

Derbyshire Community Health Services

Collaborative Complaints Peer Reviews

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Aim of the Project

This project aims to enable people who complain to have their voice heard, and to support the Trusts to translate that voice into genuine improvements in care.









Good Complaints Handling

- Getting it right
- Being customer focused
- Being open and accountable
- Acting fairly and proportionately
- Putting things right
- Seeking continuous improvement





Objectives

- To enable the participating organisations to understand the principles and practice of good complaints handling;
- To identify, through using a number of closed anonymised complaint files, where the organisation's current practice falls short of these good practice standards;
- To help the organisation to identify how it can work towards consistent good practice in complaints handling
- To assist the organisations to develop clear improvement plans









What We Did

- Partnership approach across three organisations
- Engaged with the Patients Association
- Developed and agreed a CQUIN





Peer Review Panels

- We held peer review panels with the aim of assessing the quality of complaints investigations through peer review.
- In each peer review there were four panels with a mixture of clinicians, magistrates, lay people, complaints staff and a Patients Association Lay Expert as chair. Each panel had a mix of staff from both Trusts to promote learning and sharing of good practice.
- Two reviews were held in December 2014 and November 2015.
- The panel members were trained in peer review methodology.







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What Did We Do?

- We reviewed six randomly selected complaints cases which had been closed within the preceding six months.
- The complaints are discussed in detail and reviewed against the Patients Association complaints management score card.





Patients Association Score Card

- The scorecard is based around a guidance document which details what good complaints handling looks like
- The guidance is made up of 12 standards, eight of which have been used to form the basis of the scorecard. Each standard has its separate sub-standards which can then be brought together as an overall score from the panellists.
- It is the individual views and scores which are collated to provide the results and final report.
- All complaints were reviewed by two individual panels in order to provide a robust score.
- It is important to highlight that the scorecard is based on best practice, and therefore the bar has been set very high.





The Scoring System

The scoring system used is as follows:

• a score of 1 = poor practice

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- a score of 2 = less than satisfactory practice
- a score of 3 = satisfactory practice
- a score of 4 = good practice
- a score of 5 = excellent practice





North Derbyshire Clinical Commissioning Group

Peer Review Standards

Standard 1: The Complainant has a single point of contact in the Organisation and is placed at the centre of the process. The nature of the complaint and the outcome they are seeking is established at the outset

Standard 2: The complaint undergoes initial assessment and any necessary immediate action is taken. A lead investigator is identified.

Standard 3: Investigations are thorough (regulation 3 (2) (b) and Regulation 14 (1)), where appropriate obtain independent evidence and opinion and are carried out in accordance with local procedures, national guidance and within legal frameworks

Standard 4: The investigator reviews, organises and evaluates the investigative findings.

Standard 5: The judgement reached by the decision maker is transparent, reasonable and based on the evidence available.

Standard 6: The complaint documentation is accurate and complete. The investigation is formally recorded, the level of detail appropriate to the nature and seriousness of the complaint.

Standard 7: Responding adequately to the complainant and those complained about (Regulation 14 Investigation and response).

Standard 8: The investigation of the complaint is complete, impartial and fair.



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Results 2014

| CRH NHS FT | Lowest to highest scores | | | | | | | |
|-------------|--------------------------|-----|-----|-----|-----|-----|--|--|
| 2014 | 1.0 | 1.5 | 1.9 | 2.0 | 2.4 | 2.5 | | |
| DCHS NHS FT | | | | | | | | |
| 2014 | 2.8 | 3.0 | 3.2 | 3.5 | 3.9 | 4.0 | | |

*As we only reviewed six cases per Trust, care needs to be taken in extrapolating findings and assuming that these apply to all cases.



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Improvements for 2015

Chesterfield Royal Hospital NHS Foundation Trust

- Communication with the person complaining is good, putting the person at the centre of the process, assessing the complaint is good in some parts, and the final letter has a large number of good scores.
- 2016 action plans need to concentrate on the investigations, and the way the investigator reviews, organises and evaluates the findings.

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- Communication with the person complaining is good, putting the person at the centre of the process, assessing the complaint is good in some parts, and the final letter has a large number of excellent scores.
- On-going improvements need to be focused on thoroughness of the investigations, and the way the investigator reviews, organises and evaluates the findings.









Results 2015

| CRH NHS FT | Lowest to highest scores | | | | | | | |
|-------------|--------------------------|-----|-----|-----|-----|-----|--|--|
| 2015 | 2.5 | 2.5 | 2.8 | 3.0 | 3.0 | 5.0 | | |
| DCHS NHS FT | | | | | | | | |
| 2015 | 3.0 | 3.5 | 4.0 | 4.4 | 4.8 | 4.9 | | |

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Overall standard levels comparing 2015 and 2014









The Way Forward

- Dissemination of final report across Boards and Governing Bodies
- Agreed action plans
- On-going collaboration discussions at 2016 final panel
- Monitoring patient feedback on the complaints process







What Made Us a Good Team

- The Collaborative element of this work
- Sharing information
- Discussing operational processes and learning together
- Openness and Honesty and a non-defensive attitude









Key Message

At all times, the focus remained on getting it right for our patients