How Do Local Service Providers Handle Their Complaints?

your voice counts

complaint form
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Copies of this report are available by contacting Healthwatch Barking and Dagenham on 020 8596 8200 or by emailing to: [Richard@Healthwatchbarkinganddagenham.co.uk](mailto:Richard@Healthwatchbarkinganddagenham.co.uk)

If you require this report in an alternative format please contact us.
Introduction and Background to the Survey

Healthwatch Barking and Dagenham are the voice of local people, groups and networks. We are independent and therefore do not have a pre-set agenda or a pre-determined interest in influencing the outcome of the results of consultations and surveys we undertake.

This document represents a response to a survey and is a random sample of individuals that have used local services. This has been conducted impartially - Healthwatch Barking and Dagenham have no organisational view, however seek to represent the views of people who have given their feedback.

Working together with the Public Health Team at Barking and Dagenham council, Healthwatch carried out a survey of what happens when local organisations; serving local people; handle complaints about their services from the public.

The findings from the survey will feed into a wider project; to be undertaken by the Public Health Team on behalf of Barking and Dagenham Health and Wellbeing Board.

The scope of the survey was to gather up to 10 responses from complainants that used services provided by the following local organisations:

• North East London Foundation Trust (NELFT)
• Barking, Havering and Redbridge University Trust (BHRUT)
• Barking and Dagenham Corporate Service (LBBD Corp)
• Barking and Dagenham Adult Social Care (LBBD ASC)
• Barking and Dagenham Children’s Services (LBBD CS)
• Barking and Dagenham Housing Services (LBBD HS)
• Metropolitan Police (MPS)
• National Health Service England (NHSE)
• Barking and Dagenham Primary Care Services (B&D PCS)
• Barking and Dagenham Clinical Commissioning Group (NELCSU)
Methodology

Healthwatch developed a survey questionnaire with 11 questions:

- To which service did you make your complaint?
- How long did it take to resolve your complaint from start to finish?
- Were you offered help or advocacy to make your complaint?
- If you had an advocate to assist you, did you find it useful?
- Was your complaint upheld; partially upheld or not upheld?
- What outcome did you want from the complaint?
- Were you satisfied with the outcome? (i.e. did you understand and agree with the reason given?)
- Have you seen or heard of anything different happening as a result of your complaint?
- Were you made aware of the next steps to take if you needed to?
- What was your overall experience of making a complaint? (i.e. staff attitude; how well the process was explained to you and if you were kept informed and communicated with)
- Would you make another complaint should the need arise again?

For each of the participating service providers, the option was available for them to ask their complainants to complete the questionnaire using an online survey monkey or to send written responses to be posted back to Healthwatch.

The Public Health Team sent an e-version of the questionnaire to contacts within each organisation, with a covering letter, that explained the purpose of the survey. Each organisation was asked to encourage their most recent complainants to respond to the survey.

Data protection and current information sharing policies prohibited Healthwatch from having access to any personal customer information in relation to this survey.
Summary of Findings

- A disappointing small number of people replied to the survey. The project would have benefitted from having more time to run. The key findings however, are still interesting.

- Of the outcomes for complaints - 24 (89%) said they were not satisfied, as they did not understand or agree with the reason(s) given for the decision - 3 (11%) said that they were satisfied.

- When asked if they had seen or heard about anything different happening as a result of their complaint - 24 (89%) said they were not aware of any difference their complaint had made - 3 (11%) said their complaint had made a difference.

- For the time it took for complaints to be investigated - 3 (11%) said it took up to 4 weeks; 11 (42%) 1 to 3 months; 4 (15%) said it took 4 to 6 months and 1 (3%) said it took 18 months.

- Despite some disappointments with the system, 85% of participants said they would complain again, even if only to get their case escalated higher.
Of the 10 local service provider organisations requested to participate in the survey, the following is a breakdown of the responses.

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Number of Complainant Responses</th>
<th>Feedback</th>
</tr>
</thead>
<tbody>
<tr>
<td>NELFT</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>BHRUT</td>
<td>13</td>
<td></td>
</tr>
<tr>
<td>LBBD Corp</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>LBBD ASC</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>LBBD CS</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>LBBD HS</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>MPS</td>
<td>0</td>
<td>Advised they would not participate</td>
</tr>
<tr>
<td>NHSE</td>
<td>0</td>
<td>Advised they would not participate</td>
</tr>
<tr>
<td>B&amp;D PCS</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>B&amp;D CCG (NELSCU)</td>
<td>0</td>
<td>Advised they were unable to participate due to time constraints</td>
</tr>
</tbody>
</table>

The operating policies concerning the sharing of sensitive and personal data was deemed to be a barrier for the Metropolitan Police Service (MPS) to ask their complainants to participate in the survey.

National Health Service England (NHSE) declined to take part in the survey, citing that there is an imminent national survey
they are undertaking which has the potential to overlap with this work. In addition, when complainants contact them, they provide details that they are unable to pass onto others without the informed consent of that individual. It has since emerged that NHSE are to consider ways, via their patient experience lead, how to request consent from patients to facilitate sharing information to understand and improve services.

The CCG Commissioning Unit (NELSCU) expressed their interest in wanting to participate - however due to staff absence, they were not able to put arrangements in place to meet the timescale for returns.

In total there were **27 responses** received from **6 organisations**.

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Count (Percentage)</th>
</tr>
</thead>
<tbody>
<tr>
<td>BHRUT</td>
<td>13 (48%)</td>
</tr>
<tr>
<td>LBBD CS</td>
<td>5 (18%)</td>
</tr>
<tr>
<td>LBBD ASC</td>
<td>4 (15%)</td>
</tr>
<tr>
<td>B&amp;D PCS</td>
<td>3 (11%)</td>
</tr>
<tr>
<td>LBBD Corporate</td>
<td>1 (4%)</td>
</tr>
<tr>
<td>NELFT</td>
<td>1 (4%)</td>
</tr>
</tbody>
</table>

- From the complainants across all 6 providers, none of them was offered any advice or information about advocacy and support services that could assist them with their complaint.

- Of the outcomes for complaints - 24 (89%) said they were not satisfied, as they did not understand or agree with the reason given for the decision - 3 (11%) said that they were satisfied.
• Of the outcomes, 4 (15%) complaints were upheld; 10 (37%) were partially upheld and 8 (30%) were not upheld. Of the remaining cases, 5 (18%) were not resolved or ongoing.

<table>
<thead>
<tr>
<th></th>
<th>Upheld</th>
<th>Partially Upheld</th>
<th>Not Upheld</th>
<th>Unresolved</th>
</tr>
</thead>
<tbody>
<tr>
<td>LBBD Corp</td>
<td>1 (100%)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LBBD CS</td>
<td>1 (20%)</td>
<td>3 (60%)</td>
<td>1 (20%)</td>
<td></td>
</tr>
<tr>
<td>LBBD ASC</td>
<td>1 (25%)</td>
<td>3 (75%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BHRUT</td>
<td>3 (23%)</td>
<td>3 (23%)</td>
<td>4 (31%)</td>
<td>3 (23%)</td>
</tr>
<tr>
<td>B&amp;D PCS</td>
<td>2 (67%)</td>
<td></td>
<td></td>
<td>1 (33%)</td>
</tr>
<tr>
<td>NELFT</td>
<td></td>
<td></td>
<td></td>
<td>1 (100%)</td>
</tr>
</tbody>
</table>

• When asked if they had seen or heard about anything different happening as a result of their complaint - 24 (89%) said they were not aware of any difference their complaint had made - 3 (11%) said their complaint had made a difference.

• If they needed to - 12 (44%) of complainants said they were made aware of the next steps they could take to escalate their complaint - 15 (56%) said they were not made aware.

• For the time it took for their complaints to be investigated - 3 (11%) said it took up to 4 weeks; 11 (42%) 1 to 3 months; 4 (15%) said it took 4 to 6 months and 1 (3%) said it took 18 months.
- Of the other responses, 7 (26%) were not resolved and 1 (3%) was not pursued.

<table>
<thead>
<tr>
<th></th>
<th>Up to 4 weeks</th>
<th>1-3 Months</th>
<th>4-6 Months</th>
<th>Over 6 Months</th>
<th>Unresolved or Not Pursued</th>
</tr>
</thead>
<tbody>
<tr>
<td>LBBD Corp</td>
<td>1 (100%)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LBBD CS</td>
<td>1 (20%)</td>
<td>2 (40%)</td>
<td>1 (20%)</td>
<td></td>
<td>1 (20%)</td>
</tr>
<tr>
<td>LBBD ASC</td>
<td></td>
<td>1 (25%)</td>
<td>1 (25%)</td>
<td>2 (50%)</td>
<td></td>
</tr>
<tr>
<td>BHRUT</td>
<td>1 (8%)</td>
<td>7 (53%)</td>
<td>1 (8%)</td>
<td>1 (8%)</td>
<td>3 (23%)</td>
</tr>
<tr>
<td>B&amp;D PCS</td>
<td></td>
<td></td>
<td>2 (67%)</td>
<td></td>
<td>1 (33%)</td>
</tr>
<tr>
<td>NELFT</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1 (100%)</td>
</tr>
</tbody>
</table>

- Asked if they would make a complaint again, 23 (85%) said they would and 4 (15%) said they would not. Of the participants that said they would not complain again, none gave a reason. Of those that said they would, 3 people indicated that it was a way to escalate their complaint to get an independent decision.
Conclusions

A greater number of responses from local people would be a better representation of the issues they are faced with when making complaints about local services.

There are clear differences between the way each service provider handle their complaints.

In undertaking this survey, we recognised that bringing together the complaints handling processes of each service in a meaningful way, are complex and wrapped up in organisations’ protocols and practices. It has emerged that there are barriers to encouraging complaints sharing information for some of these services. For the purpose of this survey, some providers actively sought responses and have developed their practices from the beginning, to include public involvement and feedback about their experience of using the service.

Not all complaints were made by individuals; an example was raised by a representative from an external business.

From the responses, there is a clear indication that none of the provider organisations provide information to complainants about local services that can assist and support them with help to make a complaint.

The majority of complainants did not understand the reason for the decision about their complaint; whether it was the use of language on official letters or confusion about facts put forward concerning their complaint.
It has emerged that the majority of complaints are not followed up and communication about any changes the provider might have put in place as a consequence of it wasn’t fed back to complainants.

Of the total number of responses, the majority of complaints were concluded within 1 to 3 months. It is not clear to Healthwatch what each provider’s policy is for responding to complaints about their service and the standards they set for handling them.

There were a number of complaints that remain unresolved and in one example, the participant did not pursue their complaint any further; citing frustration about being made to feel their complaint was irrelevant and that it had been trivialised to a point that they were treated like a pest.

Most participants said they would make a complaint again if they needed to, with some recognising that they needed to complain to the provider organisations first before escalating it further; for example to an Ombudsman.
**Recommendations**

- That all services who are asked to take part in a similar exercise in the future, are advised now to include some policy provision for data sharing within their complaints procedures.

- That complainant is informed of any subsequent changes in service delivery as a result of their complaint.

- That all complaints are answered in plain English, allowing the complainant to clearly understand what the outcome is and the reasoning behind it.

- That the local NHS, local Authority and others wishing to be part of any exercise such as this in the future, refer to the contents of this document.

Source Document: ‘*My Expectations for Raising Concerns and Complaints*’ - November 2014

[http://www.healthwatch.co.uk/sites/healthwatch.co.uk/files/vision_report_0.pdf](http://www.healthwatch.co.uk/sites/healthwatch.co.uk/files/vision_report_0.pdf)
Comments and Feedback about Making Complaints

Participants were asked what outcomes they wanted from making their complaint - these were their responses:-

- “A full explanation and apology to acknowledge the errors made.”
- “An answer why it took 5 different visits to get 1 assessment done by an OT.”
- “I wanted them to acknowledge that what I was told about my OT assessment wasn’t true and why they have since denied their response to me about my complaint.”
- “For people to learn not to bring down one care agency for the benefit of another to provide the services. Felt they were bias.”
- “I wanted the needs of my child to be considered in the decisions made by the Social Worker.”
- “What the department was going to do to make sure that the social worker responded to telephone calls or e-mails.”
- “For social workers to be made accountable for their actions.”
- “To amend false information.”
- “Better overall training on ‘before and after care’ of patients.”
- “For them to say sorry.”
• “Why no one did anything about my dad’s shortness of breath that resulted in an embolism that killed him the next morning at home.”

• “Satisfaction and reassurance.”

• “Payment and a letter of apology.”

• “To accept responsibility for their incompetence and negligence.”

• “I would like to see the law working better after making this complaint.”

• “I want to know who sent my son home from hospital with no Warfarin.”

• “I expected some kind of apology from the Consultant.”

• “An explanation for the consultants conduct concerning statements he made; I want a sincere apology.”

• “The doctor got a slap on the wrist and I got a sorry.”

• “I want the surgery to get their appointments service working properly so that it is not constantly engaged ALL DAY!!”

• “I never want another patient to go through what my neighbour did with this GP. I wanted the GP to be held accountable for the terrible service he gave this man at the end of his life.”

• “I wanted the service to improve so no one else would get angry or stressed because they couldn’t get an appointment.”
People participating were asked for their overall view and experience of making their complaint - how well informed and communicated with they felt? How well the process was explained and the attitude of the staff?

Their feedback was as follows:-

- “The complaints team communicated with me extremely well and kept me informed of the process. The response I received was full of errors; spelling and grammar mistakes. I got the impression that the communications department did not fully understand why I was making a complaint.”

- “It was mediocre - they talk a lot and manage to say nothing. Nothing was explained about each visitor’s capacity to make a decision and which part of the assessment they were responsible for.”

- “The commissioning team kept in communication. Since the response from the council initially, I have not heard anything more from them.”

- “It proves to me these people think they are untouchable and not accountable.”

- “The Complaints Officer at the Town Hall was very polite and helpful.”

- “If I am an adult and being ignored then what hope does the children under this service have? Children’s social services for Barking and Dagenham need a good looking into.”
• “It seems making a complaint gains nothing, even if the concerns are upheld. The situation has reverted back to the reason why the complaint was made in the first place! The social worker is still not responding to e-mails.”

• “The staff attitude over the phone was good. I could not arrange a face to face appointment, nor could I get directly in touch with the lady I was due to meet. I left a message which was never replied to.”

• “Making the complaint and getting a response was OK - up until the complaint, I felt I was being lied to.”

• “As a result of my complaint, there has been a change in direction and it made somebody listen to you.”

• “POINTLESS! Medical records were completed months after the incident. Cover up!”

• “Not being kept informed, having to constantly remind them at the complaints department that I was still awaiting payment.”

• “Took longer to respond than I was told to expect.”

• “The complaint was not handled very well. I had to stop the complaints process because I was discouraged and made to feel like a pest.”

• “Poor - the officer I saw in the first instance was excellent, but the investigation did not address all the issues I raised. The points about the consultants conduct were swept under the carpet. I was communicated with to an extent.”
• “I had to keep going back to the complaints team before they took it seriously.”

• “The staff attitude i.e. the reception staff was brilliant. The whole complaint process I feel has just been ignored - nobody has bothered to get back to me.”

• “It was not good, but from what I have experienced recently, there seems to be an improvement.”