

INFORMATION  
ANALYSIS  
DIRECTORATE



# Complaints Received by HSC Trusts, Board and Family Practitioner Services in Northern Ireland (2013/14)



Department of  
**Health, Social Services  
and Public Safety**

[www.dhsspsni.gov.uk](http://www.dhsspsni.gov.uk)

## Reader Information

Purpose	Monitor and report the number of HSC Trust, Board and Family Practitioner Service complaint issues received during the year, by the programme of care, category, subject of the complaint issue and the time taken to provide a substantive response.
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Statistical Quality	Information detailed in this release has been quality assured with HSC Trusts prior to release.
Target audience	DHSSPS, Chief Executives of HSC Board and Trusts in Northern Ireland, health care professionals, academics, Health & Social Care stakeholders, media and general public.
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## Background

In this statistical report a complaint is defined as an 'expression of dissatisfaction' received from or on behalf of patients, clients or other users of HSC Trust, HSC Board and/or Family Practitioner Services or facilities.

Readers are asked to note that a single communication regarding a complaint may refer to more than one issue. In such cases each individual complaint issue is recorded separately for Programme of Care (POC) and Subject.

## Key Points

- During 2013/14, 4,968 complaints were received by HSC Trusts relating to 6,836 complaint issues (Table 1, Figure 1).
- Over the last four years, the number of complaint issues received by HSC Trusts increased by 1,783 (35.3%), from 5,053 in 2010/11 to 6,836 in 2013/14 (Table 1, Figure 1).
- During 2013/14, over a third of all complaint issues (2,514, 36.8%) were received by the Belfast HSC Trust (Table 1, Figure 1).
- Of the 6,836 complaint issues received by HSC Trusts during 2013/14, three fifths (4,135, 60.5%) related to the Acute POC (Table 2, Figure 2).
- During 2013/14, almost three in ten (1,971, 28.8%) complaint issues related to 'Diagnosis/Operation/Treatment' category (Tables 3 & 4).
- During 2013/14, over half (2,597, 52.3%) of substantive responses were provided by HSC Trusts within 20 working days of having received the complaint (Table 11).
- During 2013/14, there were 327 complaints against family practitioner services, of which 255 (78.0%) were handled under local resolution and the remaining 72 (22.0%) handled by the HSC Board acting as an honest broker (Tables 12 - 15).
- During 2013/14, the HSC Board received 9 complaints, of which, 5 (55.6%) related to 'Board Purchasing' (Table 16).

## About the Hospital Information Branch (HIB)

Hospital Information Branch is responsible for the collection, quality assurance, analysis and publication of timely and accurate information derived from a wide range of statistical information returns supplied by the Health & Social Care (HSC) Trusts and the HSC Board. Statistical information is collected routinely from a variety of electronic patient level administrative systems and pre-defined EXCEL survey return templates.

The Branch aims to present information in a meaningful way and provide advice on its uses to customers in the HSC Committee, Professional Advisory Groups, policy branches within the DHSSPS, other Health organisations, academia, private sector organisations, charity/voluntary organisations as well as the general public. The statistical information collected is used to contribute to major exercises such as reporting on the performance of the HSC system, other comparative performance exercises, target setting and monitoring, development of service frameworks as well as policy formulation and evaluation. In addition, the information is used in response to a significantly high volume of Parliamentary / Assembly questions and ad-hoc queries each year.

Information is disseminated through a number of key statistical publications, including: Inpatient Activity, Outpatient Activity, Emergency Care, Mental Health & Learning Disability and Waiting Time Statistics (Inpatient, Outpatient, Diagnostics and Cancer). A detailed list of these publications is available from:

**Website:** [http://www.dhsspsni.gov.uk/index/stats\\_research/hospital-stats.htm](http://www.dhsspsni.gov.uk/index/stats_research/hospital-stats.htm)

## Technical Notes

This statistical release presents information on complaint issues received by HSC Trusts in Northern Ireland. It details the number of HSC Trust complaint issues received, by the programme of care, category, subject of the complaint and the time taken to provide a substantive response for complaints received during 2013/14.

Information is also included on the number of complaints received by the HSC Board and Family Practitioner Services in Northern Ireland.

## Data Collection

The Information presented within this release derives from the Departmental CH8 statistical return provided by the six HSC Trusts, (including the NIAS) in Northern Ireland. The CH8 return was introduced in 1998 but was revised in 2007 to take account of the structural changes within the HSC system following the Review of Public Administration (RPA). The CH8 is submitted on a quarterly basis by HSC Trusts, in respect of the services for which they have responsibility.

Data providers are supplied with technical guidance documents outlining the methodologies that should be used in the collection, reporting and validation of each of these data returns. These documents can be accessed at the following link:

[http://www.dhsspsni.gov.uk/index/stats\\_research/hospital-stats/hib\\_guidance\\_manuals.htm](http://www.dhsspsni.gov.uk/index/stats_research/hospital-stats/hib_guidance_manuals.htm)

Information presented on HSC Board and FPS complaints derives from the HSC Board CHB statistical return. The CHB is collected on a quarterly basis by the HSC Board, in respect of the services for which they have responsibility.

## Rounding

Percentages have been rounded to one decimal place and as a consequence some percentages may not sum to 100.

## Data Quality

All information presented in this bulletin has been provided by HSC Trusts / Board and has been validated and quality assured by Hospital Information Branch (HIB) prior to release.

For the CH8 information collection, HSC Trusts are given a set period of time to submit the information. Following submission, HIB perform a series of validation checks to verify that information submitted is consistent both within and across returns.

At the end of the financial year HIB carry out a more detailed series of validations to verify that the information is consistent. Trend analyses are used to monitor annual variations and emerging trends. Queries arising from validation checks are presented to HSC Trusts for clarification and if required returns may be amended and/or re-submitted.

## Main Uses of Data

The main uses of these data are to monitor and report the number of HSC Trust, HSC Board and FPS complaint issues received during the year, to help assess performance, for corporate monitoring, to inform and monitor related policy, and to respond to assembly questions and ad-hoc queries from the public.

## Contextual Information for Using Complaint Statistics

Readers should be aware that contextual information about Northern Ireland and the health services provided is available to read while using statistics from this publication.

This includes information on the current and future population, structures within the Health and Social Care system, the vision for future health services as well as targets and indicators. This information is available at the following link:

[http://www.dhsspsni.gov.uk/index/stats\\_research/hospital-stats/contextual\\_information\\_hospital\\_statistics.htm](http://www.dhsspsni.gov.uk/index/stats_research/hospital-stats/contextual_information_hospital_statistics.htm)

## Contact Information

As we want to engage with users of our statistics, we invite you to feedback your comments on the publication to:

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## Number of Complaint Issues (2010/11 – 2013/14)

Table 1 details the number of complaint issues received by HSC Trusts in each of the last four years.

**Table 1: Number of Complaint Issues Received by HSC Trusts (2010/11 – 2013/14)**

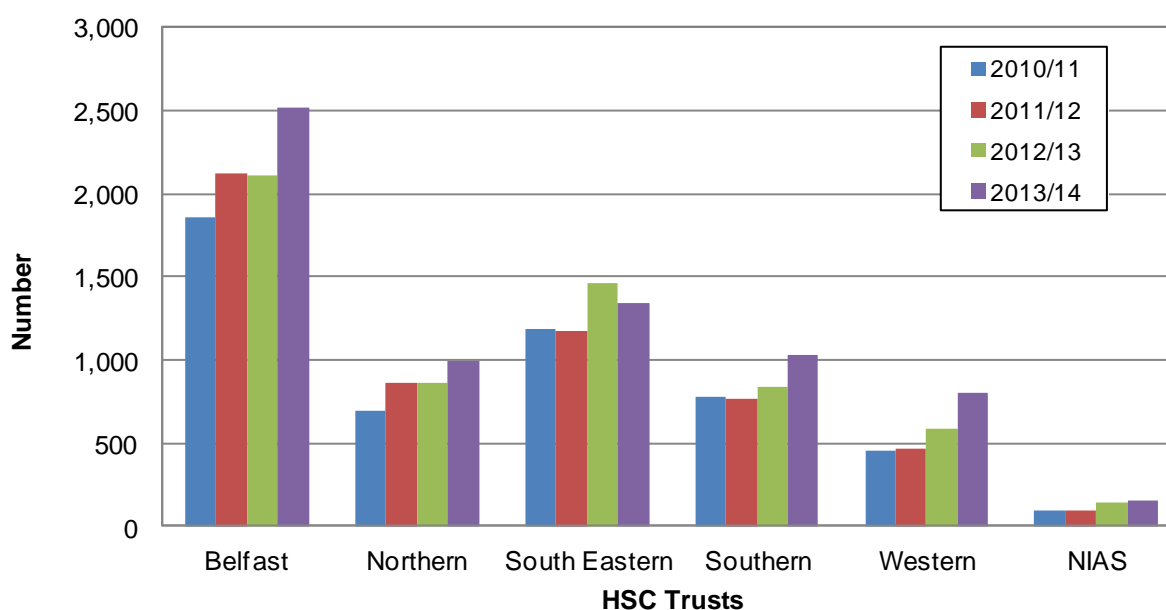
HSC Trust	2010/11		2011/12		2012/13		2013/14	
	No.	%	No.	%	No.	%	No.	%
Belfast	1,855	36.7%	2,122	38.7%	2,113	35.2%	2,514	36.8%
Northern	697	13.8%	862	15.7%	856	14.3%	997	14.6%
South Eastern	1,182	23.4%	1,172	21.4%	1,459	24.3%	1,343	19.6%
Southern	777	15.4%	764	13.9%	839	14.0%	1,032	15.1%
Western	450	8.9%	467	8.5%	591	9.9%	800	11.7%
NIAS	92	1.8%	98	1.8%	140	2.3%	150	2.2%
<b>Northern Ireland</b>	<b>5,053</b>	<b>100.0%</b>	<b>5,485</b>	<b>100.0%</b>	<b>5,998</b>	<b>100.0%</b>	<b>6,836</b>	<b>100.0%</b>

Over the last four years, the number of complaint issues received by HSC Trusts increased by 1,783 (35.3%), from 5,053 in 2010/11 to 6,836 in 2013/14 (Table 1, Figure 1).

Since 2010/11, the number of complaint issues received increased in all six HSC Trusts, with the most notable increase reported by the Belfast HSC Trust (659, 35.5%), from 1,855 to 2,514 in 2013/14 (Table 1, Figure 1).

During 2013/14, over a third of all complaint issues (2,514, 36.8%) were received by the Belfast HSC Trust, 1,343 (19.6%) by the South Eastern HSC Trust, 1,032 (15.1%) by the Southern HSC Trust, 997 (14.6%) by the Northern HSC Trust, 800 (11.7%) by the Western HSC Trust and 150 (2.2%) by the NIAS (Table 1).

**Figure 1: Number of Complaint Issues Received by HSC Trusts during the Year (2010/11 – 2013/14)**



## Complaint Issues Received by Programme of Care (POC)<sup>1</sup>

Table 2 details the number of complaint issues received by HSC Trusts in each of the last four years broken down by POC. Each complaint issue should be recorded against the POC of the patient / client to whom the complaint relates. If a complaint is made by a user of HSC Trust facilities but not a patient / client, it should be recorded against the POC of that service.

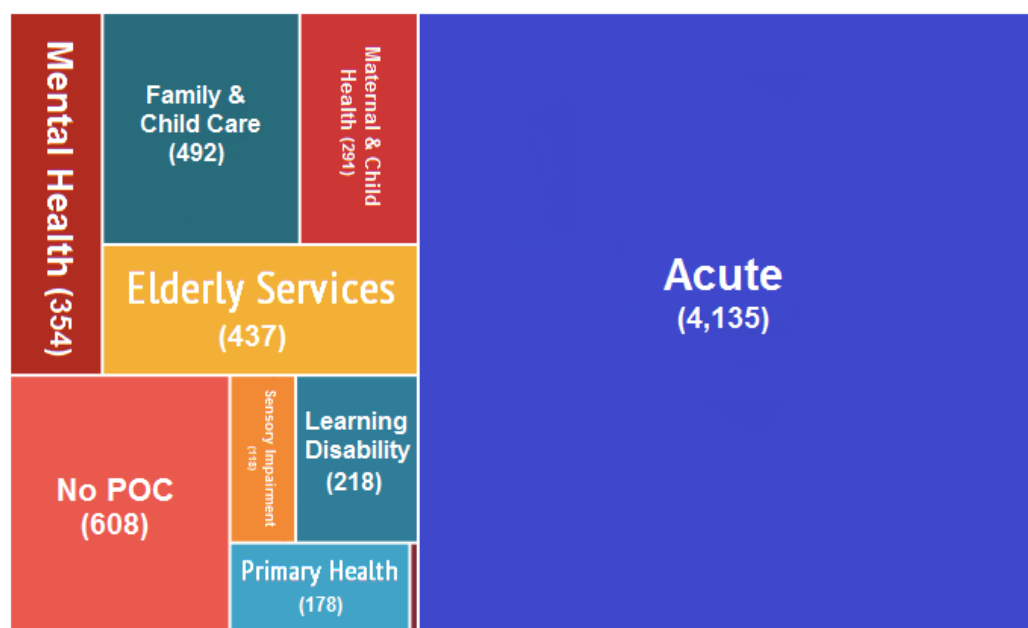
**Table 2: Number of Complaint Issues Received by HSC Trusts, by POC (2010/11 – 2013/14)**

Programme of Care	2010/11		2011/12		2012/13		2013/14	
	No.	%	No.	%	No.	%	No.	%
Acute	3,022	59.8%	3,393	61.9%	3,575	59.6%	4,135	60.5%
Maternal & Child Health	323	6.4%	340	6.2%	316	5.3%	291	4.3%
Family & Child Care	317	6.3%	318	5.8%	361	6.0%	492	7.2%
Elderly Services	307	6.1%	302	5.5%	320	5.3%	437	6.4%
Mental Health	247	4.9%	236	4.3%	315	5.3%	354	5.2%
Learning Disability	105	2.1%	96	1.8%	132	2.2%	218	3.2%
Sensory Impairment & Physical Disability	82	1.6%	61	1.1%	89	1.5%	118	1.7%
Health Promotion & Disease Prevention	3	0.1%	4	0.1%	2	0.0%	5	0.1%
Primary Health & Adult Community	293	5.8%	191	3.5%	222	3.7%	178	2.6%
None (No POC assigned)	354	7.0%	544	9.9%	666	11.1%	608	8.9%
<b>Total Number of Complaint Issues</b>	<b>5,053</b>	<b>100.0%</b>	<b>5,485</b>	<b>100.0%</b>	<b>5,998</b>	<b>100.0%</b>	<b>6,836</b>	<b>100.0%</b>

During 2013/14, 6,836 complaint issues were received by the HSC Trusts, of which, three fifths (4,135, 60.5%) were related to the Acute POC (Table 2).

Since 2010/11, the number of complaint issues received by the HSC Trusts relating to the Acute POC increased by 1,113 (36.8%), from 3,022 to 4,135 in 2013/14 (Table 2).

**Figure 2: Complaint Issues Received by HSC Trusts, by POC (2013/14)**



<sup>1</sup> Refer to Appendix 2: Definitions for full list of Programmes of Care (POC's)

## Complaint Issues Received by Category<sup>2</sup>

Table 3 below presents a summary of the number of complaint issues received during each year, by the category of the complaint issue. The category of each complaint issue is based on the subject which best describes the nature of the patient's / client's concern.

To enable the category of the complaint issue to be presented, the subject area of each complaint issue has been grouped into one of the 15 main categories below<sup>3</sup>.

**Table 3: Number of Complaint Issues Received by Category (2010/11 – 2013/14)**

Category of Complaint Issue	2010/11		2011/12		2012/13		2013/14	
	No.	%	No.	%	No.	%	No.	%
Admissions/Discharges	255	5.0%	307	5.6%	356	5.9%	433	6.3%
Aids/Adaptations/Appliances	77	1.5%	69	1.3%	85	1.4%	76	1.1%
Appointments/Waiting Times	744	14.7%	692	12.6%	699	11.7%	844	12.3%
Children's Order	24	0.5%	12	0.2%	13	0.2%	43	0.6%
Contracted Services	34	0.7%	67	1.2%	78	1.3%	118	1.7%
Diagnosis/Operation/Treatment	1,575	31.2%	1,572	28.7%	1,802	30.0%	1,971	28.8%
Information & Communication	644	12.7%	852	15.5%	920	15.3%	1,074	15.7%
Mortuary	1	0.0%	0	0.0%	2	0.0%	0	0.0%
Other	110	2.2%	122	2.2%	127	2.1%	109	1.6%
Patient Experience	902	17.9%	1009	18.4%	1,076	17.9%	1,267	18.5%
Policy/Commercial Decisions	136	2.7%	121	2.2%	124	2.1%	188	2.8%
Premises	214	4.2%	289	5.3%	214	3.6%	278	4.1%
Prison Healthcare	90	1.8%	174	3.2%	267	4.5%	163	2.4%
Professional Assessment of Need	196	3.9%	145	2.6%	153	2.6%	188	2.8%
Transport	51	1.0%	54	1.0%	82	1.4%	84	1.2%
<b>Total</b>	<b>5,053</b>	<b>100.0%</b>	<b>5,485</b>	<b>100.0%</b>	<b>5,998</b>	<b>100.0%</b>	<b>6,836</b>	<b>100.0%</b>

During 2013/14, almost three in ten (1,971, 28.8%) complaint issues related to 'Diagnosis/Operation/Treatment', 1,267 (18.5%) to 'Patient Experience', 1,074 (15.7%) to 'Information & Communication' and 844 (12.3%) to 'Appointments/Waiting Times'. These four categories accounted for three quarters (5,156, 75.4%) of all complaint issues received during 2013/14 (Table 3).

Over the last four years, the number of complaint issues relating to 'Information & Communication' increased by 430 (66.8%), from 644 in 2010/11 to 1,074 in 2013/14 (Table 3).

Between 2011/12 and 2013/14, the number of complaint issues relating to 'Diagnosis/Operation/Treatment' increased by 396 (25.1%), from 1,575 to 1,971 (Table 3).

Since 2010/11, the number of complaint issues relating to 'Patient Experience' increased by 365 (40.5%), from 902 to 1,267 in 2013/14 (Table 3).

<sup>2</sup> A list of the subjects of complaint issues is detailed in Appendix 3, and a list of the general category of complaint issue by subject area in Appendix 4.

<sup>3</sup> Details on the number of complaint issues received by subject of complaint issue are detailed in Appendix 1.



Table 4 below presents a summary of the number of complaint issues received during 2013/14, by the category of the complaint issue and by HSC Trust. As per previous table, the subject area has been grouped into the main categories of complaint issues received.

**Table 4: Number of Complaint Issues Received by Category and HSC Trust (2013/14)**

Category of Complaint Issue	Belfast	Northern	South Eastern	Southern	Western	NIAS	Northern Ireland
Admissions/Discharges	262	44	43	45	37	2	433
Aids/Adaptations/Appliances	35	1	16	19	5	0	76
Appointments/Waiting Times	414	113	117	143	57	0	844
Children Order	13	11	3	1	15	0	43
Contracted Services	45	44	18	3	8	0	118
Diagnosis/Operation/Treatment	661	325	348	333	286	18	1,971
Information & Communication	496	143	215	110	110	0	1,074
Mortuary	0	0	0	0	0	0	0
Other	27	12	36	8	24	2	109
Patient Experience	434	173	234	191	177	58	1,267
Policy/Commercial Decisions	4	42	32	49	61	0	188
Premises	106	39	88	35	10	0	278
Prison Healthcare			163				163
Professional Assessment of Need	12	49	23	95	9	0	188
Transport	5	1	7	0	1	70	84
<b>Total</b>	<b>2,514</b>	<b>997</b>	<b>1,343</b>	<b>1,032</b>	<b>800</b>	<b>150</b>	<b>6,836</b>

During 2013/14:

- The Belfast HSC Trust reported the highest number of complaint issues relating to 'Diagnosis/Operation/Treatment' (661, 33.5%), 'Information & Communication' (496, 46.2%), 'Patient Experience' (434, 34.3%), 'Appointments/Waiting Times' (414, 49.1%), 'Admissions/Discharges' (262, 60.5%), 'Premises' (106, 38.1%), 'Contracted Services' (45, 38.1%) and 'Aids/Adaptions/Appliances' (35, 46.1%) (Table 4).
- The South Eastern HSC Trust reported the highest number of complaint issues relating to 'Other' (36, 33.0%). The South Eastern HSC Trust also reported 163 complaint issues relating to 'Prison Healthcare'. It is important to note that the South Eastern HSC Trust is the sole provider of Prison Healthcare in Northern Ireland; therefore, all other HSC Trusts reported nil complaint issues in this category (Table 4).
- The Southern HSC Trust reported the highest number of complaint issues relating to 'Professional Assessment of Need' (95, 50.5%) (Table 4).
- The Western HSC Trust reported the highest number of complaint issues relating to 'Policy/Commercial Decisions' (61, 32.4%) and 'Children Order' (15, 34.9%) (Table 4).
- The NIAS reported the highest number of complaint issues relating to 'Transport' (70, 83.3%) (Table 4).

## Complaint Issues Received by POC and HSC Trust<sup>4</sup>

Table 5 details the number of complaint issues received by each HSC Trust during 2013/14 by the POC of the complaint issue.

**Table 5: Number of Complaint Issues Received by HSC Trusts, by POC during 2013/14**

Programme of Care	Belfast	Northern	South Eastern	Southern	Western	NIAS	Total
Acute	1,941	526	677	572	419	0	<b>4,135</b>
Maternal & Child Health	131	49	48	0	63	0	<b>291</b>
Family & Child Care	82	137	90	124	59	0	<b>492</b>
Elderly Services	106	128	67	80	56	0	<b>437</b>
Mental Health	74	63	91	98	28	0	<b>354</b>
Learning Disability	18	20	8	47	125	0	<b>218</b>
Sensory Impairment & Physical Disability	12	31	25	43	7	0	<b>118</b>
Health Promotion & Disease Prevention	0	0	0	1	4	0	<b>5</b>
Primary Health & Adult Community	6	20	84	66	2	0	<b>178</b>
None (No POC assigned)	144	23	253	1	37	150	<b>608</b>
<b>Total</b>	<b>2,514</b>	<b>997</b>	<b>1,343</b>	<b>1,032</b>	<b>800</b>	<b>150</b>	<b>6,836</b>

During 2013/14:

- The Belfast HSC Trust reported the highest number of complaint issues relating to the Acute POC (1,941, 46.9%) and the Maternal & Child Health POC (131, 45.0%)(Table 5).
- The Northern HSC Trust reported the highest number of complaint issues relating to the Family & Child Services POC (137, 27.8%) and the Elderly Services POC (128, 29.3%) (Table 5).
- The South Eastern HSC Trust reported the highest number of complaint issues with no POC assigned (253, 41.6%) and relating to the Primary Health & Adult Community POC (84, 47.2%) (Table 5).
- The Southern HSC Trust reported the highest number of complaint issues relating to the Mental Health POC (98, 27.7%) and the Sensory Impairment & Physical Disability POC (43, 36.4%) (Table 5).
- The Western HSC Trust reported the highest number of complaint issues relating to the Learning Disability POC (125, 57.3%) and the Health Promotion & Disease Prevention POC (4, 80.0%) (Table 5).

<sup>4</sup> The high number of complaints received in the South Eastern HSC Trust with no POC assigned is in part due to 163 complaints received regarding Prison Healthcare.

## Complaint Issues Received by the Belfast HSC Trust

Table 6 details the number of complaint issues received by the Belfast HSC Trust in each of the last four years by the POC of the complaint issue.

**Table 6: Number of Complaint Issues Received by the Belfast HSC Trust, by POC (2010/11 – 2013/14)**

Programme of Care	2010/11		2011/12		2012/13		2013/14	
	No.	%	No.	%	No.	%	No.	%
Acute (POC1)	1,353	72.9%	1,594	75.1%	1,566	74.1%	1,941	77.2%
Maternal & Child Health (POC2)	178	9.6%	208	9.8%	196	9.3%	131	5.2%
Family & Child Care (POC3)	34	1.8%	43	2.0%	49	2.3%	82	3.3%
Elderly Services (POC4)	76	4.1%	68	3.2%	101	4.8%	106	4.2%
Mental Health (POC5)	57	3.1%	44	2.1%	58	2.7%	74	2.9%
Learning Disability (POC6)	9	0.5%	11	0.5%	22	1.0%	18	0.7%
Sensory Impairment & Physical Disability (POC7)	20	1.1%	15	0.7%	17	0.8%	12	0.5%
Health Promotion & Disease Prevention (POC8)	3	0.2%	2	0.1%	1	0.0%	0	0.0%
Primary Health & Adult Community (POC9)	41	2.2%	19	0.9%	2	0.1%	6	0.2%
No POC Assigned	84	4.5%	118	5.6%	101	4.8%	144	5.7%
<b>Total Number of Complaint Issues</b>	<b>1,855</b>	<b>100.0%</b>	<b>2,122</b>	<b>100.0%</b>	<b>2,113</b>	<b>100.0%</b>	<b>2,514</b>	<b>100.0%</b>

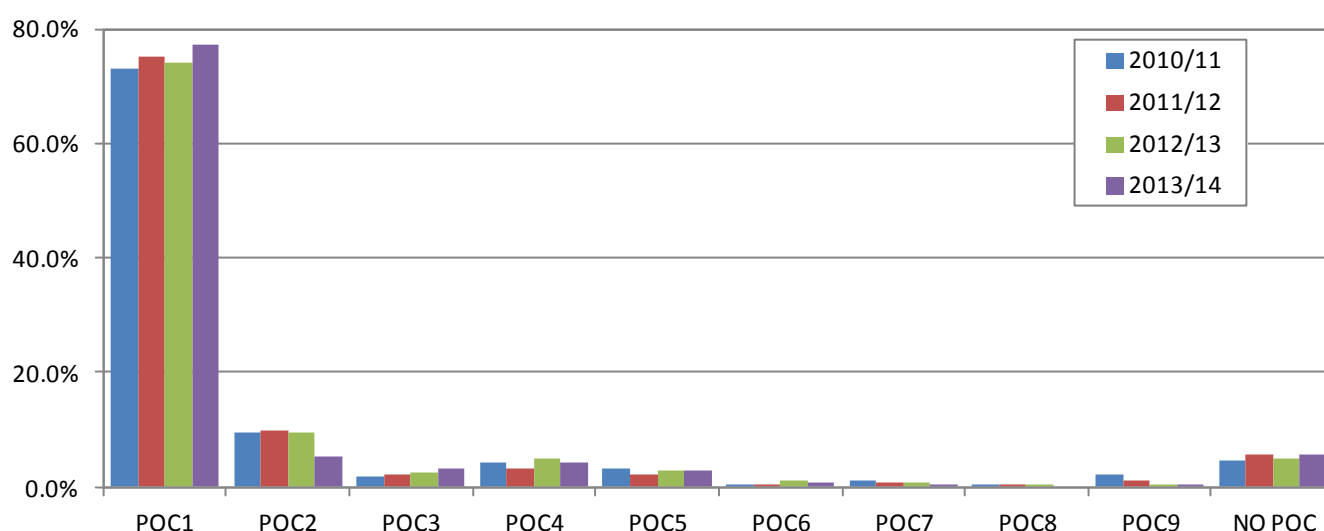
Since 2010/11, the number of complaint issues received by the Belfast HSC Trust increased by 659 (35.5%), from 1,855 to 2,514 during 2013/14 (Table 6, Figure 3).

During 2013/14, 2,514 complaint issues were received by the Belfast HSC Trust, of which, over three quarters (1,941, 77.2%) related to the Acute POC (Table 6).

Between 2010/11 and 2013/14, the number of complaint issues received by the Belfast HSC Trust which related to the Acute POC increased by 588 (43.5%), from 1,353 to 1,941 (Table 6 and Figure 3).

Since 2010/11, the proportion of complaint issues received by the Belfast HSC Trust relating to the Maternal & Child Health POC decreased by 4.4 percentage points, from 9.6% (178) to 5.2% (131) during 2013/14 (Table 6, Figure 3).

**Figure 3: Percentage of Complaint Issues Received by the Belfast HSC Trust by POC (2010/11 – 2013/14)**



## Complaint Issues Received by the Northern HSC Trust

Table 7 details the number of complaint issues received by the Northern HSC Trust in each of the last four years by the POC of the complaint issue.

**Table 7: Number of Complaint Issues Received by the Northern HSC Trust, by POC (2010/11 – 2013/14)**

Programme of Care	2010/11		2011/12		2012/13		2013/14	
	No.	%	No.	%	No.	%	No.	%
Acute (POC1)	398	57.1%	441	51.2%	469	54.8%	526	52.8%
Maternal & Child Health (POC2)	22	3.2%	24	2.8%	21	2.5%	49	4.9%
Family & Child Care (POC3)	64	9.2%	81	9.4%	105	12.3%	137	13.7%
Elderly Services (POC4)	69	9.9%	102	11.8%	87	10.2%	128	12.8%
Mental Health (POC5)	56	8.0%	67	7.8%	68	7.9%	63	6.3%
Learning Disability (POC6)	21	3.0%	20	2.3%	25	2.9%	20	2.0%
Sensory Impairment & Physical Disability (POC7)	10	1.4%	16	1.9%	22	2.6%	31	3.1%
Health Promotion & Disease Prevention (POC8)	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Primary Health & Adult Community (POC9)	41	5.9%	29	3.4%	25	2.9%	20	2.0%
No POC Assigned	16	2.3%	82	9.5%	34	4.0%	23	2.3%
<b>Total Number of Complaint Issues</b>	<b>697</b>	<b>100.0%</b>	<b>862</b>	<b>100.0%</b>	<b>856</b>	<b>100.0%</b>	<b>997</b>	<b>100.0%</b>

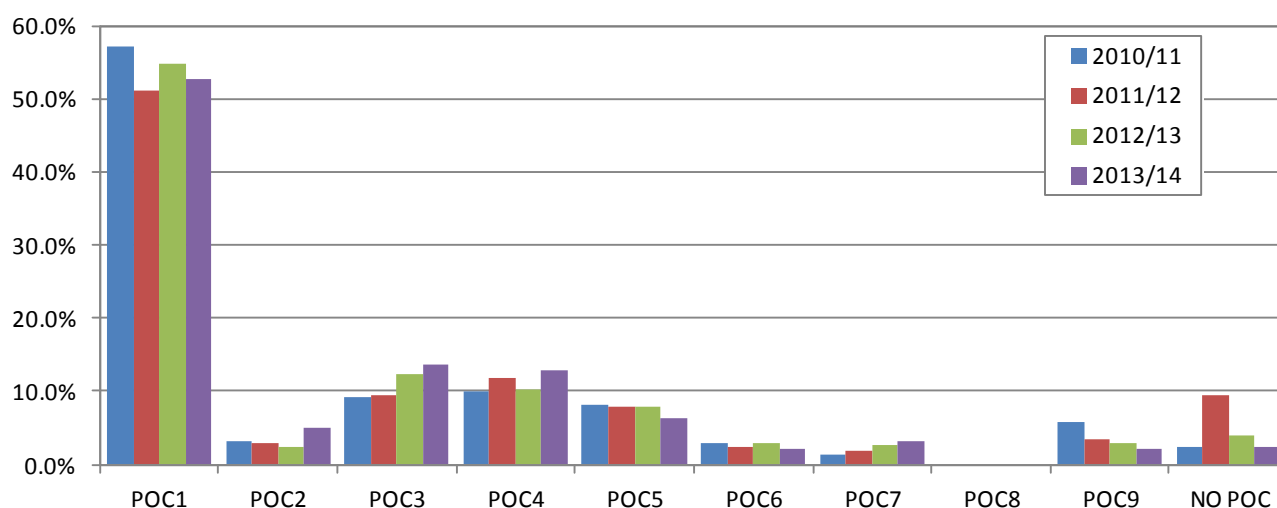
Since 2010/11, the number of complaint issues received by the Northern HSC Trust increased by 300 (43.0%), from 697 to 997 during 2013/14 (Table 7, Figure 4).

Over half (52.8%, 526) of the 997 complaint issues received by the Northern HSC Trust in 2013/14 related to the Acute POC (Table 7).

During the last four years, the proportion of complaint issues received by the Northern HSC Trust relating to the Family & Child Care POC increased by 4.5 percentage points, from 9.2% (64) in 2010/11 to 13.7% (137) in 2013/14 (Table 7).

Since 2010/11, the proportion of complaint issues received by the Northern HSC Trust relating to the Acute POC decreased by 4.3 percentage points, from 57.1% (398) to 52.8% (526) in 2013/14 (Table 7).

**Figure 4: Percentage of Complaint Issues Received by the Northern HSC Trust by POC (2010/11 – 2013/14)**



## Complaint Issues Received by the South Eastern HSC Trust

Table 8 details the number of complaint issues received by the South Eastern HSC Trust in each of the last four years by the POC of the complaint issue.

**Table 8: Number of Complaint Issues Received by the South Eastern HSC Trust, by POC (2010/11 – 2013/14)**

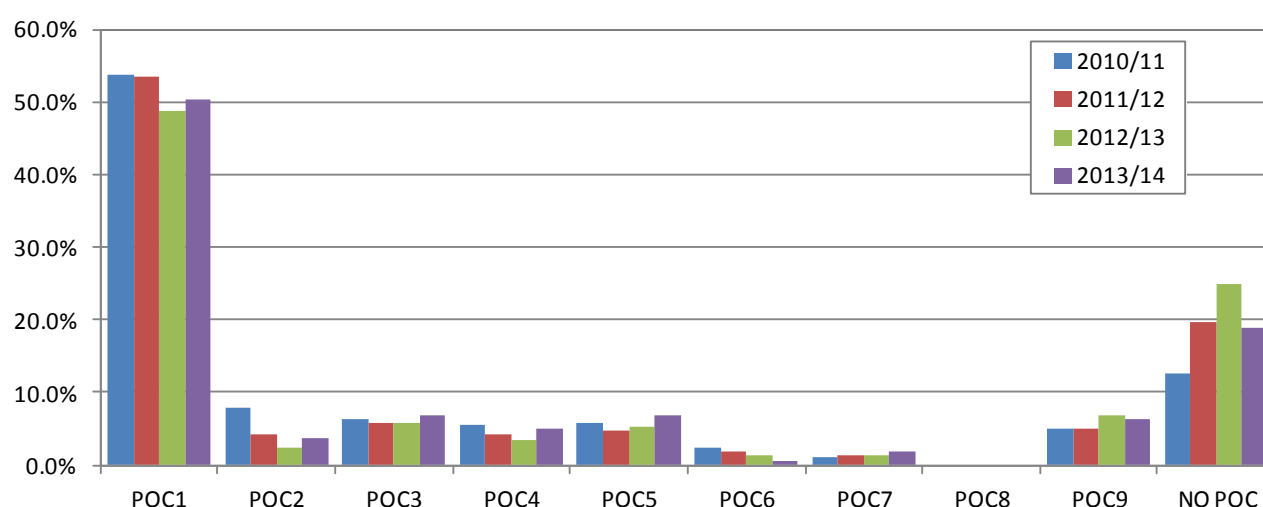
Programme of Care	2010/11		2011/12		2012/13		2013/14	
	No.	%	No.	%	No.	%	No.	%
Acute (POC1)	635	53.7%	626	53.4%	711	48.7%	677	50.4%
Maternal & Child Health (POC2)	92	7.8%	50	4.3%	33	2.3%	48	3.6%
Family & Child Care (POC3)	73	6.2%	67	5.7%	85	5.8%	90	6.7%
Elderly Services (POC4)	64	5.4%	50	4.3%	50	3.4%	67	5.0%
Mental Health (POC5)	69	5.8%	54	4.6%	75	5.1%	91	6.8%
Learning Disability (POC6)	27	2.3%	20	1.7%	21	1.4%	8	0.6%
Sensory Impairment & Physical Disability (POC7)	13	1.1%	16	1.4%	20	1.4%	25	1.9%
Health Promotion & Disease Prevention (POC8)	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Primary Health & Adult Community (POC9)	59	5.0%	58	4.9%	101	6.9%	84	6.3%
No POC Assigned	150	12.7%	231	19.7%	363	24.9%	253	18.8%
<b>Total Number of Complaint Issues</b>	<b>1,182</b>	<b>100.0%</b>	<b>1,172</b>	<b>100.0%</b>	<b>1,459</b>	<b>100.0%</b>	<b>1,343</b>	<b>100.0%</b>

Since 2010/11, the number of complaint issues received by the South Eastern HSC Trust increased by 161 (13.6%), from 1,182 to 1,343 in 2013/14 (Table 8, Figure 5).

Over half (50.4%, 677) of the 1,343 complaint issues received by the South Eastern HSC Trust in 2013/14 related to the Acute POC (Table 8).

The proportion of complaint issues with no POC assigned increased by 6.1 percentage points, from 12.7% (150) in 2010/11 to 18.8% (253) in 2013/14. It is important to note that the South Eastern HSC Trust is the sole provider of prison healthcare in Northern Ireland and these complaints (163) are included in 'No POC Assigned' category (Table 8).

**Figure 5: Percentage of Complaint Issues Received by the South Eastern HSC Trust by POC (2010/11 – 2013/14)**



## Complaint Issues Received by the Southern HSC Trust

Table 9 details the number of complaint issues received by the Southern HSC Trust in each of the last four years by the POC of the complaint issue.

**Table 9: Number of Complaint Issues Received by the Southern HSC Trust, by POC (2010/11 – 2013/14)**

Programme of Care	2010/11		2011/12		2012/13		2013/14	
	No.	%	No.	%	No.	%	No.	%
Acute (POC1)	388	49.9%	465	60.9%	486	57.9%	572	55.4%
Maternal & Child Health (POC2)	2	0.3%	3	0.4%	6	0.7%	0	0.0%
Family & Child Care (POC3)	91	11.7%	85	11.1%	77	9.2%	124	12.0%
Elderly Services (POC4)	44	5.7%	33	4.3%	22	2.6%	80	7.8%
Mental Health (POC5)	46	5.9%	53	6.9%	87	10.4%	98	9.5%
Learning Disability (POC6)	31	4.0%	27	3.5%	42	5.0%	47	4.6%
Sensory Impairment & Physical Disability (POC7)	26	3.3%	11	1.4%	25	3.0%	43	4.2%
Health Promotion & Disease Prevention (POC8)	0	0.0%	2	0.3%	0	0.0%	1	0.1%
Primary Health & Adult Community (POC9)	149	19.2%	85	11.1%	94	11.2%	66	6.4%
No POC Assigned	0	0.0%	0	0.0%	0	0.0%	1	0.1%
<b>Total Number of Complaint Issues</b>	<b>777</b>	<b>100.0%</b>	<b>764</b>	<b>100.0%</b>	<b>839</b>	<b>100.0%</b>	<b>1,032</b>	<b>100.0%</b>

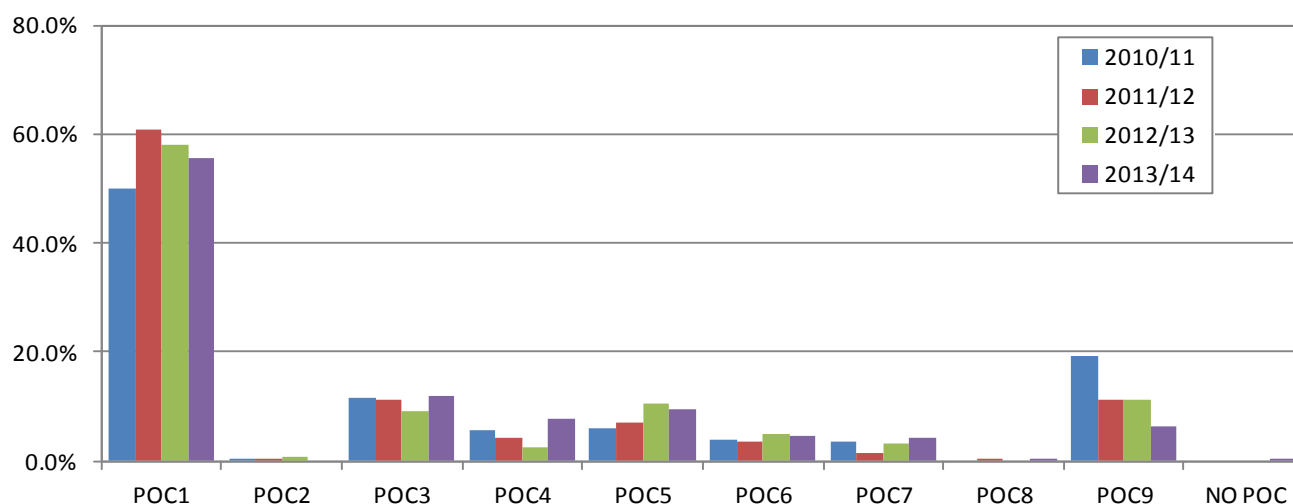
Between 2010/11 and 2013/14, the number of complaint issues received by the Southern HSC Trust increased by 255 (32.8%), from 777 to 1,032 (Table 9, Figure 6).

Over half (55.4%, 572) of the 1,032 complaint issues received by the Southern HSC Trust in 2013/14 related to the Acute POC (Table 9).

During the last four years, the proportion of complaint issues received by the Southern HSC Trust relating to the Acute POC increased by 5.5 percentage points, from 49.9% (388) in 2010/11 to 55.4% (572) in 2013/14 (Table 9).

Since 2010/11, the proportion of complaint issues received by the Southern HSC Trust relating to the Primary Health & Adult Community POC decreased by 12.8 percentage points, from 19.2% (149) to 6.4% (66) in 2013/14 (Table 9).

**Figure 6: Percentage of Complaint Issues Received by the Southern HSC Trust by POC (2010/11 – 2013/14)**



## Complaint Issues Received by the Western HSC Trust

Table 10 details the number of complaint issues received by the Western HSC Trust in each of the last four years by the POC of the complaint issue.

**Table 10: Number of Complaint Issues Received by the Western HSC Trust, by POC (2010/11 – 2013/14)**

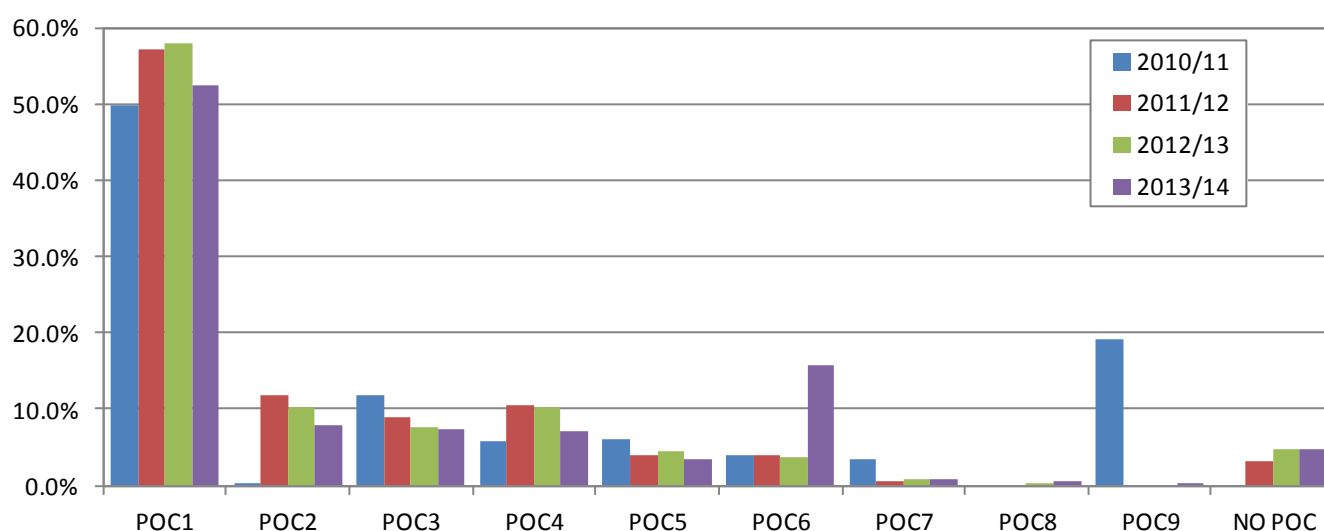
Programme of Care	2010/11		2011/12		2012/13		2013/14	
	No.	%	No.	%	No.	%	No.	%
Acute (POC1)	248	55.1%	267	57.2%	343	58.0%	419	52.4%
Maternal & Child Health (POC2)	29	6.4%	55	11.8%	60	10.2%	63	7.9%
Family & Child Care (POC3)	55	12.2%	42	9.0%	45	7.6%	59	7.4%
Elderly Services (POC4)	54	12.0%	49	10.5%	60	10.2%	56	7.0%
Mental Health (POC5)	19	4.2%	18	3.9%	27	4.6%	28	3.5%
Learning Disability (POC6)	17	3.8%	18	3.9%	22	3.7%	125	15.6%
Sensory Impairment & Physical Disability (POC7)	13	2.9%	3	0.6%	5	0.8%	7	0.9%
Health Promotion & Disease Prevention (POC8)	0	0.0%	0	0.0%	1	0.2%	4	0.5%
Primary Health & Adult Community (POC9)	3	0.7%	0	0.0%	0	0.0%	2	0.3%
No POC Assigned	12	2.7%	15	3.2%	28	4.7%	37	4.6%
<b>Total Number of Complaint Issues</b>	<b>450</b>	<b>100.0%</b>	<b>467</b>	<b>100.0%</b>	<b>591</b>	<b>100.0%</b>	<b>800</b>	<b>100.0%</b>

Between 2010/11 and 2013/14, the number of complaint issues received by the Western HSC Trust almost doubled (350, 77.8%), from 450 to 800 (Table 10, Figure 7).

Over half (52.4%, 419) of the 800 complaint issues received by the Western HSC Trust in 2013/14 related to the Acute POC (Table 10).

During the last four years, the proportion of complaint issues received by the Western HSC Trust relating to the Learning Disability POC increased by 11.8 percentage points, from 3.8% (17) in 2010/11 to 15.6% (125) in 2013/14 (Table 10).

**Figure 7: Percentage of Complaint Issues Received by the Western HSC Trust by POC (2010/11 – 2013/14)**



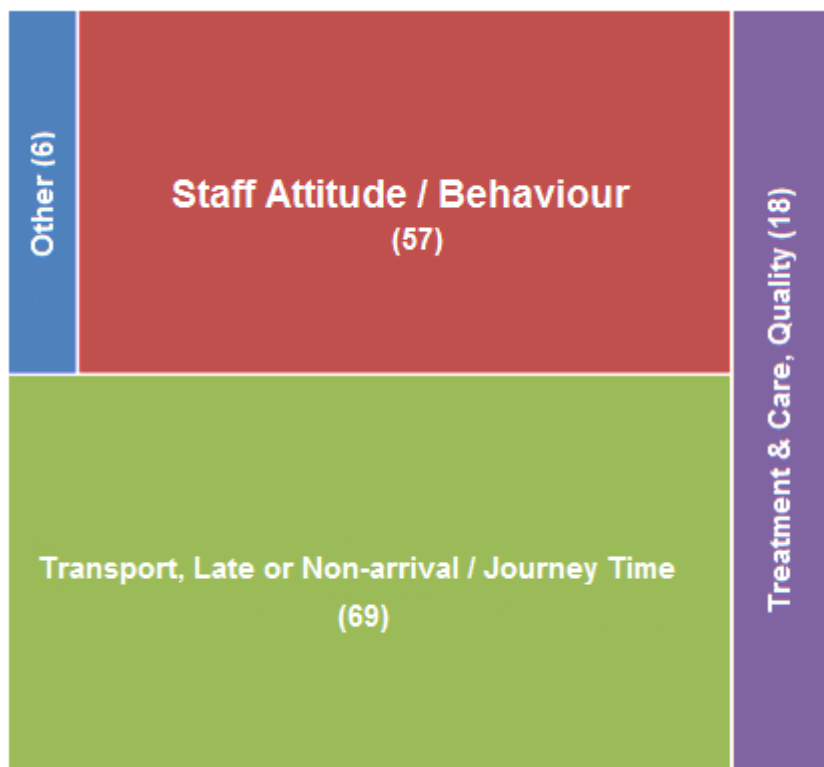
## Complaint Issues Received by the NIAS

During 2013/14, 150 complaint issues were received by the NIAS. It is not possible to provide a breakdown by Programme of Care as complaint issues received by NIAS are not assigned to a POC.

Since 2010/11, the number of complaint issues received by the NIAS increased by 58 (63.0%), from 92 to 150 in 2013/14.

Of the 150 complaint issues received by the NIAS in 2013/14, almost half (69, 46.0%), related to 'Transport, Late or Non-arrival/Journey Time', 57 (38.0%) to 'Staff Attitude/Behaviour', 18 (12.0%) to 'Treatment & Care, Quality' and 6 (4.0%) to 'Other' (Figure 8 and Table 1f, Appendix 1).

**Figure 8: Complaint Issues Received by the NIAS, by Subject (2013/14)<sup>5</sup>**



<sup>5</sup> 'Other' refers to complaint issues recorded as 'Other', 'Discharge/Transfer Arrangements', 'Patients' Property/Expenses/Finance' and 'Transport, Suitability of Vehicle/Equipment'.



## Time Taken to Provide a Substantive Response to Complaints Received<sup>6</sup>

Table 11 below details the length of time taken by HSC Trusts to provide a substantive response to complaints received during the financial year. A substantive response is defined as communication of the outcome of the complaint to the complainant following investigation. It should be noted that only one substantive response will be provided to a number of complaint issues made by a complainant, i.e. 4,968 complaints were received in 2013/14 relating to 6,836 complaint issues.

For all complaints received, a holding response will be issued to the complainant if the Trust is waiting for additional information to investigate the complaint and the length of time taken to provide a substantive response to the complaint will exceed 20 working days. All holding responses are issued in 20 working days or less.

The information detailed below refers to the position of complaints received by HSC Trusts during the year at 31<sup>st</sup> March each year, i.e. information for 2011/12 refers to the position at 31<sup>st</sup> March 2012.

**Table 11: Time Taken to Provide a Substantive Response to Complaints Received, by HSC Trust (2011/12 - 2013/14)**

HSC Trust	20 Working Days or Less						More Than 20 Working Days					
	2011/12		2012/13		2013/14		2011/12		2012/13		2013/14	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Belfast	858	57.0%	732	44.9%	937	50.0%	646	43.0%	900	55.1%	936	50.0%
Northern	459	72.3%	419	65.7%	431	59.5%	176	27.7%	219	34.3%	293	40.5%
South Eastern	382	46.6%	415	43.1%	397	42.6%	437	53.4%	547	56.9%	536	57.4%
Southern	291	54.2%	379	58.9%	393	50.4%	246	45.8%	264	41.1%	387	49.6%
Western	244	75.3%	310	76.9%	391	76.7%	80	24.7%	93	23.1%	119	23.3%
NIAS	34	34.7%	43	30.7%	48	32.4%	64	65.3%	97	69.3%	100	67.6%
<b>Northern Ireland</b>	<b>2,268</b>	<b>57.9%</b>	<b>2,298</b>	<b>52.0%</b>	<b>2,597</b>	<b>52.3%</b>	<b>1,649</b>	<b>42.1%</b>	<b>2,120</b>	<b>48.0%</b>	<b>2,371</b>	<b>47.7%</b>

During 2013/14, over half (2,597, 52.3%) of substantive responses were provided by HSC Trusts within 20 working days of having received the complaint, 5.6 percentage points fewer than 2011/12 (2,268, 57.9%) (Table 11).

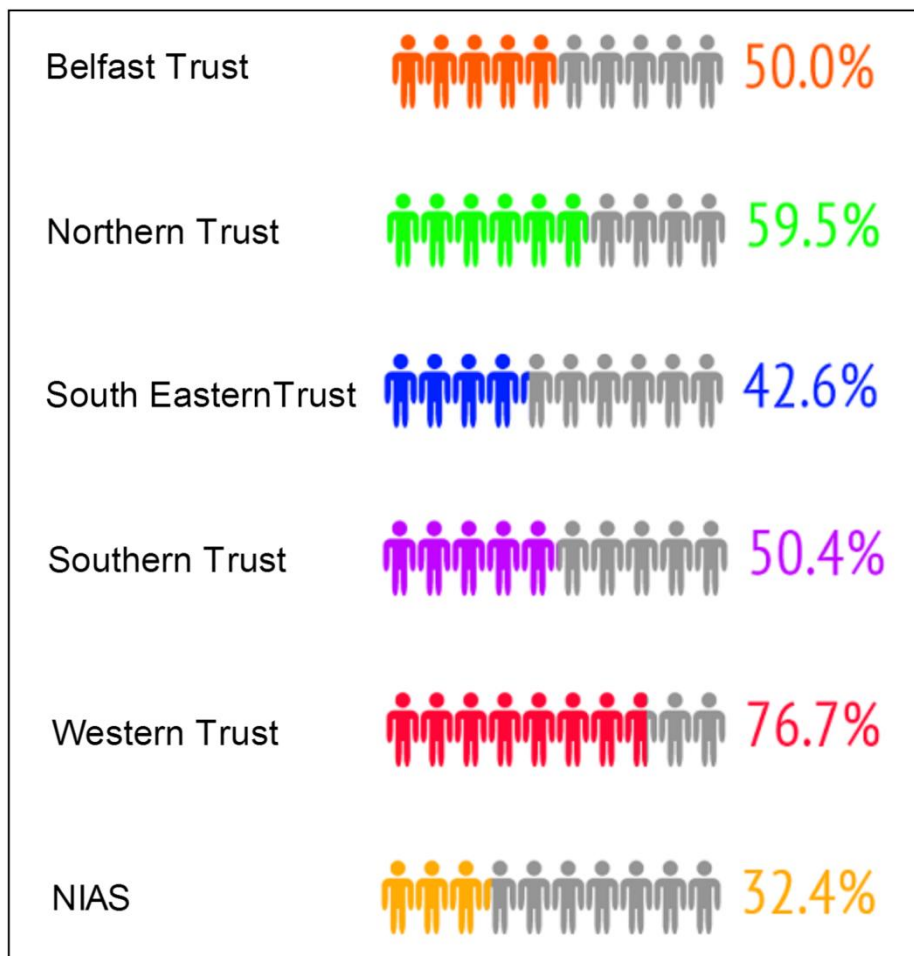
During 2013/14, the Western HSC Trust provided the highest proportion of substantive responses within 20 working days (391, 76.7%), whilst the NIAS provided the lowest (48, 32.4%) (Table 11 & Figure 9).

Since 2011/12, the proportion of substantive responses provided by the Northern HSC Trust within 20 days decreased by 12.8 percentage points, from 72.3% (459) to 59.5% (431) in 2013/14 (Table 11).

Since 2011/12, the number of substantive responses provided by HSC Trusts that took over 20 working days increased by 722 (43.8%), from 1,649 to 2,371 in 2013/14 (Table 11).

<sup>6</sup> Responses are sent to letters of complaint, a letter may contain more than one complaint issue, therefore total responses will always be less than or equal to the total number of complaint issues.

**Figure 9: Percentage of Complaints Receiving a Substantive Response Within 20 Working Days, by HSC Trust (2013/14)**



## Complaints Regarding Family Practitioner Services (FPS)<sup>7</sup>

There are over 1,500 FPS Practices across Northern Ireland encompassing general practitioners, dental practitioners, pharmacists and optometrists. Under HSC Complaints Procedure all FPS practices are required to forward to the HSC Board anonymised copies of each letter of complaint received along with the subsequent response, within 3 working days of this being issued.

Since 2010/11, the number of complaints made against FPS services in Northern Ireland increased by 25 (8.3%), from 302 to 327 in 2013/14 (Tables 12 & 14).

### Local resolution

The first stage of the HSC Complaints Procedure is known as 'local resolution'. The purpose of local resolution is to provide an opportunity for the complainant and the organisation to attempt a prompt and fair resolution of the complaint. In the case of FPS practices, local resolution involves a practitioner seeking to resolve the complaint through discussion and negotiation.

**Table 12: Number of FPS Complaints Handled Under Local Resolution (2010/11 – 2013/14)**

Practice	2010/11		2011/12		2012/13		2013/14	
	No.	%	No.	%	No.	%	No.	%
GP	199	92.1%	189	89.2%	228	92.3%	241	94.5%
Dental	13	6.0%	19	9.0%	14	5.7%	12	4.7%
Pharmacy	3	1.4%	3	1.4%	5	2.0%	2	0.8%
Ophthalmic	1	0.5%	1	0.5%	0	0.0%	0	0.0%
<b>Total</b>	<b>216</b>	<b>100.0%</b>	<b>212</b>	<b>100.0%</b>	<b>247</b>	<b>100.0%</b>	<b>255</b>	<b>100.0%</b>

Since 2010/11, the number of complaints handled under local resolution increased by 39 (18.1%), from 216 to 255 in 2013/14 (Table 12).

During each of the last four years, around 9 in 10 complaints handled under local resolution, related to GPs, ranging from 89.2% (189) in 2011/12 to 94.5% (241) in 2013/14 (Table 12).

**Table 13: FPS Complaints Handled Under Local Resolution, by Subject of Complaint (2013/14)**

Subject	GP	Dental	Pharmacy	Ophthalmic	Total
Treatment & Care	119	8	0	0	127
Staff Attitude	29	1	1	0	31
Communication/Information	59	3	0	0	62
Confidentiality	3	0	0	0	3
Clinical Diagnosis	6	0	0	0	6
Other	25	0	1	0	26
<b>Total</b>	<b>241</b>	<b>12</b>	<b>2</b>	<b>0</b>	<b>255</b>

During 2013/14, almost half (127, 49.8%) of complaints handled under local resolution related to 'Treatment & Care', 62 (24.3%) to 'Communication/Information', 31 (12.2%) to 'Staff Attitude', 26 (10.2%) to 'Other', 6 (2.4%) to 'Clinical Diagnosis' and 3 (1.2%) to 'Confidentiality' (Table 13).

<sup>7</sup> Information for 2011/12 has been sourced from previously published data contained within 'Annual Complaints Report of the Health and Social Care Board'

## Honest Broker

Where a complainant does not wish to approach the FPS practice directly, HSC Board complaints staff, with the agreement of both the practice and complainant, may act as an intermediary or 'honest broker' with the aim of assisting in the local resolution of the complaint.

**Table 14: Number of FPS Complaints where the HSC Board Acted as an Honest Broker (2010/11 – 2013/14)**

Practice	2010/11		2011/12		2012/13		2013/14	
	No.	%	No.	%	No.	%	No.	%
GP	47	54.7%	50	71.4%	87	75.0%	57	79.2%
Dental	36	41.9%	18	25.7%	20	17.2%	13	18.1%
Pharmacy	0	0.0%	1	1.4%	8	6.9%	2	2.8%
Ophthalmic	3	3.5%	1	1.4%	1	0.9%	0	0.0%
<b>Total</b>	<b>86</b>	<b>100.0%</b>	<b>70</b>	<b>100.0%</b>	<b>116</b>	<b>100.0%</b>	<b>72</b>	<b>100.0%</b>

Between 2010/11 and 2012/13, the number of complaints where the HSC Board acted as an honest broker increased by 30 (34.9%), from 86 to 116, but decreased by 44 (37.9%) since 2012/13, to 72 in 2013/14 (Table 14).

Almost four in five (57, 79.2%) complaints, in which the HSC Board acted as an honest broker, related to GP complaints in 2013/14 (Table 14).

**Table 15: FPS Complaints Where the Board Acted as an Honest Broker, by Subject of Complaint (2013/14)**

Subject	GP	Dental	Pharmacy	Ophthalmic	Total
Treatment & Care	37	11	2	0	50
Staff Attitude	10	1	0	0	11
Communication/Information	4	1	0	0	5
Confidentiality	0	0	0	0	0
Clinical Diagnosis	3	0	0	0	3
Other	3	0	0	0	3
<b>Total</b>	<b>57</b>	<b>13</b>	<b>2</b>	<b>0</b>	<b>72</b>

During 2013/14, over two thirds (50, 69.4%) of complaints where the HSC Board acted as an honest broker related to 'Treatment & Care', 11 (15.3%) to 'Staff Attitude', 5 (6.9%) to 'Communication / Information', 3 (4.2%) to both 'Clinical Diagnosis' and 'Other' (Table 15).

## Complaints Regarding the HSC Board

As well as monitoring the handling of complaints involving FPS the HSC Board also has responsibility for investigating and responding to those complaints that are made directly against their own organisation.

Table 16 below details the number of complaints received by the HSC Board in each of the last four years.

**Table 16: HSC Board Complaints, by Year (2010/11 - 2013/14)**

<b>Year</b>	<b>HSC Board Complaints</b>
2010/11	9
2011/12	14
2012/13	11
2013/14	9

In the last four years the highest number of complaints received by the HSC Board was in 2011/12 (14) (Table 16).

During 2013/14, the HSC Board received 9 complaints: 5 (55.6%) relating to 'Board Purchasing', 3 (33.3%) relating to 'Communication/Information' and 1 (11.1%) relating to 'Policy/Commercial Decisions'.

## APPENDIX 1:

**Table 1a: Subject of Complaint Issues Received by the Belfast HSC Trust (2010/11 – 2013/14)**

Subject	2010/11	2011/12	2012/13	2013/14
Access to Premises	34	16	14	27
Admission into Hospital, Delay/Cancellation (Inpatients)	87	132	145	200
Aids/Adaptations/Appliances	30	23	39	35
Appointments, Delay/Cancellation (Outpatient)	318	291	267	318
Children Order Complaint Issues	0	0	1	13
Clinical Diagnosis	72	105	60	64
Communication/Information to Patients	223	369	337	455
Complaints Handling	0	1	0	2
Confidentiality	12	21	20	22
Consent to Treatment	2	3	1	1
Contracted Regulated Establishments and Agencies	10	37	31	37
Other Contracted Services	17	2	4	8
Delayed Admission from A&E	3	2	1	2
Discharge/Transfer Arrangements	35	47	43	60
Environmental	20	18	21	32
Hotel/Support/Security Services	30	24	14	40
Infection Control	14	11	6	7
Mortuary & Post-Mortem	1	0	1	0
Patients' Privacy/Dignity	15	18	14	16
Patients' Property/Expenses/Finance	26	34	40	56
Patients' Status/Discrimination	3	5	3	4
Policy/Commercial Decisions	16	27	12	4
Prison Healthcare Related Complaint Issues	0	0	0	0
Professional Assessment of Need	20	22	15	12
Records/Records Keeping	12	21	18	17
Staff Attitude/Behaviour	289	322	323	358
Theatre/Operation/Procedure, Delay/Cancellation	41	31	16	43
Transport, Late or Non-arrival/Journey Time	5	5	1	4
Transport, Suitability of Vehicle/Equipment	1	1	1	1
Treatment & Care, Quality	282	281	399	403
Treatment & Care, Quantity	110	126	92	150
Waiting Lists, Community Services	5	12	12	18
Waiting Times, Community Services	5	15	1	3
Waiting Times, A&E Departments	47	47	47	35
Waiting Times, Outpatient Departments	39	37	84	40
Other	31	16	30	27
<b>Total Number of Complaint Issues</b>	<b>1,855</b>	<b>2,122</b>	<b>2,113</b>	<b>2,514</b>

**Table 1b: Subject of Complaint Issues Received by the Northern HSC Trust (2010/11 – 2013/14)**

<b>Subject</b>	<b>2010/11</b>	<b>2011/12</b>	<b>2012/13</b>	<b>2013/14</b>
Access to Premises	0	0	1	1
Admission into Hospital, Delay/Cancellation (Inpatients)	18	5	6	8
Aids/Adaptations/Appliances	0	1	7	1
Appointments, Delay/Cancellation (Outpatient)	30	28	35	42
Children Order Complaint Issues	1	6	4	11
Clinical Diagnosis	41	39	39	36
Communication/Information to Patients	41	83	91	99
Complaints Handling	0	0	0	1
Confidentiality	11	7	9	14
Consent to Treatment	0	0	0	0
Contracted Regulated Establishments and Agencies	0	6	5	32
Other Contracted Services	2	4	7	12
Delayed Admission from A&E	1	4	9	1
Discharge/Transfer Arrangements	11	13	23	35
Environmental	5	8	1	12
Hotel/Support/Security Services	16	78	25	21
Infection Control	6	9	3	5
Mortuary & Post-Mortem	0	0	0	0
Patients' Privacy/Dignity	5	6	6	10
Patients' Property/Expenses/Finance	4	11	6	3
Patients' Status/Discrimination	0	1	2	0
Policy/Commercial Decisions	39	42	62	42
Prison Healthcare Related Complaint Issues	0	0	0	0
Professional Assessment of Need	66	69	54	49
Records/Records Keeping	6	10	15	29
Staff Attitude/Behaviour	101	113	127	160
Theatre/Operation/Procedure, Delay/Cancellation	5	13	7	3
Transport, Late or Non-arrival/Journey Time	1	0	0	0
Transport, Suitability of Vehicle/Equipment	2	0	1	1
Treatment & Care, Quality	155	185	237	268
Treatment & Care, Quantity	31	24	6	18
Waiting Lists, Community Services	39	20	8	41
Waiting Times, Community Services	1	4	0	1
Waiting Times, A&E Departments	33	17	27	17
Waiting Times, Outpatient Departments	8	8	7	12
Other	18	48	26	12
<b>Total Number of Complaint Issues</b>	<b>697</b>	<b>862</b>	<b>856</b>	<b>997</b>

**Table 1c: Subject of Complaint Issues Received by the South Eastern HSC Trust  
(2010/11 – 2013/14)**

<b>Subject</b>	<b>2010/11</b>	<b>2011/12</b>	<b>2012/13</b>	<b>2013/14</b>
Access to Premises	21	20	30	38
Admission into Hospital, Delay/Cancellation (Inpatients)	12	22	16	20
Aids/Adaptations/Appliances	18	20	19	16
Appointments, Delay/Cancellation (Outpatient)	58	42	50	59
Children Order Complaint Issues	1	0	0	3
Clinical Diagnosis	49	32	50	48
Communication/Information to Patients	155	158	201	170
Complaints Handling	2	0	1	3
Confidentiality	18	13	13	16
Consent to Treatment	0	0	3	1
Contracted Regulated Establishments and Agencies	3	6	12	16
Other Contracted Services	0	1	9	2
Delayed Admission from A&E	6	4	9	0
Discharge/Transfer Arrangements	19	17	21	23
Environmental	18	25	29	23
Hotel/Support/Security Services	5	11	10	23
Infection Control	14	16	10	4
Mortuary & Post-Mortem	0	0	1	0
Patients' Privacy/Dignity	9	9	13	4
Patients' Property/Expenses/Finance	23	20	16	26
Patients' Status/Discrimination	7	5	9	7
Policy/Commercial Decisions	23	28	30	32
Prison Healthcare Related Complaint Issues	90	174	267	163
Professional Assessment of Need	13	11	9	23
Records/Records Keeping	21	18	25	26
Staff Attitude/Behaviour	182	160	191	197
Theatre/Operation/Procedure, Delay/Cancellation	21	6	11	9
Transport, Late or Non-arrival/Journey Time	1	2	1	6
Transport, Suitability of Vehicle/Equipment	3	0	0	1
Treatment & Care, Quality	299	240	301	267
Treatment & Care, Quantity	15	20	28	23
Waiting Lists, Community Services	5	10	8	11
Waiting Times, Community Services	4	4	6	5
Waiting Times, A&E Departments	16	31	18	22
Waiting Times, Outpatient Departments	13	9	10	20
Other	38	38	32	36
<b>Total Number of Complaint Issues</b>	<b>1,182</b>	<b>1,172</b>	<b>1,459</b>	<b>1,343</b>



**Table 1d: Subject of Complaint Issues Received by the Southern HSC Trust (2010/11 – 2013/14)**

<b>Subject</b>	<b>2010/11</b>	<b>2011/12</b>	<b>2012/13</b>	<b>2013/14</b>
Access to Premises	8	10	10	12
Admission into Hospital, Delay/Cancellation (Inpatients)	9	6	21	14
Aids/Adaptations/Appliances	24	23	19	19
Appointments, Delay/Cancellation (Outpatient)	61	46	41	50
Children Order Complaint Issues	14	0	0	1
Clinical Diagnosis	10	18	25	15
Communication/Information to Patients	58	64	70	73
Complaints Handling	3	1	1	2
Confidentiality	6	9	11	13
Consent to Treatment	0	1	0	0
Contracted Regulated Establishments and Agencies	0	2	5	2
Other Contracted Services	1	2	1	1
Delayed Admission from A&E	0	1	1	2
Discharge/Transfer Arrangements	21	23	27	29
Environmental	6	28	19	16
Hotel/Support/Security Services	3	2	6	7
Infection Control	0	2	0	0
Mortuary & Post-Mortem	0	0	0	0
Patients' Privacy/Dignity	3	7	7	3
Patients' Property/Expenses/Finance	19	18	15	19
Patients' Status/Discrimination	6	3	6	1
Policy/Commercial Decisions	47	21	16	49
Prison Healthcare Related Complaint Issues	0	0	0	0
Professional Assessment of Need	85	36	64	95
Records/Records Keeping	14	18	13	22
Staff Attitude/Behaviour	105	132	156	168
Theatre/Operation/Procedure, Delay/Cancellation	6	6	4	16
Transport, Late or Non-arrival/Journey Time	0	6	1	0
Transport, Suitability of Vehicle/Equipment	1	1	2	0
Treatment & Care, Quality	159	212	229	282
Treatment & Care, Quantity	62	19	18	20
Waiting Lists, Community Services	4	2	2	29
Waiting Times, Community Services	10	5	9	0
Waiting Times, A&E Departments	13	21	18	30
Waiting Times, Outpatient Departments	11	14	10	34
Other	8	5	12	8
<b>Total Number of Complaint Issues</b>	<b>777</b>	<b>764</b>	<b>839</b>	<b>1,032</b>

**Table 1e: Subject of Complaint Issues Received by the Western HSC Trust (2010/11 – 2013/14)**

Subject	2010/11	2011/12	2012/13	2013/14
Access to Premises	5	1	5	1
Admission into Hospital, Delay/Cancellation (Inpatients)	6	5	18	31
Aids/Adaptations/Appliances	5	2	1	5
Appointments, Delay/Cancellation (Outpatient)	11	7	10	17
Children Order Complaint Issues	8	6	8	15
Clinical Diagnosis	25	28	23	43
Communication/Information to Patients	51	52	87	99
Complaints Handling	0	0	1	0
Confidentiality	9	2	3	7
Consent to Treatment	2	0	1	0
Contracted Regulated Establishments and Agencies	0	0	1	3
Other Contracted Services	1	7	3	5
Delayed Admission from A&E	5	0	1	0
Discharge/Transfer Arrangements	22	26	15	6
Environmental	5	4	4	4
Hotel/Support/Security Services	1	1	1	2
Infection Control	3	5	5	3
Mortuary & Post-Mortem	0	0	0	0
Patients' Privacy/Dignity	7	9	16	8
Patients' Property/Expenses/Finance	2	4	9	6
Patients' Status/Discrimination	0	1	1	0
Policy/Commercial Decisions	11	3	4	61
Prison Healthcare Related Complaint Issues	0	0	0	0
Professional Assessment of Need	12	7	11	9
Records/Records Keeping	2	5	3	4
Staff Attitude/Behaviour	68	93	72	163
Theatre/Operation/Procedure, Delay/Cancellation	7	0	0	1
Transport, Late or Non-arrival/Journey Time	1	0	1	1
Transport, Suitability of Vehicle/Equipment	0	0	1	0
Treatment & Care, Quality	138	158	223	225
Treatment & Care, Quantity	24	8	15	17
Waiting Lists, Community Services	2	0	0	0
Waiting Times, Community Services	0	1	2	1
Waiting Times, A&E Departments	6	10	10	6
Waiting Times, Outpatient Departments	5	11	17	33
Other	6	11	19	24
<b>Total Number of Complaint Issues</b>	<b>450</b>	<b>467</b>	<b>591</b>	<b>800</b>

**Table 1f: Subject of Complaint Issues Received by the NIAS (2010/11 – 2013/14)**

<b>Subject</b>	<b>2010/11</b>	<b>2011/12</b>	<b>2012/13</b>	<b>2013/14</b>
Access to Premises	0	0	0	0
Admission into Hospital, Delay/Cancellation (Inpatients)	0	0	0	0
Aids/Adaptations/Appliances	0	0	0	0
Appointments, Delay/Cancellation (Outpatient)	0	0	0	0
Children Order Complaint Issues	0	0	0	0
Clinical Diagnosis	0	0	0	0
Communication/Information to Patients	0	0	1	0
Complaints Handling	0	0	0	0
Confidentiality	0	0	0	0
Consent to Treatment	0	0	0	0
Contracted Regulated Establishments and Agencies	0	0	0	0
Other Contracted Services	0	0	0	0
Delayed Admission from A&E	0	0	0	0
Discharge/Transfer Arrangements	0	0	0	2
Environmental	0	0	0	0
Hotel/Support/Security Services	0	0	0	0
Infection Control	0	0	0	0
Mortuary & Post-Mortem	0	0	0	0
Patients' Privacy/Dignity	0	0	0	0
Patients' Property/Expenses/Finance	1	1	0	1
Patients' Status/Discrimination	0	0	0	0
Policy/Commercial Decisions	0	0	0	0
Prison Healthcare Related Complaint Issues	0	0	0	0
Professional Assessment of Need	0	0	0	0
Records/Records Keeping	0	0	0	0
Staff Attitude/Behaviour	27	37	44	57
Theatre/Operation/Procedure, Delay/Cancellation	0	0	0	0
Transport, Late or Non-arrival/Journey Time	32	39	71	69
Transport, Suitability of Vehicle/Equipment	4	0	2	1
Treatment & Care, Quality	19	17	14	18
Treatment & Care, Quantity	0	0	0	0
Waiting Lists, Community Services	0	0	0	0
Waiting Times, Community Services	0	0	0	0
Waiting Times, A&E Departments	0	0	0	0
Waiting Times, Outpatient Departments	0	0	0	0
Other	9	4	8	2
<b>Total Number of Complaint Issues</b>	<b>92</b>	<b>98</b>	<b>140</b>	<b>150</b>

**Table 1g: Subject of Complaint Issues Received in Northern Ireland  
(2010/11 – 2013/14)**

<b>Subject</b>	<b>2010/11</b>	<b>2011/12</b>	<b>2012/13</b>	<b>2013/14</b>
Access to Premises	68	47	60	79
Admission into Hospital, Delay/Cancellation (Inpatients)	132	170	206	273
Aids/Adaptations/Appliances	77	69	85	76
Appointments, Delay/Cancellation (Outpatient)	478	414	403	486
Children Order Complaint Issues	24	12	13	43
Clinical Diagnosis	197	222	197	206
Communication/Information to Patients	528	726	787	896
Complaints Handling	5	2	3	8
Confidentiality	56	52	56	72
Consent to Treatment	4	4	5	2
Contracted Regulated Establishments and Agencies	13	51	54	90
Other Contracted Services	21	16	24	28
Delayed Admission from A&E	15	11	21	5
Discharge/Transfer Arrangements	108	126	129	155
Environmental	54	83	74	87
Hotel/Support/Security Services	55	116	56	93
Infection Control	37	43	24	19
Mortuary & Post-Mortem	1	0	2	0
Patients' Privacy/Dignity	39	49	56	41
Patients' Property/Expenses/Finance	75	88	86	111
Patients' Status/Discrimination	16	15	21	12
Policy/Commercial Decisions	136	121	124	188
Prison Healthcare Related Complaint Issues	90	174	267	163
Professional Assessment of Need	196	145	153	188
Records/Records Keeping	55	72	74	98
Staff Attitude/Behaviour	772	857	913	1,103
Theatre/Operation/Procedure, Delay/Cancellation	80	56	38	72
Transport, Late or Non-arrival/Journey Time	40	52	75	80
Transport, Suitability of Vehicle/Equipment	11	2	7	4
Treatment & Care, Quality	1,052	1,093	1,403	1,463
Treatment & Care, Quantity	242	197	159	228
Waiting Lists, Community Services	55	44	30	99
Waiting Times, Community Services	20	29	18	10
Waiting Times, A&E Departments	115	126	120	110
Waiting Times, Outpatient Departments	76	79	128	139
Other	110	122	127	109
<b>Total Number of Complaint Issues</b>	<b>5,053</b>	<b>5,485</b>	<b>5,998</b>	<b>6,836</b>

## APPENDIX 2: Definitions

### Programme of care

Programmes of care are divisions of health care, into which activity and finance data are assigned, so as to provide a common management framework. They are used to plan and monitor the health service, by allowing performance to be measured, targets set and services managed on a comparative basis. There are nine programmes of care as follows:

POC1 Acute	POC6 Learning Disability
POC2 Maternity and Child Health	POC7 Sensory Impairment and Physical Disability
POC3 Family and Child Care	POC8 Health Promotion and Disease Prevention
POC4 Elderly Services	POC9 Primary Health and Adult Community
POC5 Mental Health	

### Complaint Issues

For the purposes of the CH8 return, a complaint may be understood as 'an expression of dissatisfaction requiring a response'. This return includes information on all formal complaints only, informal complaints or communications criticising a service or the quality of care but not adjudged to require a response, are not included on this form.

A single communication regarding a complaint may refer to more than one issue. In such cases each individual complaint issue is recorded separately for Programme of Care (POC) and Subject.

Only complaints received from/on behalf of patients/clients or other 'existing or former users of a Trust's services and facilities' should be included. Complaints from staff are not included.

Where separate communications in respect of a single patient/client refer to one episode, they are treated as a single complaint issue for the purposes of this form. In other words, if two relatives complain about the same subject/episode in respect of the same patient, this should be treated as one complaint issue only. However, if two relatives complain about separate subjects/episodes but in the care of the same patient, these should be treated as separate complaint issues.

Where separate unconnected communications refer to the same episode/issue, they may be treated as separate complaint issues. In other words, if separate individuals complain about a matter they have all experienced, this would be treated as separate complaint issues, e.g. if ten clients complain individually about conditions in a day centre, these should be treated as ten separate complaint issues.

The logic of the complaints procedure is that it should afford a speedy resolution of cases of individual dissatisfaction of service. This differs from the case of petitions where the concern is primarily the collective representation of views, e.g. if a single complaint is received from a group of users, it should be treated as a single complaint issue.

Where a complainant is dissatisfied with the Trust's response to his/her complaint and enters into further communications about the same matter/s, this is not a new complaint, rather it will be the same complaint reopened. Such a complaint would only be recorded once in the CH8, i.e. in the quarter it was initially received. However, if this complainant were to then complain about a separate/different matter, this would be a new complaint.

## **APPENDIX 3: Subject of Complaint Issues**

### **1. Access to Premises**

This heading includes all issues concerning ease of movement inside and outside the buildings, e.g. signage, car parking, etc. Problems of wheelchair access / disabled parking etc. should also be included under this heading, if not covered under '*Patients' Status / Discrimination*' (20).

### **2. Admission into Hospital, Delay / Cancellation (Inpatients)**

This refers to delay or cancellation coming into hospital for inpatient and day case admissions, e.g. waiting list for surgery. Delayed admissions from A&E should not be included in this category but under '*Delayed Admission from A&E*' (13).

### **3. Aids / Adaptations / Appliances**

This heading refers to the suitability / availability of any aids / adaptations, once they have been recommended. Complaint issues about waiting for assessment should be included under '*Waiting Lists, Community Services*' (32).

### **4. Appointments, Delay / Cancellation (Outpatient)**

This heading refers to delay or cancellation in securing an appointment at an outpatient clinic, i.e. outpatient waiting lists. It is to be distinguished from '*Waiting Lists, Community Services*' (32) and '*Waiting Times, Outpatient Departments*' (35).

### **5. Children Order Complaint Issues**

This heading refers to all formal complaint issues received under the Children Order Representations and Complaint Issues Procedure, irrespective of their subject or content.

### **6. Clinical Diagnosis**

This heading covers clinical diagnosis only and is to be distinguished from '*Professional Assessment of Need*' (22).

### **7. Communication / Information to Patients**

This heading includes all issues of communication and information provided to patients / clients / families / carers regarding any aspect of their contact with staff. However, this should be distinguished from complaint issues about the attitude of staff when communicating with patients / clients, which would be logged under '*Staff Attitude / Behaviour*' (24).

### **8. Complaint Issue Handling**

This refers to handling of a complaint issue at any point up to and including the conclusion of local resolution stage, e.g. a complainant complains that he/she did not receive a response within the timescale. However, a complaint issue would not be included under this heading if it obviously falls under another heading, e.g. if the complaint issue is about attitude of staff handling the complaint issue, it would be logged under '*Staff Attitude / Behaviour*' (24).

### **9. Confidentiality**

This heading includes any issues of confidentiality regarding patients / clients, e.g. (i) complaint by a patient regarding a breach of confidentiality or (ii) complaint by the parents of a young adolescent who are denied information by staff on the grounds of that adolescent's right to confidentiality.

### **10. Consent to Treatment**

This refers to complaint issues made regarding consent to treatment/care.

### **11. Contracted Regulated Establishments and Agencies**

This heading refers to complaint issues about services that are provided by Trusts via contractual / commissioned arrangements. Establishments may be children's homes, independent hospitals and nursing or residential homes, while Agencies may be a domiciliary care agency, fostering agency or nursing agency. For a full list of Regulated Establishments and Agencies please refer to 'Quality & Improvement Regulation NI Order 2003, Article 8'.

In the first instance, the service provider is expected to deal with complaint issues, however, where the complainant, Trust or RQIA wishes, the matter may be investigated by the Trust under the HPSS Complaint Procedure.

Examples: (i) the Trust (as the commissioner) is asked by either RQIA or a relative, to investigate a complaint issue about the care or treatment provided to a resident in an Independent Nursing or Residential Home; (ii) a patient / client asks the Trust (as the commissioner) to investigate a complaint issue about the attitude of a member of staff of a Voluntary Agency with whom the Trust has contracted a home care service (e.g. personal care).

## **12. Contracted Services – Other**

This heading refers to complaint issues about services that are provided by Trusts via contractual / commissioned arrangements that are not captured in '*Contracted Regulated Establishments and Agencies*' (10). In the first instance, the service provider is expected to deal with complaint issues, however, where the complainant or Trust wishes, the matter may be investigated by the Trust under the HPSS Complaint Procedure.

Example: Attitude of a member of staff of facilities services operating under contract on Trust premises, (e.g. car clamping company or catering).

## **13. Delayed Admission from A&E**

This refers to patients waiting in Accident & Emergency, following decision to 'admit', before being allocated a bed in a ward. This should be distinguished from '*Waiting Times, A&E Departments*' (34) and '*Admission into Hospital, Delay / Cancellation (Inpatients)*' (2).

## **14. Discharge / Transfer Arrangements**

This heading refers to the adequacy of arrangements and includes early discharges or delayed discharges. It does not include failure to communicate discharge arrangements, which would be included under '*Communication / Information to Patients*' (6).

## **15. Environmental**

Complaint issues referring to the general condition or repair of the premises should be included under this heading. It also covers wider environmental issues, e.g. smoking.

## **16. Hotel / Support / Security Services**

This heading includes any complaint issue referring to ancillary or support services, e.g. portering, facilities, catering. It also refers to security issues, e.g. stolen vehicles parked on Trust property.

## **17. Infection Control**

This heading refers to compliance with infection control standards, e.g. hand hygiene; aseptic procedures; inappropriate use of personal protective equipment; incorrect disposal of waste or soiled linen; equipment / furniture not decontaminated. It covers issues around all infections but especially resistant micro-organism infections, e.g. MRSA, VRE. However, complaint issues about lack of information or not being informed would not be included in this heading, but would be logged under '*Communication / Information to Patients*' (6).

## **18. Mortuary & Post-Mortem**

This category refers to complaint issues in relation to the mortuary and/or post-mortem.

## **19. Patients' Privacy / Dignity**

This heading includes complaint issues specifically relating to the privacy or personal dignity of patients/clients.

## **20. Patients' Property / Expenses / Finance**

This heading refers to issues of the personal property, expenses or finance of patients/clients, e.g. due money for fostering; issues around direct payments; concerns about Trust charging / invoicing for clients in Nursing/Residential Home (either Private or Trust Home); broken hearing aid; lost spectacles / dentures.

Property damaged by staff arising in the course of care / treatment would fall into this category; however, property stolen from a patient's locker (as not being entrusted to or in the custodianship of staff and not known to be attributable to staff) would come under the heading of 'Hotel/Support/Security Services' (15). Complaint issues about stolen vehicles (visitor or patient) and property lost or stolen from visitors should similarly be logged as a 'Hotel/Support/Security Services' (15).

### **21. Patients' Status / Discrimination**

This heading refers to complaint issues regarding disadvantageous treatment. It includes discrimination under the 9 Equality categories (i.e. age, gender, marital status, political opinions, religious belief, racial group, sexual orientation, persons with or without a disability, persons with or without dependents) and under the Human Rights Act (e.g. Article 1, Right to Life; Article 3, Right to Freedom from Torture, Inhuman or Degrading Treatment; Article 8, Right to Respect for Private or Family Life). Complaint issues about patient choice should also be included under this heading.

### **22. Policy / Commercial Decisions**

This category refers to complaint issues related to policy and/or commercial decisions.

### **23. Professional Assessment of Need**

This heading refers to the assessment of need in either clinical or non-clinical contexts, however, should be distinguished from 'Clinical Diagnosis' (5).

### **24. Records / Record Keeping**

This refers to cases where records (such as medical notes, case files, X-rays) are unavailable, e.g. records have been mislaid or misfiled. Complaint issues about access rights to deceased patients' health records (governed by Access to Health Records (1993) NI Order) should be included under this heading. Complaint issues about any aspect of content of records or right of access should only be included under this heading, if they are not more appropriately dealt with under other procedures, such as Data Protection Act or Freedom of Information Act appeals processes.

### **25. Prison Healthcare Related Complaint Issues**

This relates to the South Eastern HSC Trust only, which has responsibility for securing the provision of health and social care services for prisoners.

### **26. Staff Attitude / Behaviour**

This category refers to complaint issues related to staff attitude and/or staff behaviour.

### **27. Theatre / Operation / Procedure, Delay / Cancellation**

This heading includes all aspects of delay or cancellation of operation or procedure once the patient is in hospital, e.g. Radiology investigation cancelled, or theatre cancelled due to lack of ICU beds, theatre overrun, no anaesthetist, etc. This should be distinguished from the cancellation or delay of admission for the procedure captured under 'Admission into Hospital, Delay/Cancellation' (Inpatients) (2).

### **28. Transport, Late or Non-arrival / Journey Time**

This heading refers to complaint issues about the late arrival or non-arrival of transport or about the length of journey.

### **29. Transport, Suitability of Vehicle / Equipment**

This heading refers to the appropriateness of the vehicle assigned and will include issues such as comfort, ease of access for the client group served. Complaint issues about the appropriateness of equipment would also be logged under this heading.

### **30. Treatment & Care, Quality**

This refers to the quality or standard of treatment and care provided. It also covers complaint issues relating to patient safety. However, it is to be distinguished from 'Treatment & Care, Quantity' (29) which refers to the quantity or amount of treatment and care.



### **31. Treatment & Care, Quantity**

This refers to the amount of treatment and care provided or available, e.g. someone receiving good quality home help but feel they are receiving inadequate number of hours.

### **32. Waiting Lists, Community Services**

This heading refers to the time spent waiting for either assessment or for the delivery of services following assessment, e.g. waiting list for an OT assessment, waiting list for a care package. 'Unmet need' should also be logged under this heading. This heading should be distinguished from '*Waiting Times, Community Services*' (31).

### **33. Waiting Times, Community Services**

This heading refers to waiting time during delivery of community services. It would include such issues as erratic timing, failure of professional staff to turn up at the specified time for an appointment. It should be distinguished from '*Waiting Lists, Community Services*' (30).

### **34. Waiting Times, A&E Departments**

Complaint issues regarding waiting time for initial assessment or waiting time to be treated should all be logged under this heading. Complaint issues about delayed admission from A&E are not included here but should be listed under '*Delayed Admission from A&E*' (12).

### **35. Waiting Times, Outpatient Departments**

This heading refers to the time waiting at an outpatient appointment, other than at A&E. It should be distinguished from '*Appointments, Delay / Cancellation (Outpatient)*' (4).

### **36. Other**

This is a residual heading for any complaint issues, which do not fall into any categories listed above.

## **APPENDIX 4: General Category by Subject**

### **Premises**

Access to Premises  
Environmental  
Hotel/Support/Security Services  
Infection Control

### **Admissions/Discharges**

Admission into Hospital, Delay/Cancellation (Inpatients)  
Delayed Admission from A&E  
Discharge/Transfer Arrangements

### **Aids/Adaptations/Appliance**

Aids/Adaptations/Appliances

### **Appointments**

Appointments, Delay/Cancellation (Outpatient)  
Waiting Lists, Community Services  
Waiting Times, Community Services  
Waiting Times, A&E Departments  
Waiting Times, Outpatient Departments

### **Children Order**

Children Order Complaint Issues

### **Diagnosis/Operation/Treatment**

Clinical Diagnosis  
Consent to Treatment  
Theatre/Operation/Procedure, Delay/Cancellation  
Treatment & Care, Quality  
Treatment & Care, Quantity

### **Information & Communication**

Communication/Information to Patients  
Complaints Handling  
Confidentiality  
Records/Records Keeping

### **Contracted Services**

Contracted Regulated Establishments and Agencies  
Other Contracted Services

### **Mortuary**

Mortuary & Post-Mortem

### **Patient Experience**

Patients Privacy/Dignity  
Patients Property/Expenses/Finance  
Patients Status/Discrimination  
Staff Attitude/Behaviour

### **Policy/Commercial Decisions**

Policy/Commercial Decisions

### **Prison Healthcare**

Prison Healthcare Related Complaint Issues

### **Professional Assessment of Need**

Professional Assessment of Need

### **Transport**

Transport, Late or Non-arrival/Journey Time  
Transport, Suitability of Vehicle/Equipment

### **Other**

Other

## Appendix 5: HSC Board Complaints

The information presented within this release relating to FPS complaints derives from the HSC Board CHB statistical return. The CHB is collected on a quarterly basis by the HSC Board, in respect of the services for which they have responsibility.

*Complaints in Health and Social Care: Standards and Guidelines for Resolution and Learning* sets out how HSC organisations should deal with complaints raised by people who use or are waiting to use their services.

Under HSC Complaints Procedure all FPS practices are required to forward to the HSC Board anonymised copies of each letter of complaint received along with the subsequent response, within 3 working days of this being issued.

The first stage of the HSC Complaints Procedure is known as 'local resolution'. The purpose of local resolution is to provide an opportunity for the complainant and the organisation to attempt a prompt and fair resolution of the complaint. In the case of FPS practices, local resolution involves a practitioner seeking to resolve the complaint through discussion and negotiation.

Where a complainant does not wish to approach the FPS practice directly, HSC Board complaints staff, with the agreement of both the practice and complainant, may act as an intermediary or 'honest broker' with the aim of assisting in the local resolution of the complaint.

The HSC Board has a responsibility to record and monitor the outcome of all complaints lodged with them. It will provide support and advice to FPS in relation to the resolution of complaints and it will also appoint independent experts, lay persons or conciliation services, where appropriate.

**Further information** on HSC Trust Complaint Issues in Northern Ireland, is available from:

**Michael O'Donnell**

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