



**Kernow**  
Clinical Commissioning Group

# **Complaints Annual Report 2018/19**

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## Summary

This report provides information on complaints received by NHS Kernow during the period 1 April 2018 to 31 March 2019. It complies with Complaints Regulations which state that the organisation should specify the number of complaints received, those which were well founded and those which were referred to the Parliamentary Health Service Ombudsman (PHSO).

In addition it sets out the learning from complaints made during the period and identifies trends and themes in complaints

## Complaints received

There were a total of 35 complaints received by NHS Kernow during 2018/19 regarding its services. The following table gives an overview of complaints broken down into areas of business.

Complaints received	Q1	Q2	Q3	Q4	Total
CHC/PHB	2	6	6	7	21
RMS	1	3	1	1	6
Children's Health	0	0	2	0	2
Clinical Management	2	0	0	0	2
IFR	0	0	1	0	1
Information Governance	1	0	0	0	1
Non-emergency Transport	0	0	1	0	1
Women's Health	0	1	0	0	1
<b>Total</b>	<b>6</b>	<b>10</b>	<b>11</b>	<b>8</b>	<b>35</b>

The average length of time taken to respond to complaints in the year 2018/19 was 28 working days. The policy timescale for a response is 25 working days, however the policy does allow for extensions to these timescales with the agreement of complainants. The complaints team aims to keep complainants informed on progress with their complaint at all times and to communicate with complainants the reasons for any extension to these timescales.

A table giving information on timescales for response is below.

Number of days taken to respond	Number of complaints
0-10 days	2
11-25 days	15
26-40 days	12
41+ days	4
N/A ongoing	1
N/A withdrawn	1

Of the complaints received by NHS Kernow nine were fully upheld, 11 were partially upheld and 13 were not upheld and one complaint was withdrawn. At the time of writing there is one complaint still in investigation.

## Themes and actions arising regarding complaints

Of the 35 complaints received 21 were regarding Continuing Healthcare. Throughout these complaints one of the consistent themes has been communication.

Some of the actions which have been identified to improve this are:

- Reinforcing the careful proof reading when using voice recording software
- The introduction of a double check sheet for communications being sent to families.
- New letters regarding CHC should be reviewed by the Citizens Advisory Panel for clarity.
- All checklists should be shared with an individual and their family regardless of the outcome.
- Learning through reflection for different team members.

It should also be noted that of the complaints made regarding CHC only four were fully upheld and ten were partially upheld.

There were also six complaints regarding the Referral Management Service. One of which was regarding accessible communications. As a result of this complaint a communication was sent to all referrers to remind them that RMS is an administration function and as such needs to be made aware of any communication needs when every referral is made.

NHS Kernow also received a complaint regarding lack of choice regarding the MSKI pathway. As a result of the investigation clinicians reviewing the referrals have been asked not to specify a provider unless clinically required, this allows the team at RMS to then offer the individual wider choice.

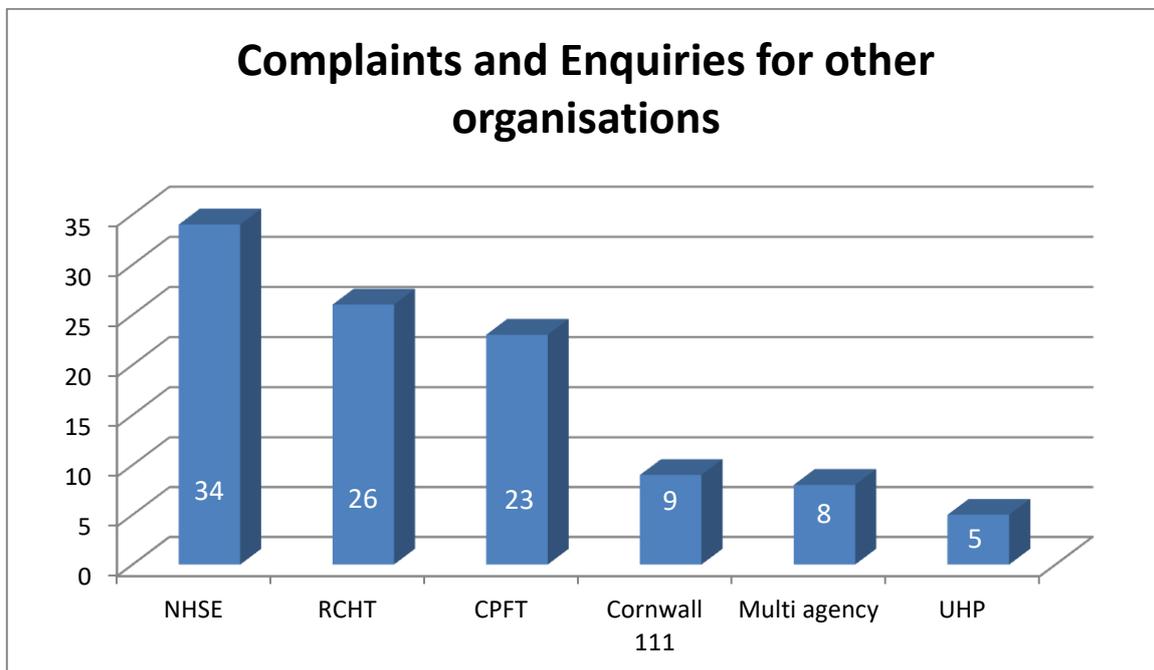
## Enquiries and complaints for other organisations

As part of its commissioning role NHS Kernow also receives enquiries and complaints regarding other organisations.

	Q1	Q2	Q3	Q4
Enquiries for NHS Kernow	46	33	40	54
Enquiries or Complaints for other organisations	29	30	28	38

NHS Kernow does not investigate complaints on behalf of provider organisations, as it is the right and responsibility of all NHS providers to handle their own complaints. However, when NHS Kernow is contacted by an individual regarding another organisation the complaints manager will support them in accessing the appropriate complaints process and at times can de-escalate complaints by offering appropriate advice or information to the individual.

The enquiries and complaints for other organisations dealt with can be broken down as follows, please note this chart only includes organisations where there were greater than four contacts for the reporting year.



## Parliamentary Health Service Ombudsman

Complainants who remain dissatisfied following the local resolution of their complaint are able to seek an independent investigation and review of their complaint from the Parliamentary Health Service Ombudsman.

Seven complainants referred their concerns to the Parliamentary Health Service Ombudsman (PHSO) for further investigation during the reporting year.

During the 12 months the PHSO closed five cases. Three cases were closed after the Ombudsman's initial enquiries with no action for NHS Kernow to take. A further two cases were partially upheld after full investigation, with only one action for the organisation to carry out. This has been completed.