

# Complaints and Patient Advice and Liaison Service Annual Report 2023-2024

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#### **COMPLAINTS AND PATIENT ADVICE AND LIAISON SERVICE ANNUAL REPORT 2023/24**

# **Executive Summary**

In accordance with the NHS Complaints Regulations (2009) this report sets out a detailed analysis of the number and nature of complaints received by the Trust during the year 1 April 2023 to 31 March 2024.

This report also provides a summary for the same period of:

- PALS (Patient Advice and Liaison Service) enquiries
- Your Opinion Counts (YOC) feedback
- Friends and Family Test scores
- Compliments recorded by Trust staff

# **Complaints, PALS and Your Opinion Counts summary**

Table 1: Summary data	2023/2024	% change	2022/2023
Complaints	70	-4.11%	73
PALS	695	+13.38%	613
YOC (feedback received via Your	1189	-20.20%	1490
Opinion Counts			

The number of complaints received in 2023/24 is comparable to 2022/23. The number of enquiries to PALS has shown a significant increase; however, 27% of these enquiries related to concerns about other organisations and the enquirer was signposted appropriately. YOCs reporting has seen a decrease in 2023/24.

#### **Complaints**

Rotherham Care Group had a 46% decrease in the number of complaints received in 2023/24 compared to 2022/23. Doncaster Adult Mental Health (AMH) and Learning Disabilities Care Group showed a 77% increase. All other care groups remained relatively consistent with 2022/23.

Patient care remains the largest category of complaint, equating to 37% of complaints. Communications and Values and Behaviours of Staff were the second highest categories with 14% each.

64/70 (91%) of complaints have been acknowledged within three working days of receipt within the Patient Safety and Investigation Team.

Of the 70 complaints received in 2023/24, 22 were still ongoing at the time of this report (31 August 2024) and 5 had been withdrawn.

#### Of the remaining 43:

- 0 (0%) were resolved within 25-40 working days
- 1 (2%) were resolved in over 41-60 working days
- 42 (98%) were 60+ working days

The Trust recognises this is a significant change from 2022/23 and acknowledges that this is not the standard of response we would wish to provide to anyone who wishes to complain. The Trust is committed to delivering on Promise 4: *Put patient feedback at the heart of how care is delivered in the trust, encouraging all staff to shape services around individuals*'

diverse needs, and therefore as part of the Complaints recovery plan, we are looking at timeframes for response with the intention that all complaints are dealt with within the agreed timeframes.

One complaint proceeded to second stage with the Parliamentary and Health Services Ombudsman (PHSO) and is still under investigations by the PHSO.

#### **PALS**

The number of new PALS concerns received by the Trust has increased to 695 in 2023/24 from 613 in 2022/23. However, 27% of these related to concerns about other organisations/providers which are signposted elsewhere.

The Physical Health and Neurodiversity Care Group and North Lincs Adult Mental Health and Talking Therapies Care Group both showed an increase in numbers of contacts in 2023/24.

The 5 most frequent general concerns raised through PALS across all services and localities have been categorised under:

- Clinical treatment
- Communication to or about a patient
- Info Request/Request for Advice/Signposting
- Access to Service
- Attitude of staff

347/695 (50%) of enquirers to PALS were happy with the response they received. 9 (1%) were unhappy with the response but did not take it further. 19 (3%) progressed to raising a formal complaint and 1 enquirer raised a complaint via their MP. 39 (6%) were unable to be concluded; this may have been for a variety of reasons, for example the enquirer did not engage with the PALS team to progress the enquiry further. In 111 (16%) cases, no further contact was received from the enquirer to be able to ascertain their satisfaction with the service provided.

# **Your Opinions Counts (YOC)**

In 2023/24, Your Opinion Counts continued to be the Trust's primary source of direct experience feedback from patients, families, and carers. It was also the primary means of collecting our responses to the Friends and Family Test question.

The number of forms received overall in 2023/24 has decreased by 301 (20%) from 1490 in 2022/23 to 1189 in 2023/24. The Trust is currently reviewing the process of receiving and monitoring the YOCs to improve the efficacy of the feedback.

The nature of feedback obtained via the YOC scheme continues to be overwhelmingly positive, with 90% being positive or mixed comments. The top 3 categories of comments, whether positive or negative, were 'attitude of staff', 'general' and 'clinical treatment'.

# **Friends and Family Test**

85.7% of respondents scored the Trust as either Very Good or Good.

#### **Compliments**

The number of compliments recorded by the Trust has increased from 2022/23 by 69% (total of 628 in 2022/23 and 1058 in 2023/24). This is mainly due to an increase by the Children's Care Group reporting of their compliments, for which their reporting has increased

by almost 246% in 2023/24. This system is reliant on staff recording compliments. This will be reviewed during 2024/25.

# **Key Developments in 2023/24**

During 23/24 we have undertaken a complaints process review. Focusing on ensuring that our patients and carers are at the heart of what we do. This included ensuring that we are working to and are compliant with the revised NHS Complaints Standards.

Care Opinion, an independent online platform where people can leave their thoughts, feedback, compliments, and informal complaints, has being implemented across the Trust.

#### 1. Introduction

In accordance with the NHS Complaints Regulations (2009) this report sets out a detailed analysis of the number and nature of complaints received by the Trust during the year 1 April 2023 to 31 March 2024.

This report also provides a summary of PALS (Patient Advice and Liaison Service) enquiries and comments received on the Your Opinion Counts (YOC) forms received by the Trust during the period from 1 April 2023 to 31 March 2024.

In line with National guidance, PALS address non-complex concerns at the point of contact, aiming to resolve problems quickly thus improving patient experience and avoiding the need to raise a complaint. Complex concerns are investigated thoroughly and responded to in accordance with best practice, and in cases where the person in question states they wish to complain, these cases are logged and managed as a formal complaint.

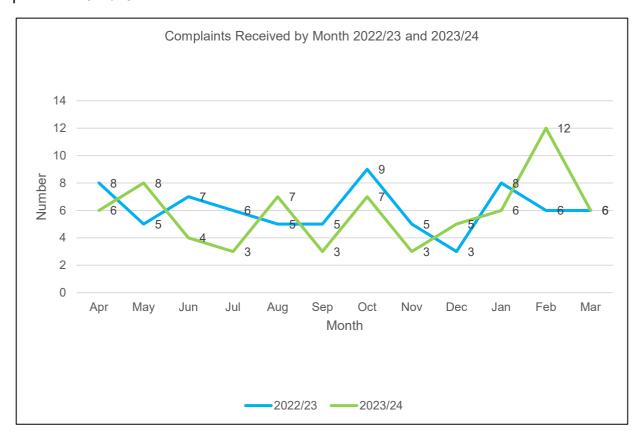
Also included is a summary of the Your Opinion Counts (YOC) feedback, Friends and Family Test scores, and compliments recorded by staff during 1 April 2023 - 31 March 2024.

# 2. Complaints

#### 2.1 Complaints Data

In 2023/24 a total of 70 new and re-opened complaints were received. This is a decrease of 3 (4.11%) in from 2022/23.

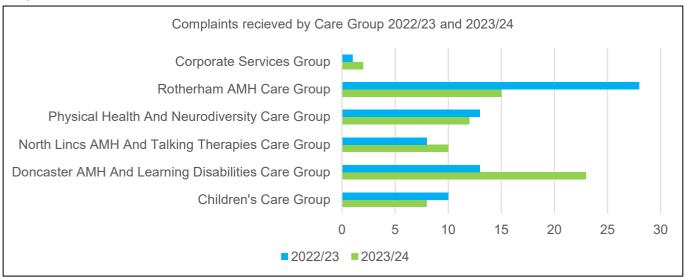
The chart below shows the number of complaints received by month Trust-wide in 2023/24 compared to 2022/23.



#### 2.2 Complaints and Services

#### 2.2.1 Complaints received by Care Groups

The chart below shows the number of complaints received by care group in 2023/24 compared to 2022/23.



# 2.2.2 Complaints Received by individual Services in 2023/24

Most Trust services have received less than three complaints across the year. The services receiving more than three complaints in 2023/24 are shown in Table 2. Community and Acute Inpatients (Adult Mental Health) remain the areas with the highest percentage of new complaints received during the year, reflecting the volume of activity in those areas.

Table 2: Services receiving 3 or more complaints													
	Complaints received by directorate per month												
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	2023/24 Total
Community (Mental Health)	0	0	1	3	3	2	2	1	1	2	5	2	22
Acute Inpatients (Mental Health)	2	3	1	0	3	0	1	1	0	1	1	2	15
Children's Mental Health (CAMHS)	0	1	1	0	0	0	2	0	2	0	1	1	8
Community Physical health and Long-Term Conditions	0	1	0	0	0	0	0	0	1	2	2	0	6
Physical Health (Inpatients)	0	2	0	0	0	0	1	0	0	1	1	0	5
Community (Older Peoples Mental Health)	1	0	0	0	1	0	0	0	0	0	1	0	3

Table 3 details the specific services/wards where 3 or more complaints were received in 2023/24.

Doncaster Community Mental Health services had the highest number of complaints with 13 received. There were seven complaints about Child and Adolescent Mental Health service (CAMHS), primarily Rotherham and Doncaster services. There is a national concern with the neurodevelopment pathway with long delays in awaiting assessments, but it is acknowledged that the CAMHS Service in Rotherham is experiencing a long length of time for neurodevelopmental assessments to be undertaken.

Four complaints were regarding Cusworth Ward, an acute adult mental health ward. Inpatient wards, however, provide care for patients with higher acuity and additional challenges in terms of complexity.

Table 3: Service/Wards receiving 3 or more complaints in 2023/24	
Doncaster Community Services (MH)	13
Rotherham Community Services (MH)	8
North Lincolnshire Community Services (MH)	6
Rotherham CAMHS	4
Doncaster Cusworth ward	4
Doncaster Community Nursing	4
Rotherham Osprey ward	3
North Lincolnshire Mulberry House	3
Doncaster CAMHS	3

# **2.3 Themes from Complaints**

Across the Trust, thematically there is a wide variation of categories, with the highest proportion of complaints relating to patient care, see table 4 below.

Table 4: Complaints received by category	
Patient care	26
Communications	10
Values and Behaviours (Staff)	10
Clinical Treatment	9
Admission/Transfer/Discharge	6
Prescribing	2
Access to Treatment or drugs	1
Appointments	1
Consent	1
End of Life	1
Integrated care (including delayed discharge)	1
Trust admin/policies/procedures	1
Waiting times	1

In the Patient Care category, further analysis shows that the most prevalent sub-category is 'Care Needs Not Adequately Met', followed by 'Inadequate Support Provided" which together accounted for 26 individual complaints in the period. See table 5 below.

Table 5: Patient Care Complaints by Sub-Category	
Care needs not adequately met	13
Inadequate support provided	10
Care needs not identified	1
Care Pathways issues	1

Table 5: Patient Care Complaints by Sub-Category	
Failure to provide adequate care	1

An initial analysis was undertaken of data for ethnicity and age. Whilst this was present for some complaints, it had not been routinely collected. Complainants are asked to complete a Diversity and Ethnicity form as part of the investigation process, but responses to this remain variable.

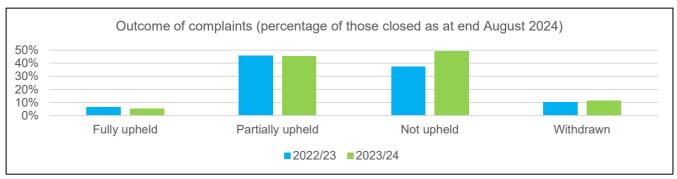
During 2024/25 we will explore different methods to obtain the data to allow a more robust analysis in relation to demographics. Home postcodes will also be collated. We will then undertake an analysis against our patient population and against the resident population.

# 2.4 Outcomes of Complaints Investigations

Table 6 details the outcomes of the 73 complaints investigated in 2023/24 (as at the time of this report – end August 2023).

Table 6: Outcome of complaints	2022/23	2023/24
Fully Upheld	3	3
Partially Upheld	25	22
Not Upheld	27	18
Withdrawn	7	5
Still in process at time of this report	11	22
Total	73	70

At the time of this report, the percentage of complaints fully upheld remained consistent with 2022/23.



#### 2.5 Learning from complaints

**What have we learned?** – We have focussed upon complaints on both an individual and a thematic basis. We have learned from each complaint made, whether about an individual's care and treatment, the experience of a care setting or pathway, or an aligned learning about partnership working.

Where learning has occurred involving several agencies, we have connected with 'place' and system partners to share learning and reflection. A specific example of learning from complaints has included:

• We have had learning in terms carer support and communication, specifically where people have transitioned from one care setting to another (i.e. inpatient to community teams). We have used this learning to inform listening events and engagement with others to check whether issues are unique or experienced by a wider group of people. This has then informed changes in practice and co-working with VCSE carer focused organisations.

What changes have we made? – In our effort to listen and learn differently from complaints we have made several changes, and our learning has informed our safety, quality and organisational learning plans for the next year. An example of change made is:

A review of appointment attendance information and letters, resulting in key changes
to ensure communication is more 'trauma informed' and supportive of patients who
may be experiencing different difficulties and life events that mean attendance to
regular appointments with services. This has been a specific learning point about our
Talking Therapies services but has had transferable change in terms of our
community mental health settings.

Other examples can be provided on request.

#### 2.6 Performance

# 2.6.1 Performance Against National Timescales for Complaints Handling

The national performance measure for complaints handling is that all complaints must be acknowledged within 3 working days of receipt; this can be verbally or in writing.

64/70 (91%) of complaints have been acknowledged within three working days of receipt within the Patient Safety and Investigation Team.

Reasons for a delay may include:

- questions regarding the need for consent and the complainant's relationship to patient
- whether the matter has been/needs to be investigated as a serious incident
- the time of day the letter is received within the Patient Safety and Investigations Team
- whether the matter can be dealt with as a PALS enquiry.

#### 2.6.2 Performance against Trust targets for responding to complaints

Of the 70 complaints received in 2023/24, 22 were still ongoing as at the time of this report (end August 2024) and five had been withdrawn.

Complaints are recorded as withdrawn if:

- the complainant advises that they wish to withdraw the complaint
- the complainant has failed to make further contact with the Patient Safety and Investigation Team (therefore, the scope or remit of the potential investigation to be undertaken is compromised). or
- consent has not been received.

# Of the remaining 43/70:

- 0 (0%) were resolved within 25-40 working days (37% in 2022/23)
- 1 (2%) were resolved in over 41-60 working days (20% in 2022/23)
- 42 (98%) were 60+ working days (43% in 2022/23)

The Trust recognises that this is a significant change from 2022/23 and acknowledges that this is not the standard of response we would wish to provide to anyone who wishes to complain. The Trust is committed to delivering on Promise 4: *Put patient feedback at the heart of how care is delivered in the trust, encouraging all staff to shape services around individuals' diverse needs*, and therefore as part of the Complaints recovery plan, we are looking at timeframes for response with the intention that all complaints are dealt with within the agreed timeframes.

# 2.7 Independent Stage/Further Review by the Parliamentary Health Service Ombudsman (PHSO)

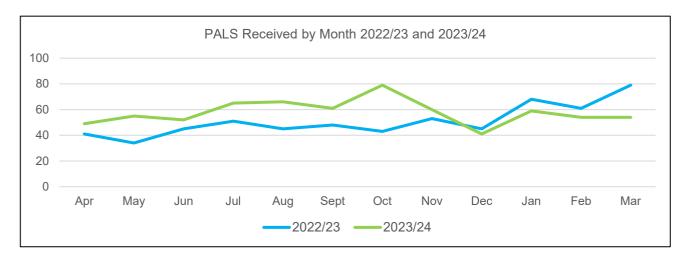
For the period 01/04/23 to 31/03/24, one complaint proceeded to second stage with the Parliamentary and Health Services Ombudsman (PHSO). This was the same number as in 2022/23. This complaint is still with the PHSO, and we await an outcome.

# 3. Patient Advice and Liaison Service (PALS)

#### 3.1 PALS Data

The number of new PALS concerns received by the Trust has increased to 695 in 2023/24 from 613 in 2022/23. However, 27% of these related to concerns about other organisations/providers which are signposted elsewhere.

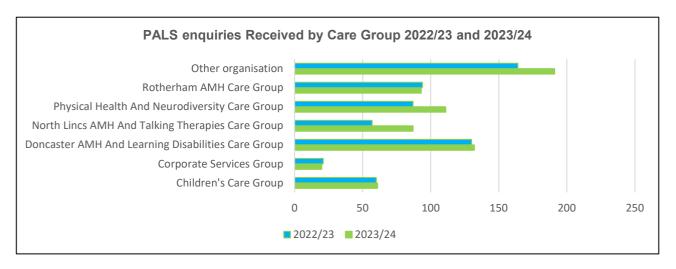
The chart below shows the number of PALS enquiries received by month Trust-wide in 2023/24 compared to 2022/23.



#### 3.2 PALS received by Care Group

The chart below shows the number of PALS enquiries received by care group in 2023/24 compared to 2022/23. The Physical Health and Neurodiversity Care Group and North Lincs AMH and Talking Therapies Care Group both showed an increase in numbers of contacts in 2023/24.

In the Physical Health and Neurodiversity Care Group, 32 (23% of enquiries in this care group) were regarding ADHD services and 27 (20% of enquiries in this care group) were regarding Wheelchair and Special Seating services. In the North Lincs AMH and Talking Therapies Care Group, 13 (17% of enquiries in this care group) were regarding the Recovery Team and 12 (15% of enquiries in this care group) were regarding Mulberry House.



# 3.3 PALS received by individual services 2023/24

The table below shows the number of PALS enquiries received by service in 2023/24.

Table 7: Number of PALS enquiries by service													
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	2023/24 Total
Community (Mental Health)	10	15	16	21	17	20	31	19	12	20	18	17	216
Other organisation	17	15	19	22	21	14	20	10	7	17	12	17	191
Community Physical health and Long-Term Conditions	11	10	8	10	10	17	13	11	6	9	11	9	125
Children's Mental Health	5	7	3	3	5	5	3	10	4	1	1	3	50
Acute Inpatients (Mental Health)	1	3	2	3	6	1	6	6	3	1	4	3	39
Corporate Services	1	4	2	2	3		2	2	4	1	1	1	23
Physical Health (inpatients)	1				3	3	1	1	3	2	3	1	18
Community (Older Peoples Mental Health)	1	1	1	2	1	1			1	2	4	2	16
Children Young People and Families	2			2				1		5		1	11
Acute Inpatients (OPMH Mental Health)			1				3		1	1			6
Total	49	55	52	65	66	61	79	60	41	59	54	54	695

Table 8: Service/Wards receiving 10 or more PALS enquiries in 2023/24					
CAMHS	45				
Doncaster Community Services (MH)	41				
ADHD	32				
Wheelchair and Special Seating	27				
Rotherham South CMHT	19				
Doncaster Crisis Team	14				
North Lincs Recovery Team	13				
Mulberry Ward	12				
Osprey Ward	10				

# 3.4 Category of PALS contacts

Across the Trust, thematically there is a wide variation of categories, with the highest proportion of complaints relating to clinical treatment, see table 9 below.

Table 9 shows the top 10 categories of PALS enquiries made, which accounted for 87% of all contacts. Most contacts are regarding clinical treatment 21%. These are followed by Communication to or about a Patient, 14% and Information Request/Signposting, 12%. In 89 (14%) contacts, the PALS service was not able to ascertain the category as no further contact could be made with the enquirer.

Table 9: Category of PALS contact	Number
Clinical Treatment	138
Communication/Info to or About a Patient	90
Info Request/Request for Advice/Signposting (PALS)	78
Access to Service	76
Attitude of Staff	64
Discharge Arrangements	40
Community Appointments	35
Medication	30
Medical Devices	13
Transfer Arrangements	10
Total	574

# 3.5 Outcome of PALS enquiries

The PALS team follow up on queries at the end of the process to check whether the concern has been resolved, any further signposting required and next steps. The outcomes from the PALS contacts at the end of the process is illustrated in the table below. This demonstrates an effective investigation process, with most concerns raised via this route resolved satisfactorily, and just 19 (3%) being escalated to formal complaints for the year. This is same as in the previous year.

Table 10: Patient Advice and Liaison Service enquiries outcomes 2023/24									
	Qtr1	Qtr2	Qtr3	Qtr4					
Happy with response	100	96	14	137					
Concern for litigation	0	0	0	1					
Unable to conclude	7	11	10	11					
Unhappy with response	3	2	2	2					
Serious incident raised	0	1	0	1					
MP enquiry raised	1	0	0	1					
Formal complaint raised	7	6	2	4					
No further contacts received	24	36	31	20					

#### 3.6 Performance

The table below shows that 64% of enquires were closed within 10 days.

Table 11: Number of working days to close a PALS enquiry 2023/24	Num of days
1-10 days	425
11-20 days	82
21-30 days	56
31-60 days	72
>60 days	27
Still ongoing at time of report	33

# 4. Your Opinion Counts (YOC)

Your Opinion Counts continues to be the Trust's primary source of direct experience feedback from patients, families, and carers. It is also the primary means of collecting our responses to the Friends and Family Test question. All YOCs are passed to the relevant team manager to review, respond to (where the person completing the response has asked for a response), share with staff for learning and act on where action needs taking. YOC forms can be completed anonymously so it is not always possible to follow up a specific issue if a negative comment is made.

#### 4.1 YOC Data

The number of forms received overall in 2023/24 has decreased by 301 (20%) from 1490 in 2022/23 to 1189 in 2023/24. The Trust is currently reviewing the process of receiving and monitoring the YOCs to improve the efficacy of the feedback.

#### 4.2 YOC by Care Group

Table 12 below shows the number of YOC received by care group. It has not been possible to separate the data for Doncaster Mental and Physical Health Care Groups prior to February 2024 as the system supporting this data could not provide this. Further changes to the care group structures were made in January 2024 and the system was re-aligned at this point.

Table 12: YOCS Received 2023/24									
	Care Group								
Quarter	Children's	Corporate	Don	caster	North Lincs	Rotherham	Total		
Q1	47	0	155		56	42	300		
Q2	48	0	215		50	30	343		
Q3	25	0	153		20	20	218		
Change in care group structure		AMH and LD	PH and Neuro- diversity						
Q4	47	1	74	96	83	27	328		
Total	167	1	6	93	209	119	1189		

AMH – Adult Mental Health, LD – Learning Disabilities, PH – Physical Health

#### 4.3 YOC by category

The comments made on YOC forms are categorised to allow for analysis. A YOC form may have more than one category, and these may be positive, negative or a mixture of both. Table 13 details the top 5 categories of comments made and whether these were positive or negative.

Table 13: Top 5 Categories of YOC Received 2023/24									
Category		Care Group							
				Doncaster					
Category	Positive or negative feedback	Children's	Corpor ate	Prior to Re- structure	AMH and LD	PH and Neuro- diversity	North Lincs	Rother ham	Total
Attitude of Staff	Р	126		369	37	42	116	62	752
	N	3		6	1		2	15	27
General	Р	16		176	33	47	57	17	346
comments	N			4			1	7	12
Clinical Treatment	Р	22	1	84	4	2	34	11	158
	N	3		32		1	10	9	55
Communication	Р	14		31	1	3	9	6	64
	N	2		12			5		19
Access to Service	Р	1		2	1		1		5
	N	2		4	1	2	3	2	13

Table 14 shows the total number of YOCs received and whether these were positive, negative or mixed. Overwhelmingly, comments are positive with 90% being positive or mixed comments.

		Care Group						
						North		
	Quarter	Children's	Corporate	Do	oncaster	Lincs	Rotherham	Total
Q1	Positive	41		132		46	24	243
	Negative	1			3	3	10	17
	Mixed	5			20	7	8	40
Q2	Positive	45			189	41	23	298
	Negative	1			6	3	2	12
	Mixed	2		20		6	5	33
Q3	Positive	21		122		17	13	173
	Negative			4			2	6
	Mixed	4		27		3	5	39
	Cha	ange in care gr	oup structure	АМН	PH Neuro-			
				and LD	diversity			
Q4	Positive	45	1	72	93	69	17	297
	Negative	2		2	2	7	8	21
	Mixed				1	7	2	10
2023/24	Positive	152	1	608		173	77	1011
Total	Negative	4	0	17		13	22	56
	Mixed	11	0	68		23	20	122
	2023/24							
	Total	167	1		693	209	119	1189

#### 4.4 Friends and Family Test

The YOC form includes the required national Friends and Family Test question, but this data is also gathered via SMS in Children's services and via specific comments forms in the Talking Therapies services. The score from all these sources is shown in table 15 below. These scores are reviewed by the relevant manager in conjunction with any additional comments made by the responder as to why they gave this score. This score may have been given anonymously so it is not always possible to follow up a specific issue if a negative comment is made.

85.7% of respondents scored the Trust as either Very Good or Good.

Table 15: Friends and Family Test: Thinking about this NHS trust overall, how was your experience of the service?	Num of responses
Very good	3121 (67.5%)
Good	841 (18.2%)
Neither good nor poor	252 (5.5%)
Poor	146 (3.1%)
Very poor	206 (4.5%)
Don't know	55 (1.2%)

# 5. Compliments

The number of compliments recorded by the Trust has increased from 2022/23 by 69% (total of 628 in 2022/23 and 1058 in 2023/24). This is mainly due to an increase by the Children's Care Group reporting of their compliments, for which their reporting has increased by almost 246% in 2023/24.

North Lincolnshire Adult Mental Health and Talking Therapies Care Group has seen a drop in recorded compliments by 62% and Rotherham Adults Mental Health Care Group saw a drop of 80%.

It has not been possible to separate the data for Doncaster Mental and Physical Health Care Groups prior to January 2024 as the system supporting this data could not provide this. Further changes to the care group structures were made in January 2024 and the system was re-aligned at this point. However, overall Doncaster Care Groups recorded comparatively similar numbers of compliments (351 in 2022/23 and 355 in 2023/24).

This system is reliant on staff recording compliments. This will be reviewed during 2024/25.

Table 16: Compliments	Number of compliments recorded			
Care Group	2023/24	2022/23		
Children's	671	194		
Doncaster (Q1 – Q3 2023/24)	184	331		
Doncaster Adult Mental Health and LD (Q4 2023/24)	41	-		
Doncaster Physical Health and Neurodiversity (Q4 2023/24)	130	-		
North Lincs Adult Mental Health and Talking Therapies	29	76		
Rotherham Adult Mental Health	3	15		
Corporate	0	12		
Total	1058	628		

# 6. Developments in 2024/25: next steps

More front-line staff managers and investigators will be attending complaints training during quarter 3 & 4 of 2023/24.

The use of SMS (text message via mobile phone) had already begun being used in some services and this will be further extended during 2023/24.