it has been investigated. This will mean that the Department will be able to better track the complaints and for future years a much more comprehensive report on the handling of GP complaints will be possible.

Two reports were received from the IRB in respect of complaints which involved GP services in 2015/16. Both were managed as part of wider complaints by the Nobles Hospital complaints team and are reported on in that part of this report.

6. Manx Emergency Doctor Service (MEDS)

Complaint Categories	2015/16
Care Delivery	2
Service Delivery	1
Staff Attitude	5
Staff Skills	0
Medication Issues	2
TOTAL	10

Note: prior to 2015/16 MEDS complaints were included in the Community Services statistics.

Outcomes 2015/16

All of the 10 complaints received during 2015/16 were responded to with an explanation and (where appropriate) an apology within the 20 days required by the complaints regulations. The 20 day period was extended in respect of 6 complaints with the agreement of the complainant.

During 2015/16 there were no reports received from the IRB about MEDs services.

7. Pharmacies

Complaint Categories	2014/15	2015/16
Customer service complaint*	4	11
Dispensing errors	80	43
Lack of information on prescription from Nobles Hospital	1	0
Delay with repeat prescription	1	0
TOTAL	86	54

*Examples of a customer service complaint include:

- Unable to have prescription dispensed as Pharmacist Manager had finished early
- Unhappy with comments made to their representative when collecting a prescription
- Availability of medication
- Unhappy with service received.

Outcomes

All of the complaints received during 2014/15 and 2015/16 were fully investigated by the pharmacies concerned and were responded to with an explanation and (where appropriate) an apology.

One pharmacy also reported a total of 32 'errors' during 2015/16 which did not result in a formal complaint and were not included on their complaints report. The pharmacy did, however, report that these errors amounted to 0.017% of the total number of items dispensed in that year.

The dispensing errors for 2014/15 and 2015/16 were all reported as complaints by the same pharmacy, although none of them had actually resulted in a formal complaint. However, in respect of all of these errors the patient had been sent a written apology and steps had been taken to try to avoid a recurrence. Where appropriate the patient's GP or hospital consultant had also been advised.

No reports were received from the IRB in respect of complaints about pharmacy services.

8. Contracted Dentists

Complaint Categories	2014/15	2015/16
Treatment by Clinician	9	14
Attitude of Staff	3	1
Patients Behaviour Incidents	2	
Administration/Other	24	
Practice Policy	1	12
Shortage of Staff		12
Unhappy with allocated dentist		2
TOTAL	39	41

Outcomes

No additional information has been provided by the contracted dentists in respect of the complaints which they have handled during either 2014/15 or 2015/16. This situation will be reviewed by the Department for future reports.

No reports were received from the IRB in respect of complaints regarding contracted dentists.

9. Opticians

Complaint Categories	2014/15	2015/16
Treatment by Clinician	19	
Attitude of Staff		
Patients Behaviour Incidents		
Administration/Other		
Late/Availability of Appointments		5
Shortage of Staff		2
TOTAL	19	7

Note: All of the above complaints were reported by the same optician.

Outcomes

No additional information has been provided by the opticians in respect of the complaints which they have handled during either 2014/15 or 2015/16. This situation will be reviewed by the Department for future reports.

No reports were received from the IRB in respect of complaints about ophthalmic services.

10. Nobles Hospital

Complaint Categories	2014/15	2015/16
Aids/Appliances/Equipment	4	0
All aspects of Clinical Treatment	79	85
Appointments, Delays & Cancellations	25	26
Attitude of Staff	20	17
Breach of Patient Confidentiality	1	2
Communication/Information	34	39
Consent to Treatment	0	1
Delay in Referring to UK Hospital	0	1
Delays in Treating when in Hospital	3	5
Discharge Issues	2	7
Failure to follow agreed procedures	2	2
Hotel Services (including food)	0	1
Nursing Care	1	1
Other	2	0
Patients Privacy and Dignity	2	1
Patients Property and Expenses	1	0
Personal Records	1	0
Policy and Commercial Decisions	3	7
Premises	1	2
Safety (patient)	0	1
Transfer	1	0
Transport	0	1
Treatment (Physical)	12	9
Treatment (Verbal)	2	0
TOTAL	196	208

Note: the 2014/15 figures above included mental health service complaints.

Outcomes 2014/15

Of the 196 complaints received during 2014/15, 111 were responded to with an explanation and (where appropriate) an apology within the 20 days required by the complaints regulations. The 20 day period was extended in respect of 85 complaints with the agreement of the complainant.

During 2014/15 reports were received from the IRB in respect of 9 complaints. These were noted and actioned as follows:

1. Various actions for the Women and Children's Division, including training on domestic abuse and care pathways, have been completed.
2. Acquired Brain Injury Policy updated to ensure measures are in place to ensure full support and intervention following patients return from UK specialist neurological centre. Radiology CT request form updated.
3. A requested review of standard letters from the Gynaecology Department was undertaken to ensure that letters were individualised.
4. All actions completed including updating mandatory ulcer training to include learning from IRB report, and revising the complaints handling process.
5. No actions required from this complaint.
6. Further information provided to complainant and cost of dental plate refunded.
7. Pre-operative checklist updated to include current MRSA status. Local Protocol regarding preparation of notes for ENT patients prior to admission created.
8. All areas provided with Best Practice Guidance on dealing with hearing impaired patients. Posters displayed regarding sign language interpretation service. Staff awareness sessions regarding the use of Communication Boxes.
9. No actions required from this complaint.

Outcomes 2015/16

Of the 208 complaints received during 2015/16, 134 were responded to with an explanation and (where appropriate) an apology within the 20 days required by the complaints regulations. The 20 day period was extended in respect of 74 complaints with the agreement of the complainant.

During 2015/16 reports were received from the IRB in respect of 7 complaints. These were noted and actioned as follows:

1. No actions required from this complaint.
2. Documentation to include concerns/expectations of patient/carer and any information was given. Clinical communications i.e. discharge summary, clinic letters etc. are to be routinely copied to patients. Collaborative working with off-island specialists to be strengthened. Quality control checks in place to complaint responses.
3. Complaint investigations are now more systematic and rigorous, quality checking improved and all responses reviewed and signed by the Executive Director for Health. Urgent referrals for suspected cancer are now sent by GPs to a central point at Nobles and are entered onto the Somerset Register to ensure tracking can commence immediately. All appointments are to be arranged within two weeks from receipt of referral. Improved annual leave management is in place to ensure adequate cover and continuity of care.
4. No actions required from this complaint.

5. Urological cancers are to be incorporated into the Somerset Register. A coordinator has been appointed to liaise on behalf of the patient for referrals made to UK Cancer treatment centres.
6. No actions required from this complaint.
7. Request to consider formulating a standard complaints form not taken up as not all complainants use written media to raise a complaint.

11. Mental Health

Complaint Categories	2014/15	2015/16
Appointments delay/cancellation outpatient		1
Attitude of staff		2
All aspects of clinical treatment		11
Communication/Information to patient (written and oral)		3
Other		1
TOTAL		18

Note: prior to 2015/16 all mental health service complaints were dealt with by the Nobles Hospital Complaints Team so the statistics for 2014/15 are included in their figures.

Outcomes

All 18 complaints received during 2015/16 were responded to with an explanation and (where appropriate) an apology. 14 were responded to within the 20 days required by the complaints regulations, 3 were extended beyond the 20 days with the agreement of the complainant and 1 complaint was dealt with just outside the 20 days.

During 2014/15 reports were received from the IRB in respect of 2 complaints. These were noted and actioned as follows:

1. An action plan has been put in place and is being followed in respect of:
 - improving governance of standards (including the appointment of a Clinical Governance Manager),
 - the development of a supervision policy (due to be rolled out in January 2017),
 - a review of the electronic health records policy and proposed improvements to the RiO records system,
 - rationale and medication discussions now takes place and are documented clearly in patients notes and carers are involved (with consent) wherever possible, .
 - the development of a protocol to improve communication standards and understanding, particularly in respect of the dementia care pathway,
 - a new Capacity Policy and training
 - a review of complaints management with a central recording system now in place.
2. Case referred back for further local resolution which had not been concluded by the end of the period covered by this report.

During 2015/16 reports were received from the IRB in respect of 3 complaints. These were noted and actioned as follows:

1. Recommendations are currently being investigated and a report will be submitted to the IRB in due course.
2. No further action required regarding this complaint beyond that taken at the local resolution stage.
3. Case referred back for further Local Resolution. Patient contacted but no response so the case has been closed.

12. Public Health

There were no complaints received by the Public Health Directorate during either 2014/15 or 2015/16.



The information in this booklet can be provided in large print or audio format upon request.

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